STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0014663	A. BUILDING: _____ B. WING _____	C 06/29/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CARE PARTNERS ASSISTED LIVING ANTIGO II	1415 10TH AVENUE ANTIGO, WI 54409

(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
N 000	Initial Comments On 06/27/2023, Surveyor conducted a complaint investigation (x2) and standard licensure survey. Data collection continued through 06/29/2023. One of 2 complaints was substantiated. Two deficiencies were identified. Census: 11	N 000		
N 389	83.35(3)(d) Service plans updated annually or on changes Individual service plan review. Annually or when there is a change in a resident ' s needs, abilities or physical or mental condition, the individual service plan shall be reviewed and revised based on the assessment under sub. (1). All reviews of the individual service plan shall include input from the resident or legal representative, case manager, resident care staff, and other service providers as appropriate. The resident or resident ' s legal representative shall sign the individual service plan, acknowledging their involvement in, understanding of and agreement with the individual service plan. This Rule is not met as evidenced by: Based on record review and interview, the provider did not revise Resident 1's individual service plan (ISP) when there was a change in Resident 1's needs, abilities, physical and mental condition. Findings include: On 04/26/2023, the Department received a	N 389		

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

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N 389	Continued From page 1	N 389		

complaint alleging Resident 1 was left soiled in bed for an undetermined amount of time and Resident 1's mattress, pillow and clothes were soaked with urine. On 05/08/2023, the Department received a complaint alleging Resident 1 was soaked with urine for an undetermined amount of time and Resident 1's room had a strong urine smell.

The facility is licensed to serve up to 16 residents in the client groups advanced aged, irreversible dementia/Alzheimer's and terminally ill.

On 06/27/2023, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 01/25/2019. Resident 1's diagnoses included dementia/Alzheimer's. Resident 1 was admitted to hospice on 06/21/2022. Resident 1 died on 05/23/2023.

Resident 1's ISP, dated 02/10/2023, noted Resident 1 "will toilet [himself/herself] but does need reminders at times, refuses to go when reminded at times, wears depends at times or underwear" and, Resident 1 is "ambulatory on [his/her] own, uses wheelchair when weaker, some gate [sic] imbalance at time, staff propels wheelchair."

Resident 1's nursing notes, dated 04/17/2023, read, in part: "Res [sic] is very weak today, needs a 2 assist to stand and pivot. Nurse (hospice) brought a bed alarm and chair alarm." Nursing notes, dated 05/08/2023, read, in part: "...Two person transfer from bed to chair, [Resident 1] has minimal ability to bear wt. [sic] (weight) on legs/feet. Hoyer (mechanical lift) available in room."

According to Resident 1's "Step Assessment

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N 389	Continued From page 2 Tool," dated 04/26/2023, Resident 1 was "Dependent - always requires assistance from place to place, even for wheelchair mobility, cannot maneuver without help" and Resident 1 was "Incontinent of either bowel or bladder, does not recognize need to use bathroom." On 06/29/2023 at 8:20 AM, Surveyor interviewed Caregiver B. Caregiver B informed Surveyor s/he had been working at the facility for over a year and Resident 1 started to need assistance of 1 to 2 people (mostly 2 people) for mobility and toileting after April 2023. Caregiver B could not recall if Resident 1's ISP was updated after February 2023 (last ISP update). On 06/29/2023 at 11:30 AM, Surveyor interviewed Administrator A. Administrator A informed Surveyor that s/he completes a quarterly "Step Assessment Tool" for all residents and updates the ISPs when there are changes for residents. Administrator A stated s/he lets the staff know when there are updates to ISPs. In regard to Resident 1's ISP, Administrator A reported s/he completed the "Step Assessment Tool" and it was his/her fault Resident 1's ISP was not updated. Administrator A confirmed Resident 1's ISP was last updated on 02/10/2023. Administrator A indicated Resident 1's ISP should have been updated after s/he completed the "Step Assessment Tool" on 04/26/2023.	N 389		
N 425	83.38(1)(a) Personal care. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the resident's highest level of functioning. In addition to the assessed needs as determined under s.	N 425		

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N 425	Continued From page 3 DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Personal care. Personal care services shall be designed and provided to allow a resident to increase or maintain independence. This Rule is not met as evidenced by: Based on record review and interview, the provider did not provide adequate services to meet the needs of Resident 1 on 04/26/2023. Findings include: On 04/26/2023, the Department received a complaint alleging Resident 1 was left soiled in bed for an undetermined amount of time and Resident 1's mattress, pillow and clothes were soaked with urine. On 05/08/2023, the Department received a complaint alleging Resident 1 was soaked with urine for an undetermined amount of time and Resident 1's room had a strong urine smell. The facility is licensed to serve up to 16 residents in the client groups advanced aged, irreversible dementia/Alzheimer's, and terminally ill. On 06/27/2023, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 01/25/2019. Resident 1's diagnoses included dementia/Alzheimer's. Resident 1 was admitted to hospice on 06/21/2022. Resident 1 died on 05/23/2023.	N 425		

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N 425	Continued From page 4 On 06/27/2023, Surveyor reviewed Caregiver B's employee file. According to an "Employee Warning Notice," dated 04/25/2023, Caregiver B received a warning for not changing Resident 1 and leaving Resident 1 "soaked/dirty" on 04/24/2023. On 06/27/2023, Surveyor reviewed Caregiver C's employee file. According to an "Employee Warning Notice," dated 04/25/2023, Caregiver C received a warning for "not getting cares done" and for leaving Resident 1 wet/dirty on 04/24/2023. 0n 06/28/2023 at 1:00 PM, Surveyor interviewed Administrator A. Surveyor asked Administrator A, "Based on the 'Employee Warning Notice' for both [Caregiver B and Caregiver C] regarding [Resident 1's] personal cares on 04/24/2023, what did you conclude? Administrator A responded, "They were both informed that if it happened again they would be terminated from the job. They both signed the write-up agreeing (to the terms). I don't feel that it was a continuous problem with [Resident 1]. I think that they struggled with working together that morning before hospice came for the visit from what they expressed to me that day when written up. We did separate them from working together as well as I could after that incident." Administrator A informed Surveyor that s/he was aware of a care issue with Resident 1 on 04/24/2023 but was not aware of any concerns with Resident 1's cares on 05/08/2023. On 06/29/2023 at 8:20 AM, Surveyor interviewed Caregiver B. Caregiver B admitted that s/he and [Caregiver C] (who no longer works at the facility)	N 425		

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N 425	Continued From page 5 did not check on Resident 1 timely on 04/24/2023. Caregiver B stated that Caregiver B and Caregiver C were assisting another resident with cares and then got breakfast ready and served breakfast before checking on Resident 1. Caregiver B admitted that when Caregiver B and Caregiver C checked on Resident 1 on 04/24/2023 (later morning), Resident 1 was "soaked with urine head to toe. The Chux (disposable under pad) and mattress were also wet." Caregiver B denied having any problems and/or delays in providing care for Resident 1 on 05/08/2023 and indicated s/he helped hospice give Resident 1 a shower on 05/08/2023.	N 425		