STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0020100	A. BUILDING: _____ B. WING _____	R-C 10/23/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HOME CARE SOLUTIONS AT HOME	436 THIRD ST HARTFORD, WI 53027

(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 10/20/2025 with information through 10/23/2025, Surveyors conducted a verification visit at Home Care Solutions at Home, an Adult Family Home (AFH) in Hartford, WI. Twelve deficiencies were identified. Three of twelve are repeat deficiencies from Statement of Deficiency (SOD) 2VVJ11, dated 06/09/2025. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 1	{M 000}		
{M 128}	88.03(5)(b) CHANGE IN HOUSEHOLD MEMBERS A change in household members except paid staff. This Rule is not met as evidenced by: Based on record review and interview, Licensee C did not report changes in household members to the Department within 7 days. Live-In Family Member D moved into the home. This is a repeat deficiency. See Statement of Deficiency (SOD) 2VVJ11, dated 06/09/2025. Findings include: On 10/20/2025 at approximately 11:30 AM, Surveyors interviewed Caregiver A who stated that Live-In Family Member D resides in the house. Surveyors reviewed the facility e-file for correspondence. No correspondence was found.	{M 128}		

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

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{M 128}	Continued From page 1 On 10/22/2025 at approximately 1:00 PM, Surveyors interviewed Licensee C and asked if the Department had been notified of the change in household members. Licensee C stated no, it was an oversight and Live-In Family Member D's information had not been sent to the Department as required.	{M 128}		
M 132	88.03(5)(d) CHANGE OR DAMAGE TO STRUCTURE A change in the home's structure or damages to the home that may present a hazard to the residents. This Rule is not met as evidenced by: Based on record review and interview, the provider did not report a change in the home's structure or damages to the home that present a hazard to the residents. The facility's basement had a sewer leak and as a result, the licensee moved all the residents from the facility. This was not reported to the Department. Findings include: On 10/22/2025 at approximately 2:30 PM, Surveyor interviewed Resident 1. Resident 1 stated s/he had to move to Licensee C's personal home for about a week due a sewer leak in the basement. On 10/22/2025 at approximately 2:45 PM, Surveyor reviewed the Department notifications. There was no record Resident 1 had to relocate from the facility due to damages to the home.	M 132		

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M 132	Continued From page 2 On 10/22/2025 at 3:09 PM, Surveyors interviewed Licensee C. Licensee C stated the issue was fixed as soon as possible and alternative housing was provided while plumbing was redone which was approximately a week. Licensee C stated Resident 1 and Caregiver A and his/her family were relocated during this time. On 10/22/2025 at approximately 3:30 PM, Surveyors requested documentation regarding the sewer leakage and repairs. On 10/23/2025 at 11:18 AM, Licensee C stated s/he would reach out to the landlord. Licensee C stated s/he knew they violated Department of Health Services (DHS) code 88. Licensee C stated s/he is well aware of the deficiencies and has every intention of being within state guidelines within the 45 days the state allows them.	M 132		
M 134	88.03(5)(e)1 SIGNIFICANT CHANGE TO THE RESIDENT Within 24 hours, a significant change in resident status, such as but not limited to an accident requiring hospitalization, missing from the home or a reportable death. A death shall be reported if there is reasonable cause to believe the death was related to use of a physical restraint or psychotropic medications, was a suicide or was accidental. This Rule is not met as evidenced by:	M 134		

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M 134	Continued From page 3	M 134		

Based on record review and interview, the licensee did not report to the Department of a significant change in a resident status for 1 of 1 resident. On 08/26/2025, Resident 1 left the facility and staff were unaware of where s/he was and had to call law enforcement to help look for him/her. Resident 1 was found approximately a half a mile away from the home. Law enforcement was contacted by the facility to assist with Resident 1. Resident 1 was returned home by law enforcement. This incident was not reported to the Department.

Findings include:

Resident 1 was admitted to the facility on 09/17/2024 with diagnoses of enterocolitis d/t clostridium difficile, hypersomnia, pain in thoracic spine, pervasive developmental disorder, Attention-Deficit/Hyperactivity Disorder (ADHD), Thoracogenic scloiosis-thoracic region, unspecified mood disorder.

On 10/20/2025 at 12:31 PM, Surveyors reviewed CAD Activity Detail Report dated 08/26/2025 stated the following:
"-08/26/2025 at 10:27 PM: [Sibling] is coming from Madison. Left Madison about 20 minutes ago. [Resident 1] is on anti-psychotics and is autistic. [Resident 1] can be aggressive. [Resident 1] is on foot and was stating [s/he] was getting tired.
-10:36 PM: [Resident 1] lives in yellow house on 3rd street.
-10:38 PM: Sounds like [Resident 1] might be with someone at this time. [Resident 1] seems disoriented.
-10:39 PM: [Resident 1] can be a danger to [him/herself] and others. No weapons.
-10:39 PM: When on [his/her] medication

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M 134	Continued From page 4	M 134		

[Resident 1] is gentle and sweet. [Resident 1] off meds can be aggressive.
-10:45 PM: [Resident 1] is in the area of [his/her] home according to our caller.
-10:50 PM: Last time [s/he] did fight a little. No additional squad needed.
-11:02 PM: [Resident 1] is now home and calmed down. [Sibling] notified."

On 10/20/2025 at approximately 12:45 PM, Surveyors interviewed Caregiver A. Caregiver A stated s/he was unaware of Resident 1 leaving the home. Caregiver A stated s/he must have not been working that day but there are times when Resident 1 becomes upset and leaves the home but s/he stated s/he is only paid for 5 hours of care so unless s/he is at the home, s/he may not know when these things happen.

On 10/20/2025 at 4:30 PM, Surveyor reviewed Department records and did not see evidence of a self-report regarding Resident 1.

On 10/21/2025 at 8:34 PM, Surveyor interviewed Police Officer G regarding incident on 08/26/2025. Police Officer G stated s/he and his/her co-worker were the ones to respond to Resident 1 that night. Police Officer G stated someone from the facility had called because they were unaware where Resident 1 was. Police Officer G and his/her co-worker located Resident 1 in Hartford and was able to bring Resident 1 home.

On 10/22/2025 at approximately 1:15 PM, Surveyors interviewed Licensee C and House Manager H. Licensee C stated s/he was not aware they needed to report to the Department. Licensee C stated s/he reported to Resident 1's Managed Care Organization (MCO). Licensee C

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M 134	Continued From page 5 stated s/he is aware now moving forward s/he will need to report this information to the Department as well.	M 134		
M 218	88.04(2)(b) AWAKE STAFF FOR CONTINUOUS CARE The licensee shall ensure that he or she or a service provider is present and awake at all times if any resident is in need of continuous care. This Rule is not met as evidenced by: Based on observation, record review, and interview, the provider did not ensure staff were present when residents in need of continuous care were present. Findings include: The provider is licensed to care for up to 4 residents in the client groups irreversible dementia/Alzheimer's disease, advanced aged, alcohol/drug dependent, emotionally disturbed/mental illness, pregnant women/counseling, correctional clients, terminally ill, traumatic brain injury, and/or developmentally disabled. On 10/20/2025 at approximately 11:30 AM, Surveyors interviewed Caregiver A. Caregiver A shared there was 1 resident living in the house, who currently was at day program. Caregiver A stated Resident 1 needs assistance with meals and medications. Caregiver A stated s/he lives in the house with Resident 1, but works another job 1 night a week, every other Monday and opposite week every other Wednesday from 5:00 PM to	M 218		

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M 218	Continued From page 6	M 218		

8:00 AM. Caregiver A acknowledged Resident 1 was in the house overnight 1 time per week when s/he worked at another facility, and if s/he had other plans. Caregiver A stated s/he only gets paid to provide care for 5 hours per day.

On 10/20/2025 at approximately 12:00 PM, Surveyors reviewed the individual service plan (ISP) for Resident 1. Resident 1 admitted 09/17/2024. The ISP was dated 08/27/20025. The ISP reflected:
Medications - "Medications are administered by staff and an order from the physician is obtained"
Level of Supervision - "Requires some supervision: During ADLs and meals/food prep. And time of crisis"
Person Care: "Needs some assistance"
Eating: "Staff to offer assistance in cooking meals"
Oral Care: "Staff to encourage resident to brush teeth 2 x a day"
Grooming: "Resident needs multiple daily prompts to shower and groom [him/herself] thoroughly" "Staff to continue to monitor showering and grooming"
Getting Dressed: "Staff to encourage resident to wear weather appropriate clothes"
Other: "Resident needs constant reminders to keep room clean and clutter free" "Staff to encourage resident to keep room clean and clutter free. Remind resident to not leave garbage in room due to dog being in room as well"
General Health: Resident "does suffer from severe anxiety, severe inappropriate thoughts of potential harm to others, severe mental trauma"
Chronic or Recurring Illness: "Staff will ensure that Resident takes [his/her] meds properly and sees all [his/her] physicians when needed to keep [his/her] health as stable as possible"
Aggressive behaviors: "Resident has verbally

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M 218	Continued From page 7 aggressive behaviors and will threaten staff/family if outcome of conversation does not go [his/her] way. Other: "Resident will threaten to walk to other states because they are mad at a person" Destruction of Property: Resident has showed minor signs of destruction of property and has thrown a bedframe out in the yard due to anger" There was no documentation of Resident 1 being allowed to be left in the home unsupervised. On 10/20/2025 at approximately 1:00 PAM, Surveyors interviewed Licensee C. Licensee C confirmed 1 night a week Caregiver A, who was a live in caregiver, works at another facility. Licensee C stated s/he is only paid by the managed care organization (MCO) to provide 5 hours per day. The provider did not ensure staff were present when residents in need of continuous care were present.	M 218		
M 410	88.06(3)(d) INDIVIDUAL SERVICE PLAN The individual service plan shall contain at least the following: This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure the Individual Service Plan (ISP) included information that was specific to the individual and accurately	M 410		

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identified current needs for 1 of 1 resident (Resident 1). Resident 1's ISP did not include information on elopement, abusive behaviors, or use of a beat bag (which is a punching bag that is outside hanging from a tree, so when Resident 1 feels upset or angry, s/he can go out there and hit/punch the bag).

Findings include:

On 10/20/2025, Surveyors reviewed Resident 1's record and identified the following:
-ISP, dated 08/27/2025, stated, in part:
*Level of Supervision: requires some supervision: during ADLs and meals/food preparation and times of crisis
*General Health Diagnosis: Resident physically looks healthy, but does suffer from severe anxiety, severe inappropriate thoughts of potential harm to others, severe mental trauma
*Abusive behaviors: Resident does not have physically abusive behaviors. Resident has verbally abusive behaviors ie. Yelling, threatening
*Wandering/Elopement: Resident shows no signs of wandering or eloping.

-Police Department CAD (Computer Aided Dispatch) Activity Detail Report, dated 08/26/2025, stated, in part:
*10:27 PM ...is on foot and was stating was getting tired ...
*10:50 PM ...eyes on him/her, waiting for 2nd unit to arrive
*10:54 PM ...has been dropped off
*11:02 PM ...Resident 1 is now home and calmed down ....

-Resident 1's Incident Report, dated 10/07/2025, stated, in part: ...Resident then got more aggressively angry with writer ...Resident was

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standing over writer screaming and stomping his/her feet ...Resident then had his/her hands inches away from writer's neck in a choking motion ...Resident heard family member coming down the stairs and very quickly moved his/her hands away from writer's neck ...spouse was standing next to writer and resident looked at writer and stated "I'm going to, I want to, I'm going to ...." Pointing at writer's spouse in hitting motions. ...Resident then stated "I'm calling the cops" ...Writer explained to police that resident was hallucinating/imagining this whole fight with (friend at another group home) ...Writer explained to the officers that resident was going to choke writer but stopped because spouse came downstairs, that he/she was going to beat writer's spouse up, and "beat the [explicative] out of those people" (friends from another group home) ...

-Resident 1's Managed Care Organization's Behavior Support Plan, dated 09/2025, states, in part:
*Behavior: Psychosis or in psychoses I may just stare off or act completely confused, no memory, disoriented and may hallucinate.
*Strengths: ...Resident 1 can be very independent when it comes to staying by him/herself or walking independently somewhere. (currently on hold per client concerns) *important to note this is lined through, initialed by Licensee C, with no date.
*Behavior: Unfounded threats ...08/27/2025: Beat bag is mounted on tree outside. Resident 1 is prompted/encouraged to use beat bag when s/he is feeling angry or elevated.
Important to note: there is no mention of hallucination or beat bag in the facility ISP

On 10/20/2025 at approximately 11:30 AM, Surveyors interviewed Caregiver A who stated

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M 410	Continued From page 10 that Resident 1 had been aggressive and choked Caregiver A and the police were called. On 10/20/2025 at approximately 1:00 PM, Surveyor observed punching bag/boxing bag mounted to a tree in the back yard of the home. Caregiver A stated that Resident 1 will use it when s/he is angry/elevated. Surveyor asked if Resident 1 has had any incidents while using the bag due to proximity to the tree. Caregiver A stated s/he tries to watch while Resident 1 uses it as it makes Caregiver A nervous. On 10/21/2025 at approximately 8:35 PM, Surveyor interviewed Police Officer G who stated the provider called on 8/26/25 and stated that Resident 1 was missing. On 10/22/2025 at 1:14 PM, Surveyors interviewed Licensee C. Licensee C stated Resident 1 ideally needs to be in 3-4 bed adult family home and just supportive care through the MCO where s/he only has 5 hours of paid care. Licensee C stated s/he would be talking to Resident 1's MCO team and trying to figure this out in the next week or so.	M 410		
M 420	88.06(3)(d)5 SIGNED STATEMENT OF AGREEMENT A statement of agreement with the plan, dated and signed by all persons involved in developing the plan. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 individual service plan (ISP) reviewed included a statement of	M 420		

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M 420	Continued From page 11 agreement with the plan, dated and signed by all persons involved with developing the plan. Resident 1's ISPs did not include a signed statement of agreement with all parties involved. Findings include: On 10/20/2025, at approximately 12:30 PM, Surveyors reviewed resident records and identified the following concerns: - Resident 1 was admitted to the provider's home on 09/17/2024. Resident 1 was his/her own person. Resident 1's most recent ISP was dated 08/27/2025 and did not include his/her signature. On 10/20/2025 at 12:45 PM, Surveyors interviewed Caregiver A. Caregiver A stated Resident 1 is his/her own person and should have signed his/her current ISP. Caregiver A stated s/he was not sure why Resident 1 did not sign his/her ISP.	M 420		
M 434	88.07(1)(e) Supervision The licensee shall arrange for a service provider to be present in the home when the licensee is gone overnight or when the licensee's absence prevents the resident from receiving the services, training or supervision specified in the resident's individual service plan under s. HSS 88.06(3). This Rule is not met as evidenced by: Based on observation, interview, and record	M 434		

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review, the provider did not arrange for a service provider to be present in the home when a resident required services or supervision. The licensee only had 5 hours a day of care for Resident 1 and left the facility unsupervised at least once a week during overnights from 4:00 PM-8:00 AM.

Findings include:

Definition of "Continuous care" from DHS 88 means the need for supervision, intervention or services on a 24-hour basis to prevent, control and ameliorate a constant or intermittent mental or physical condition which may break out or become critical during any time of the day or night.
Note: Examples of persons who need continuous care are wanderers, persons with irreversible dementia, persons who are self abusive or who become agitated or emotionally upset and persons whose changing or unstable health condition requires monitoring.

On 10/20/2025 at 11:30 AM, Surveyors reviewed resident records and identified the following:

-Resident 1 was admitted on 09/17/2024.
-The ISP was dated 08/27/20025. The ISP reflected:
Medications - "Medications are administered by staff and an order from the physician is obtained"
Level of Supervision - "Requires some supervision: During ADLs and meals/food prep. And time of crisis"
Person Care: "Needs some assistance"
Eating: "Staff to offer assistance in cooking meals"
Oral Care: "Staff to encourage resident to brush teeth 2x a day"

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Grooming: "Resident needs multiple daily prompts to shower and groom himself thoroughly" "Staff to continue to monitor showering and grooming"
Getting Dressed: "Staff to encourage resident to wear weather appropriate clothes"
Other: "Resident needs constant reminders to keep room clean and clutter free" "Staff to encourage resident to keep room clean and clutter free. Remind resident to not leave garbage in room due to dog being in room as well"
General Health: Resident "does suffer from severe anxiety, severe inappropriate thoughts of potential harm to others, severe mental trauma"
Chronic or Recurring Illness: "Staff will ensure that Resident takes [his/her] meds properly and sees all [his/her] physicians when needed to keep [his/her] health as stable as possible"
Aggressive behaviors: "Resident has verbally aggressive behaviors and will threaten staff/family if outcome of conversation does not go [his/her] way.
Other: "Resident will threaten to walk to other states because they are mad at a person"
Destruction of Property: Resident has showed minor signs of destruction of property and has thrown a bedframe out in the yard due to anger"

-Police Department CAD (Computer Aided Dispatch) Activity Detail Report, dated 8/26/25, states, in part:
*10:27 PM ...is on foot and was stating was getting tired ...
*10:50 PM ...eyes on (him/her), waiting for 2nd unit to arrive
*10:54 PM ...has been dropped off
*11:02 PM ...Resident 1 is now home and calmed down ....

-Resident 1's Incident Report, dated 10/7/25,

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M 434	Continued From page 14	M 434		

states, in part: ...Resident then got more aggressively angry with writer ...Resident was standing over writer screaming and stomping his/her feet ...Resident then had his/her hands inches away from writer's neck in a choking motion ...Resident heard family member coming down the stairs and very quickly moved his/her hands away from writer's neck ...spouse was standing next to writer and resident looked at writer and stated "I'm going to, I want to, I'm going to ...." Pointing at writer's spouse in hitting motions. ...Resident then stated "I'm calling the cops" ...Writer explained to police that resident was hallucinating/imagining this whole fight with (friend at another group home) ...Writer explained to the officers that resident was going to choke writer but stopped because spouse came downstairs, that he/she was going to beat writer's spouse up, and "beat the f*ck out of those people" (friends from another group home).

There was no documentation of Resident 1 being allowed to be left in the home unsupervised.

-Resident 1's Managed Care Organization's Behavior Support Plan, dated 9/2025, stated, in part:
*Behavior: Psychosis or in psychoses I may just stare off or act completely confused, no memory, disoriented and may hallucinate.
*Strengths: ...Resident 1 can be very independent when it comes to staying by [him/herself] or walking independently somewhere. (currently on hold per client concerns) *important to note this is lined through, initialed by Licensee C, with no date.
*Behavior: Unfounded threats ...08/27/2025: Beat bag is mounted on tree outside. Resident 1 is prompted/encouraged to use beat bag when s/he is feeling angry or elevated.

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M 434	Continued From page 15 Important to note: there is no mention of hallucination or beat bag in the facility ISP. On 10/20/2025 at approximately 1:00 PAM, Surveyors interviewed Licensee C. Licensee C confirmed 1 night a week Caregiver A, who was a live in caregiver, works at another facility. Licensee C stated s/he is only paid by the managed care organization (MCO) to provide 5 hours per day.	M 434		
M 446	88.07(2)(b)4 RECORD OF MEDICAL VISITS AND REPORTS Keeping a current record of all medical visits, reports and recommendations for a resident. This Rule is not met as evidenced by: Based on record review and interview, Licensee C did not ensure record was kept of all reports and recommendations for 1 of 1 resident (Resident 1) requested. Findings include: On 10/20/2025, Surveyor requested Resident 1's record and identified the following: -Resident 1 was admitted on 09/17/2024. -Resident 1's ISP dated 08/27/2025 stated Resident 1 is his/her own decision maker. -Resident 1's ISP stated: "Level of Supervision: requires some supervision: during ADLs and meals/food preparation and times of crisis General Health Diagnosis: Resident physically looks healthy, but does suffer from severe anxiety, severe inappropriate thoughts of potential harm to others, severe mental trauma	M 446		

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Abusive behaviors: Resident does not have physically abusive behaviors. Resident has verbally abusive behaviors ie. Yelling, threatening Wandering/Elopement: Resident shows no signs of wandering or eloping."

-Resident 1's Incident Report, dated 10/07/2025, states, in part: ...Resident then got more aggressively angry with writer ...Resident was standing over writer screaming and stomping (his/her) feet ...Resident then had (his/her) hands inches away from writer's neck in a choking motion ...Resident heard family member coming down the stairs and very quickly moved (his/her) hands away from writer's neck ...spouse was standing next to writer and resident looked at writer and stated "I'm going to, I want to, I'm going to ...." Pointing at writer's spouse in hitting motions. ...Resident then stated, "I'm calling the cops" ...Writer explained to police that resident was hallucinating/imagining this whole fight with (friend at another group home) ...Writer explained to the officers that Resident was going to choke writer but stopped because spouse came downstairs, that (he/she) was going to beat writer's spouse up, and "beat the [explicative] out of those people" (friends from another group home).

On 10/20/2025 at approximately 11:30 AM, Surveyors interviewed Caregiver A. Caregiver A stated Resident 1 had become aggressive with him/her on 10/07/2025 and Resident 1 called law enforcement to respond to the situation. Caregiver A stated Resident 1 sees a psychiatrist every two weeks but because of this incident s/he had set up an emergency virtual visit.

On 10/20/2025 at approximately 11:35 AM, Surveyors requested to review Resident 1's

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M 446	Continued From page 17 psychiatry visits. Caregiver A stated s/he does not receive any documentation of the visits from the provider. Caregiver A stated if there are any medication changes after the virtual visits, s/he will document it on a sheet. Caregiver A stated s/he is unaware if there is any documentation after each psychiatry visit from the provider and that Licensee C would have the information. On 10/22/2025 at approximately 1:14 PM, Licensee C stated s/he does not receive any documentation after Resident 1's psychiatry visits. Licensee C stated s/he will only document if there are medication changes and keeps those files at his/her other licensed home for the nurse to review when s/he comes once a month. Licensee C acknowledged s/he does not get documentation of Resident 1's psychiatry visits from his/her provider.	M 446		
{M 458}	88.07(3)(a) PRESCRIPTION MEDICATIONS Every prescription medication shall be securely stored, shall remain in its original container as received from the pharmacy and be stored as specified by the pharmacist. This Rule is not met as evidenced by: Based on record review and interview, the	{M 458}		

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{M 458}	Continued From page 18	{M 458}		

provider did not keep 1 of 1 resident's (Resident 1) prescription medications securely stored in its original container. Caregiver A will leave medications out, unsecured, for Resident 1 to take unsupervised at a later time.

This is a repeat deficiency. See Statement of Deficiency (SOD) 2VVJ11, dated 6/9/25.

Findings include:

Resident 1's admission agreement, dated 09/05/2024, states, in part: Medication Storage: Adult Family Home (AFH) will store every resident prescribed medication for their well-being under lock and key.

On 10/20/2025 at approximately 11:30 AM, Surveyors interviewed Caregiver A who stated that Resident 1 had a contract with a Managed Care Organization (MCO) and the MCO only paid for 5 hours of service for Resident 1. Live-In Caregiver A stated s/he works from either 6:30 AM-8:00 AM or 9:00 AM-12:00 PM and from 4:00 PM-7:00 PM or 5:00 PM-8:00 PM to provide the 5 hours of care daily. Caregiver A stated that if s/he will be gone for a medication pass time, s/he will set the medications out, but not earlier than 30 minutes prior to when Resident 1 is to take the medications. Caregiver A stated that on one night per week from 5:00 PM until between 7:00 AM and 8:00 AM, s/he works at another AFH. Caregiver A stated that on those days, during those hours, since there is no caregiver in the home, s/he sets out Resident 1's 8:00 PM medications on the medication cart at approximately 4:30 PM. Caregiver A stated that the key for the medication storage cart is kept in the Staff Bathroom. Surveyors asked if family members of Caregiver A have access to these

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{M 458}	Continued From page 19 keys. Caregiver A stated yes; family members include a spouse, an 18 year old and an 8 year old. Surveyors asked if Resident 1 uses that bathroom and would have access to the key. Caregiver A stated that Resident 1 has used this bathroom approximately 4 times in the past year, when the other bathroom was occupied. On 10/22/2025 at approximately 1:00 PM, Surveyors interviewed Licensee C who acknowledged that one night per week there is no caregiver in the home for administration of 8:00 PM medications and acknowledged that medications are left out, unattended, for Resident 1. Licensee C acknowledged that the medication storage key is kept in the bathroom and is accessible to family members living in the house.	{M 458}		
M 462	88.07(3)(c) MEDICATION ASSISTANCE If the licensee or service provider assists a resident with prescription medication, the licensee or service provider shall help the resident securely store the medication, take the correct dosage at the correct time and communicate effectively with his or her physician. This Rule is not met as evidenced by: Based on record review and interview, the provider did not help Resident 1 take his/her medications at the correct time. Caregiver A will leave medications out for Resident 1 to take unsupervised at a later time.	M 462		

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M 462	Continued From page 20 Findings include: On 10/20/2025, Surveyors reviewed Resident 1's Individual Service Plan (ISP), dated 08/27/2025, stated, in part: Medications are administered by staff. On 10/20/2025 at approximately 11:30 AM, Surveyors interviewed Caregiver A who stated that Resident 1 had a contract with a Managed Care Organization (MCO) and the MCO only paid for 5 hours of service for Resident 1. Caregiver A stated s/he works from either 6:30 AM-8:00 AM or 9:00 AM-12:00 PM and from 4:00 PM-7:00 PM or 5:00 PM-8:00 PM to provide the 5 hours of care daily. Caregiver A stated that if s/he will be gone for a medication pass time, s/he will set the medications out, but not earlier than 30 minutes prior to when Resident 1 is to take the medications. Caregiver A stated that on one night per week from 5:00 PM until between 7:00 AM and 8:00 AM, s/he works at another AFH. Caregiver A stated that on those days, during those hours, since there is no caregiver in the home, s/he sets out Resident 1's 8:00 PM medications on the medication cart at approximately 4:30 PM and that when Resident 1 takes the medications, s/he calls Caregiver A and Caregiver A documents that the medications have been taken. Surveyors asked what Resident 1 would do if there is no caregiver in the home and is in need of PRN (as needed) medication. Caregiver A stated that Resident 1 does have an order for PRN Tylenol (medication for pain/fever reducing). Caregiver A did not provide a plan for how Resident 1 would be able to obtain this medication if needed. On 10/22/2025 at approximately 1:00 PM,	M 462		

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M 462	Continued From page 21 Surveyors interviewed Licensee A who acknowledged that one night per week there is no caregiver in the home for administration of 8:00 PM medications and acknowledged that medications are left out, unattended, for Resident 1. On 10/22/2025 at approximately 2:30 PM, Surveyors interviewed Resident 1 who stated that one night per week medications are left out while there is no caregiver in the home. Resident 1 stated that he/she takes the medications when he/she remembers as there is no staff present to watch and document.	M 462		
{M 472}	88.07(4)(b) 3 NUTRITIOUS MEALS AND SNACKS The licensee shall provide to each resident or ensure that each resident receives 3 nutritious meals each day and snacks that are typical in a family setting. This Rule is not met as evidenced by: Based on record review and interview, the provider did not provide Resident 1 with meals and snacks that are typical in a family setting. Resident 1 is purchasing his/her own food as food for meals/snacks is not being provided by the home. This is a repeat deficiency. See Statement of Deficiency (SOD) 2VVJ11, dated 06/09/2025. Findings include: Resident 1's admission agreement, dated 09/05/2024, states, in part: I. Meals: Facility will	{M 472}		

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{M 472}	Continued From page 22 make available three meals daily at approximately the following times: Breakfast 7:00 AM-9:00 AM Lunch 12:00 PM-1:00 PM Dinner 5:00 PM-7:00 PM AFH will have snacks and beverages available Resident 1's Individual Service Plan (ISP) dated 08/27/2025, states, in part: Shopping: Resident is provided with $ (money) from SS (Social Security), his/her job, and food stamps. Staff to assist resident in shopping weekly for personal cares and biweekly grocery shopping. On 10/20/2025 at approximately 11:30 AM, Surveyors interviewed Caregiver A regarding meals and snacks. Caregiver A stated Resident 1 purchases his/her own food. Caregiver A stated the facility does not provide food to Resident 1 because s/he has Food Stamps as well as Social Security and work funds which allows Resident 1 to purchase his/her own food. Caregiver A stated that at times s/he will share his/her personal food with Resident 1. On 10/22/2025 at approximately 1:00 PM, Surveyors interviewed Licensee C who acknowledged that Resident 1 is using Food Stamps to purchase his/her own food for meals. On 10/22/2025 at approximately 2:30 PM, Surveyors interviewed Resident 1 who stated that s/he doesn't always get three meals a day and is told that s/he has to make his/her own meals. Resident 1 stated that s/he gets Food Stamps and has to purchase his/her own food with that. Resident 1 stated the facility does not provide any meals for him/her.	{M 472}		

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M 550	Continued From page 23	M 550		
M 550	88.10(3)(b) Privacy Privacy. To have physical and emotional privacy in treatment, living arrangements and in caring for personal needs, including toileting, bathing and dressing. The resident, the resident's room, any other area in which the resident has reasonable expectation of privacy, and the personal belongings of a resident shall not be searched without the resident's permission or permission of the resident's guardian except when there is reasonable cause to believe that the resident possesses contraband. The resident shall be present for the search. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure 1 of 1 resident had privacy in their own home. There was a family of 4 living in the home with Resident 1. Findings Include: The provider is licensed to care for up to 4 residents in the client groups irreversible dementia/Alzheimer's disease, advanced aged, alcohol/drug dependent, emotionally disturbed/mental illness, pregnant women/counseling, correctional clients, terminally ill, traumatic brain injury, and/or developmentally disabled. On 10/20/2025 at 11:30 AM, Surveyors observed Caregiver A and his/her family living in the house. Family E was sitting on the couch in the living gaming during the survey. Family D and Family F	M 550		

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were in their bedrooms. Caregiver A acknowledged his/her family share the living room, dining room, kitchen and 1 bathroom/shower with Resident 1. Caregiver A stated Resident 1 goes out with his/her family when they visit to eat, and when Resident 1's family comes to the house they go to Resident 1's bedroom with him/her. Caregiver A stated Resident 1 could sit in the living room with him/her and his/her family if s/he chooses to.

On 10/20/2025 at 1:30 PM, Surveyors interviewed Licensee C. Licensee C confirmed Caregiver A and his/her spouse, and 2 children lived in the house with Resident 1. Licensee C confirmed Resident 1 shared the common living space with Caregiver A and his/her family.

On 10/22/2025 at 2:30 PM, Surveyors interviewed Family I. Family I stated s/he wants Resident 1 to feel comfortable. Family I stated Resident 1 does not feel comfortable with CG A and CG A's family living there because Resident 1 can only have privacy in his/her own room so typically when Resident 1's family comes to visit him/her, they always take them out of the facility so that they have privacy. Resident 1 stated s/he feels like an outkast because s/he is the only one living in the home who is not part of CG A's family.

The provider did not ensure 1 of 1 resident had privacy in their own home.