Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	510292	A. BUILDING: _____ B. WING _____	11/18/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TARA PLACE	N5160 97OTH ST ELK MOUND, WI 54739

(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 11/14/2024, Surveyor conducted an abbreviated licensing survey and self-report investigation at Tara Place. Data was collected through 11/18/2024. Two violations were identified. Census: 7	N 000		
N 346	83.32(3)(b) Rights of Residents: Confidentiality In addition to the rights under s. 50.09, Stats., each resident shall have all of the following rights: Confidentiality. Confidentiality of health and personal information and records, and the right to approve or refuse release of that information to any individual outside the CBRF, except when the resident is transferred to another facility or as required by law or third-party payment contracts and except as provided in s.146.82(2) and (3), Stats. The CBRF shall make the record available to the resident or the resident ' s legal representative for review. Copies of the record shall be made available within 30 days, if requested in writing, at a cost no greater than the cost of reproduction. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure resident health information was kept confidential when the provider posted the residents' names and medication times in a public area. Findings include:	N 346		

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

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N 346	Continued From page 1 The provider is licensed to care for 8 residents in the following client groups: alcohol and drug dependent, developmentally disabled, and mental illness. On 11/14/2024 at 11:28 AM, Surveyor observed a document posted on the medication cabinet in the foyer. The document included the names of each resident and their medication times throughout the day. For example, the document read: "Resident Medication Times 7:00-8:00am [Resident 1] [Resident 2] [Resident 3] + (and) Insulin [Resident 4] + Insulin [Resident 5] [Resident 6] 12pm Lunch [Resident 3] Insulin [Resident 4] Meds + Insulin..." As Surveyor was reading the document, Program Manager (PM) A stated, "I've always wondered if that was OK." PM A stated staff and residents used the document to keep track of medication passes throughout the day. PM A removed the document and stated they would come up with another system.	N 346		
N 481	83.43(1) Environment safe, clean, and comfortable Environment. The CBRF shall provide a living environment that is safe, clean, comfortable, and homelike. All common dining and living areas shall contain furnishings appropriate to the intended use of the room.	N 481		

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N 481	Continued From page 2 This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure the facility was clean and homelike. Findings include: On 11/14/2024, Surveyor toured the facility. The carpeted floors throughout the home were littered with debris and appeared to not have been vacuumed recently. The upstairs, where most of the bedrooms were, had a stale odor. All the furniture in the living room (2 couches and 2 recliners) was covered in disposable incontinence pads. At 11:55 AM, Surveyor interviewed Program Manager (PM) A. PM A stated staff placed incontinence pads on the furniture because there was a resident that had issues with incontinence. Surveyor discussed concern that the disposable pads were not homelike. PM A stated s/he understood the concern and would try to find another solution to protect the furniture. PM A stated hygiene was not a priority for most residents at the facility, and s/he hoped to have all carpeting removed from the home soon. PM A stated staff were responsible for deep cleaning the facility common areas.	N 481		