STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0014243	A. BUILDING: _____ B. WING _____	04/03/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DIVINE LIVING AFH LLC	7752 W BRENTWOOD AVE MILWAUKEE, WI 53223

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
M 000	INITIAL COMMENTS On 04/03/2024, Surveyor concluded a standard survey and four complaint investigations at Divine Living AFH LLC. Two deficiencies were identified. Four complaints were unsubstantiated. Census: 4	M 000		
M 338	88.05(4)(c)1 EXITING FROM THE FIRST FLOOR Exiting from the first floor. The first floor of the home shall have at least 2 means of exiting which provides unobstructed access to the outside. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure the first floor of the home had at least 2 means of exiting which provided unobstructed access to the outside for 3 of 4 residents. The front sidewalk and two emergency exits were not free of snow. Findings include: On 03/22/2024 at 9:00 a.m., Surveyor arrived at facility and observed the driveway, the front sidewalk and two emergency exits not free of snow. The driveway measured approximately 10 yards from the sidewalk to the side emergency exit and approximately 8 yards from the end of the front ramp. At the front of the home, there was a ramped entrance, approximately 3 yards in length leading from the driveway up to front door.	M 338		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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M 338	Continued From page 1 All areas were fully covered with approximately 5 ½ inches of snow. Surveyor observed ramped exit located on the side of the facility covered with approximately 3 ½ inches snow. On 01/25/2022 at 9:30 a.m., Surveyor interviewed Caregiver B, who explained Licensee A hired someone to shovel the snow and sidewalks. Caregiver B told Surveyor s/he usually does the snow in case they needed to call an ambulance. Caregiver B stated, "I just figured they'd be here by now." On 01/25/2022 at 9:55 a.m., Surveyor observed Licensee A arrived at facility and was shoveling the front ramp. On 01/25/2022 at 10:12 a.m., Licensee A observed Caregiver B outside shoveling. Licensee A explained to Caregiver B s/he should not shovel because s/he expected Snow Removal Service E to be at the facility soon. Licensee A explained Snow Removal Service E was responsible for clearing driveway, exits and sidewalks of ice and snow. Surveyor asked Licensee A where the resident's meeting place was, in case of a fire or emergency. Licensee A stated, "Across the street." Licensee A confirmed two of three residents utilized walkers. Licensee A stated, "Staff would have to help them get through the snow." On 04/03/2024 at 3:15 p.m., Surveyor interviewed Licensee A who stated s/he was frustrated because s/he had two different snow removal services and neither of them made it to his/her facility in a timely manner. S/He would consider double staffing in the future when there was a weather emergency. Licensee A stated s/he knew s/he needed the exits to be cleared.	M 338		

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M 464	88.07(3)(d) MEDICATION- WRITTEN ORDER Before the licensee or service provider dispenses or administers a prescription medication to a resident, the licensee shall obtain a written order from the physician who prescribed the medication specifying who by name or position is permitted to administer the medication, under what circumstances and in what dosage the medication is to be administered. The licensee shall keep the written order in the resident's file. This Rule is not met as evidenced by: Based on record review and interview, the provider did not obtain a written order from the physician who prescribed medications to the resident, stating who can administer the medications for 1 of 3 residents (Resident 1). Resident 1 required staff to administer medications. Resident 1 was administering his/her own blood sugar tests without a physician order. Findings include: On 03/22/2024 at approximately 1:00 p.m., Surveyor reviewed Resident 1's record. The following was identified: Resident 1 was admitted on 10/01/2019 with diagnoses of type 2 diabetes, psychosis, and epilepsy. Resident 1's individual service plan (ISP), dated 10/30/2023, indicated the provider administered Resident 1's medication. Resident 1's February and March 2024	M 464		

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M 464	Continued From page 3	M 464		

medication administration records (MARs) indicated staff were administering Resident 1's medication. Resident 1's record did not contain a written order from a physician stating Resident 1 could administer his/her own blood sugar test. Resident 1's MAR indicated provider was to administer blood sugar testing daily.

Resident 1's Member Centered Plan (MCP), dated 09/01/2023, under medication management read, "[Resident 1] will remain compliant with recommended medication schedule in the next 6 months ... [Resident 1] does not fully understand what his/her full medication regimen is, indications, proper dosages, and administration times of all of his/her medications. Medications come in bubble packs from his/her pharmacy and adult family home (AFH) staff assists with administration and management." In addition, under medication management, the MCP read, "Blood Sugar Testing: Yes."

On 03/22/2024 at approximately 9:25 a.m., Surveyor interviewed Caregiver B, who explained s/he administered Resident 1's pills for him/her. However, Resident 1 completed his/her own blood sugar checks. Caregiver B stated, "I just document the number s/he gets after his/her blood sugar test. S/He only takes pills. No insulin shots."

On 03/22/2024 at approximately 10:28 a.m., Surveyor interviewed Licensee A, who stated Resident 1 completed his/her own blood sugar testing. The staff enter the blood sugar reading into the computer. Resident 1 completed daily, morning blood sugars. Licensee A stated, "We don't have a physician's order for him/her to do his/her own blood sugars. We watch him/her do it

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M 464	Continued From page 4 and write it down." On 03/22/2024 at approximately 11:08 a.m., Surveyor interviewed Resident 1, who stated, "I do my own blood sugar shots, but they keep all of the stuff in the medication cart." On 04/03/2024 at 3:15 p.m., Surveyor interviewed Licensee A who stated Resident 1 would be seeing his/her primary care physician on 04/04/2024. Licensee A would request an evaluation for Resident 1's ability to take his/her own blood sugars. Licensee A confirmed being aware of needing a written physician's order that stated Resident 1 was able to independently take his/her own blood sugars.	M 464		