

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0012319	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 09/16/2024
NAME OF PROVIDER OR SUPPLIER JACKIES TLC HOME		STREET ADDRESS, CITY, STATE, ZIP CODE N8813 CTY RD EE PORTAGE, WI 53901		
(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 03/20/2024 with information gathered thru 03/25/2024, and a monitoring visit on 09/16/2024, Surveyors conducted a complaint investigation at Jackies TLC Home. Complaint was substantiated. Three (3) deficiencies were identified. Census: 3	M 000		
M 208	88.03(8)(c) AGENCY MAY REQUEST OTHER INSPECTIONS A licensing agency may require a licensee to request fire, health, sanitation or safety officials to inspect the home and premises to assist in evaluating the safety of the home. Any inspection shall be at the licensee's expense. This Rule is not met as evidenced by: Based on observation and record review, the licensing agency is requiring a fire inspection of the home and premises to evaluate the safety of the home due to excessive amounts of belongings and clutter. Findings include: Jackies TLC Home is a 4-bed adult family home that can accept non-ambulatory and ambulatory residents in the following client groups: physically disabled and developmentally disabled. On 09/16/2024, Surveyor conducted a monitoring visit to address environmental concerns brought	M 208		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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M 208	Continued From page 1 to the licensee's attention from the survey on 03/20/2024. At approximately 10:30 a.m., Surveyor pulled into the drive way and observed the sides of the driveway and lawn had multiple items laying and stacked throughout the grass. Surveyor walked up the ramp to the house and observed several cat houses lining the ramp leading up to the house and several more on the deck past the door along with 4 animal food bowls on the deck. There was minimal room for standing or sitting on the deck that wrapped around the house due to excessive amounts of tubs, bins, and mounds covered by tarp. There was a fence enclosing the house and deck area that was lined with wood and other materials so the content inside was unable to be seen from the road and parts of the driveway. Surveyor knocked on the door and heard several animals inside respond to the knocking, twice. Surveyor was unable to access the home, but did observe an abundance of belongings through the windows. While leaving, Surveyor observed a cat on top of a mound covered by tarp and another cat going behind one of the piles. On 09/16/2024, at 10:41 a.m., Surveyor called 2 separate numbers associated with the facility, letting the licensee know the department was at the facility and requesting access to the home and would need to be let inside the home within 2 hours. As of 09/17/2024, the phone calls have not been returned. Surveyor noted that the porch had more items on it than the previous visit on 03/20/2024, where environmental concerns were addressed with the licensee. According to the National Fire Protection Association (NFPA), Hoarding can be a fire	M 208		

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M 208	Continued From page 2 hazard. Many occupants die in fires in these homes. Often, blocked exits prevent escape from the home. The weight of the stored items, especially if water is added to put out a fire, can lead to building collapse. In addition, many people who are hoarding are injured when they trip over things or when materials fall on them. Responding firefighters can be put at risk due to obstructed exits, falling objects, and excessive fire loading that can lead to collapse. Fighting fires is very risky in a hoarding home. It is hard to enter the home to provide medical care. The clutter impedes the search and rescue of people and pets. (Source: NFPA: Hoarding and Fire: Reducing the Risk, 2016, https://www.nfpa.org/education-and-research/emergency-response/hoarding) Cross Reference: N0276, DHS 88.05(3)(a) Home Environment	M 208		
M 276	88.05(3)(a) HOME ENVIRONMENT An adult family home shall be safe, clean and well-maintained and shall provide a homelike environment. This Rule is not met as evidenced by: Based on observation and interview the provider did not provide a homelike environment. Findings include: Jackies TLC Home is a 4-bed adult family home	M 276		

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M 276	Continued From page 3 that can accept non-ambulatory and ambulatory residents in the following client groups: physically disabled, and developmentally disabled. On 03/20/2024 at approximately 11:30 AM, Surveyor toured the facility and observed the following: 1.) The facility had a strong odor of animal feces and urine. 14 cats were observed in the facility. 2.) The chairs had marks on the arms that appeared to be from cats clawing at the arms of the chair. 3.) There were 3 door frames that had clear tape on them to prevent cats from clawing at them. The door frames were scraped up from cats clawing at the door frames. 4.) The front porch had multiple items on it, including a pine tree that was brown. 5.) The front porch gate was not easily opened and blocked the path of exit from the porch. 6.) The television was held on the television stand by clear tape attached to the tv extending to the television stand. On 03/20/2024 at approximately 11:50 AM, Surveyor interviewed Licensee A. Licensee A stated s/he thought there were about 10 cats in the facility and all of them were up to date on vaccinations at the veterinarian. Licensee A stated the cats are dropped off and s/he would take them in and take care of them. Licensee A stated the cats were therapy cats for the facility and they had put scratching pads up in the kitchen area to prevent the cats from scratching	M 276			

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M 276	Continued From page 4 at things they weren't supposed to. On 03/20/2024 at approximately 11:55 AM, Surveyor interviewed Resident 2 who stated the odor of the cats does bother them at times because it is so strong.	M 276		
M 556	88.10(3)(e) Self-Direction Self-direction. To have opportunities to make decisions relating to care, activities and other aspects of life in the adult family home. No curfew, rule or other restrictions on a resident's freedom of choice shall be imposed unless specifically identified in the home's program statement or the resident's individual service plan. An adult family home shall help any resident who expresses a preference for more independent living to contact any agency needed to arrange it. This Rule is not met as evidenced by: Based on record review and interview the provider did not ensure Resident 1's right to self-direction when Resident 1 was not allowed to make decisions relating to care, activities and other aspects of life in the adult family home. Licensee A had a curfew rule, and it was not addressed in the facilities program statement or individual service plan. Findings include: On 03/20/2024 at approximately 11:50 AM, Surveyor interviewed Licensee A who confirmed residents are not allowed to go outside after dark	M 556		

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M 556	Continued From page 5 to use the phone and residents are made to shower daily. Licensee A confirmed s/he told Resident 1 that s/he could not be outside after dark to use his/her cellphone. On 03/20/2024 at approximately 12:40 PM, Surveyor reviewed Resident 1's individual service plan dated 02/24/2024. Resident 1's individual service plan indicated Resident 1 is independent with oral care, dressing, grooming, bathing, and toileting. Resident 1's individual service plan also indicates Resident 1 does not display behaviors. Resident 1's ISP does not indicate any restrictions on phone usage, or the need for a standby assist with showers. On 03/25/2024 at approximately 8:05 AM, Surveyor interviewed Family Member B. Family Member B stated on 02/27/2024, S/he was on the phone with Resident 1 and could hearing screaming in the background asking why Resident 1 was on the phone and was told to get off the phone. Resident 1 also reported that staff assist them with showers even though they are able to independently shower and wish to shower independently. Family Member B stated Resident 1 is made to go back to his/her room after work and is not allowed to come out until dinner time. Family Member B confirmed Resident 1 can take his/her own showers and is independent with hygiene needs. On 03/25/2024 at approximately 10:39 AM, Surveyor received the facility's undated program statement via fax from Licensee A. The program statement did not indicate there were any restrictions for going outside or being on the phone.	M 556		