STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0011213	A. BUILDING: _____ B. WING _____	C 04/01/2024

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REM CUMBERLAND	2619 CUMBERLAND JANESVILLE, WI 53546

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M 000	INITIAL COMMENTS On 03/26/2024, with information gathered through 04/01/2024, Surveyor conducted a standard licensure survey and a complaint investigation at REM Cumberland. Three deficiencies were identified. Complaint is unsubstantiated. Census: 4	M 000		
M 114	88.03(3)(b) CRIMINAL RECORDS CHECK Criminal records check. Prior to an initial license the licensing agency shall ask the Wisconsin department of justice to conduct a criminal records check on the license applicant and on any other adult household member. The licensee shall arrange for a criminal records check of all service providers. At least every second year following issuance of an initial license the licensing agency shall request a criminal records check on the licensee and all other adult household members and the licensee shall arrange for a criminal records check on any service provider. In addition, during the period of the licensure, the licensee shall arrange for a criminal records check on any new service provider. If any of these persons has a conviction record or a pending criminal charge which substantially relates to the care of a dependent population, the funds or property of adults or minors or activities of the adult family home, the licensing agency may deny, revoke,	M 114		

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

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M 114	Continued From page 1 refuse to renew or suspend a license, initiate other enforcement action provided in this chapter or in ch. 50, Stats., or place conditions on the license. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 3 personnel files reviewed included a complete background check as required. An out-of-state report from the Department of Justice (DOJ) criminal record and the Integrated Background Information System Letter (IBIS) was not completed when Caregiver C documented that s/he had lived out of the state in the last 3 years. Findings include: On 03/28/2024, Surveyor reviewed Caregiver C's personnel file. Caregiver C was hired on 05/09/2019 and his/her employee file included the following background information: BID form, dated 03/03/2023, documented that Caregiver C currently lived in the state of Illinois. DOJ report, dated 03/03/2023, was a report for the state of Wisconsin. IBIS letter, dated 03/03/2023, was a report for the state of Wisconsin. Surveyor noted an additional background check should have been completed for the state of	M 114		

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M 114	Continued From page 2 Illinois. On 03/29/2024 at 7:26 AM, Surveyor emailed Area Director A and Southern Regional Director B and inquired if an out-of-state background check had been completed on Caregiver C. Area Director A responded and stated, "Yes, [s/he] is an Illinois resident. I had our office manager reach out and check for any employee living in Illinois to ensure we have that completed since brought to my attention."	M 114		
M 408	88.06(3)(c) ASSESSMENT IDENTIFY NEEDS & ABILITIES The assessment shall identify the person's needs and abilities in at least the areas of activities of daily living, medications, health, level of supervision required in the home and community, vocational, recreational, social and transportation. This Rule is not met as evidenced by: Based on record review and interview, the provider did not assess 2 of 2 resident to identify the needs and abilities in the areas of activities of daily living. Resident 1's and Resident 2's assessment and Individual Service Plan (ISP) did not provide care guidelines for his/her activities of daily living (ADLs).	M 408		

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M 408	Continued From page 3 Findings include: On 03/29/2024, Surveyor reviewed Resident 1's and Resident 2's record. Example 1: Resident 1 Resident 1 was admitted to the facility, 08/21/2023, with diagnoses including multiple sclerosis (MS), ataxia (lose muscle control in arms and legs), and cerebral infarction due to embolism of right middle cerebral artery (stroke). Resident 1's "Note Summary Report" documented: 01/04/2024 - Staff asked 8 times to change [his/her] clothes before [s/he] changed for the day. [S/he] did not make [his/her] bed or empty [his/her] trash when asked. 01/05/2024 - Needed 6 reminders to change [his/her] clothes. 01/08/2024 - [S/he] did not make [his/her] bed or empty [his/her] trash when asked. Staff asked over 10 times. 01/10/2024 - At 2p staff asked to go change [his/her] Depends and use the bathroom to prepare to leave for [his/her] appt. (appointment). This took staff asking [him/her] 5 times before [s/he] got up and did what staff was asking. During [his/her] appt [s/he] did not take it seriously and was "joking" with staff telling the doctor that we start [him/her] and neglect [him/her]. The doctor also requested that [Resident 1] get an MRI for the decline in [his/her] gait and memory. ... This has been an issue in the past of [Resident 1] not taking [his/her] appts seriously. [Resident 1] did not complete [his/her] daily goal of making [his/her] bed and picking up after [him/herself] as staff found food wrappers in [his/her] room.	M 408		

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M 408	Continued From page 4 01/15/2024 - Staff asked 7 times to make [his/her] bed and pick up [his/her] clothes. [S/he] did not complete this task today. 01/17/2024 - 3 times throughout the shift, staff checked on [him/her] after using the bathroom and noticed that [s/he] urinated on the floor in the bathroom rather than the toilet. When asked about it [s/he] did not understand that [s/he] did not urinate on the floor and thought [s/he] did in the toilet. Staff did ask that [s/he] sits down when using the bathroom to prevent this fall hazard moving forward. 01/23/2024 - When staff knocked and walking in [his/her] room staff observed [him/her] urinating in [his/her] trash bin. When staff asked why [s/he] did that [s/he] said "I don't feel like walking to the bathroom." 02/18/2024 - Client was redirected 3X to brush teeth and change. 02/19/2024 - Client had a difficult time following through with tasks this morning, client stated "I'm tired and would like to go back to bed." Client refused to brush [his/her] teeth staff attempted 3x of asking. Client complained of [him/herself] being tired and not having much energy. 02/26/2024 - Client completed daily goal of walking. 02/28/2024 - Client refused [his/her] daily cares, asked client to complete them 3x. 03/09/2024 - Asked client to put laundry away x4 client agreed [s/he] would however at the end of shift laundry was still not put away, client refused to do daily walking even though client stated "I know that I need to because I don't want to end up in a wheelchair." Resident 1's "Member Centered Plan," dated 03/01/2023, documented: "I am independent with eating. I am accepting of assistance with bathing, dressing, mobility,	M 408		

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M 408	Continued From page 5	M 408		

toileting, and transferring."
"Bathing: Due to decrease in mobility caused by my MS diagnoses and recent stroke, I require assistance with bathing. I am able to wash my upper/lower body while seated in a shower chair. My staff assist me with washing my back."
"Dressing: I am able to dress my upper body. I received some set up assistance with lower body and some assistance with socks and shoes. I have some difficulty with buttons/fasteners and my caregivers assist me when needed."
"Toileting: Due to decrease in mobility caused by my MS diagnoses and recent stroke, I require assistance with toileting. I am currently receiving stand by assistance from staff with transferring on/off the toilet. Staff are assisting with hygiene and changing the products."
"Laundry/Chores: Due to my MS and mobility I am unable to complete laundry or house hold chores independently."

Resident 1's "Individual Service Plan," dated 08/21/2023, documented:
"Equipment Needed: Shower Chair, Bedside commode, Walker"
"Toileting: Need assist/Reminders"
"Bathing: Need assist/Reminders"
"Grooming: Need assist/Reminders"
"Dressing: Need assist/Reminders"
"Oral Care: Need assist/Reminders"
"Transferring: Need assist/Reminders"
The ISP did not provide care guidelines.

On 04/02/2024, at approximately 3:40 PM, Surveyor informed Area Director A of the identified concern. Area Director A stated, "We will work on all of the corrections identified."

Example 2: Resident 2

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M 408	Continued From page 6 Resident 2 moved into the home, 01/01/2010, with diagnoses including mental retardation, epilepsy, Rett syndrome, scoliosis, osteoporosis, and pervasive development disorder. Resident 2's "Individual Service Plan," dated 01/22/2024, documented: "1:1 Supervision" The ISP did not identify the care areas of ADLs such as toileting, bathing, grooming, dressing, oral care. On 04/02/2024, at approximately 3:40 PM, Surveyor informed Area Director A of the identified concern. Area Director A stated, "We will work on all of the corrections identified."	M 408		
M 474	88.07(4)(c) FOOD PREPARED AND STORED SANITARY WAY Food shall be prepared and stored in a sanitary manner. This Rule is not met as evidenced by: Based on observation and interview, the provider did not store food under sanitary conditions. Surveyor found food items in the refrigerator and pantry that were not properly sealed to avoid contamination and food items in the freezer that were not properly sealed to avoid freezer burn. The provider did not implement a system to identify when opened food was to be discarded for the prevention of food borne illnesses. Findings include:	M 474		

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M 474	Continued From page 7 The licensee can serve up to 4 residents within the client groups of Developmentally Disabled, Physically Disabled, Traumatic Brain Injury and Advanced Aged. On 04/11/2023, at approximately 9:30 AM, Surveyor toured the kitchen with Licensee A and observed the following: Refrigerator: -What appeared to be a dried out kiwi fruit -A Styrofoam to-go container that did not identify food contents and was not dated -7 clear plastic containers with red lids that did not identify food contents and was not dated -A glass bowl covered with aluminum foil that did not identify food contents and was not dated -Half a lemon covered with aluminum foil that was not dated Surveyor noted there was a sign hanging on the refrigerator that read: "Please make sure all leftovers are covered and dated. All food items that are stored should be thrown out after 3 days." Freezer: -An opened bag of steak cut french fries that was not sealed. French fries started to fall out of the bag when Surveyor opened the freezer door. Dry Foods: -An opened 5-pound bag of flour that was not sealed -What appeared to be an onion that had dried out and the layers were separating -A 4-pound bag of sugar that was not sealed "Time/temperature control for safety (TCS) guidelines indicate food prepared in a food	M 474		

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M 474	Continued From page 8	M 474		

establishment and held longer than a 24 hour period shall be marked to indicate the date or day by which the food is to be consumed on the premises, sold, or discarded when held at a temperature of 5°C (41°F) or less for a maximum of 7 days. The day of preparation shall be counted as Day 1. Refrigerated, RTE (ready-to-eat)/TCS food prepared and packaged by a food processing plant shall be clearly marked, at the time the original container is opened in a food establishment and if the food is held for more than 24 hours, to indicate the date or day by which the food shall be consumed or discarded." (US Food and Drug Administration (FDA) Food Code, 2022, Section 3-501.17)

"Ready-to-eat TCS food (foods that need time and temperature control for safety) can be stored for only seven days if it is held at 41 degrees Fahrenheit or lower. The count begins on the day the food was prepared or a commercial container was open. TCS foods includes milk and dairy products, eggs, meat (beef, pork, and lamb), poultry, fish, shellfish and crustaceans, baked potatoes, tofu or other soy protein, sprouts and sprout seeds, sliced melons, cut tomatoes, cut leafy greens, untreated garlic-and-oil mixtures, and cooked rice, beans, and vegetables." (ServSafe Coursebook, 7th edition, 2017, p. 1-7, p. 1-8, and p. 7-3)

On 03/26/2024, at approximately 12:30 PM, Surveyor interviewed Program Director D. Program Director D stated s/he would discuss the concerns with staff.