STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0015239	A. BUILDING: _____ B. WING _____	08/22/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EMMANUEL FAMILY HOME 2	2943 TRACEWAY DR MADISON, WI 53713

(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 08/24/2023, Surveyor completed a standard survey at Emmanuel Family Home 2, a CBRF in Madison. Four deficiencies were identified. Census: 3	M 000		
M 346	88.05(4)(d)2.b FIRE EVACUATION ANNUAL EVALUATION Each resident shall be evaluated annually for evacuation time, using the departments form. All service providers who work on the premises shall be made aware of each resident having an evacuation time of more than 2 minutes. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 residents reviewed, that resided at the provider's home for greater than 1 year, had his/her evacuation time, using the department's form, evaluated annually. Resident 2's evacuation time had not been evaluated in greater than 1 year. Findings include: On 08/22/2023 at approximately 9:45 a.m., Surveyor reviewed Resident 2's record. Resident 2 admitted to the provider's home on 08/02/2021. Resident 2 had a legal guardian. Resident 2's evacuation assessment, using the department's form, was dated 06/22/2022, greater than 1 year ago.	M 346		

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

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M 346	Continued From page 1 On 08/22/2023 at approximately 10:00 a.m., Surveyor interviewed Licensee A. Surveyor shared concern that Resident 2's evacuation time had not been evaluated, using the department's form, in greater than 1 year. Licensee A replied, "Okay.'	M 346		
M 380	88.06(2)(a) ADMISSION-HEALTH EXAM Except as provided in subd. 2., the licensee shall ensure that a new resident of an adult family home receives a health examination by a physician to identify health problems and is screened for communicable disease, including tuberculosis. Screening for communicable disease may be provided by a physician, a registered nurse or a physician assistant. The health examination and screening shall take place within 90 days prior to admission to the home or within 7 days after admission. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 residents reviewed were screened for communicable disease, including tuberculosis, within 90 days prior to admission or 7 days after admission. Resident 1 did not have a communicable disease screen, including tuberculosis test, completed within 90 days before admission or 7 days after admission. Findings include: On 08/22/2023 at approximately 9:45 a.m., Surveyor reviewed Resident 1's record. Resident 1 was admitted to the provider's home on	M 380		

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M 380	Continued From page 2 05/27/2023. Resident 1's record did not include documentation of a communicable disease screen, including tuberculosis test. On 08/22/2023 at approximately 10:00 a.m., Surveyor asked Licensee A if Resident 1 had a tuberculosis test prior to placement in the home. Licensee A stated s/he would need to review his/her records further. Licensee A was given until the end of the day on 08/23/2023 to provide follow up documentation. As of 08/24/2023 at 8:00 a.m., Surveyor had not received documentation of a communicable disease screen, including tuberculosis test, for Resident 1. On 08/24/2023 at 9:00 a.m., Surveyor followed up with Licensee A. Licensee A stated s/he thought Resident 1 had a tuberculosis test completed, but s/he was unable to locate documentation of a test so s/he scheduled a test for the near future.	M 380		
M 404	88.06(3)(a) INDIVIDUAL SERVICE PLAN & ASSESSMENT The licensee shall ensure that a written assessment and individual service plan is completed and developed for each resident within 30 days after placement. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 2 residents reviewed had an individual service plan (ISP) completed and developed within 30 days after placement.	M 404		

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M 404	Continued From page 3 Findings include: On 08/22/2023 at approximately 9:45 a.m., Surveyor reviewed Resident 1's record. Resident 1 was admitted to the provider's home on 05/27/2023. Resident 1 had a legal guardian. Resident 1's record did not include an ISP. Surveyor requested a copy of Resident 1's ISP from Licensee A. Licensee A replied, "It might be in my email. I sent it to [his/her] guardian, but I know it was late because there were issues." Licensee A did not explain issues. Licensee A then provided Surveyor with an email that indicated Licensee A provided Resident 1's guardian with an ISP to review on 08/06/2023, greater than 30 days after Resident 1's placement.	M 404		
M 464	88.07(3)(d) MEDICATION- WRITTEN ORDER Before the licensee or service provider dispenses or administers a prescription medication to a resident, the licensee shall obtain a written order from the physician who prescribed the medication specifying who by name or position is permitted to administer the medication, under what circumstances and in what dosage the medication is to be administered. The licensee shall keep the written order in the resident's file. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure an order from a physician was obtained to administer medications prior to	M 464		

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M 464	Continued From page 4	M 464		

administering medications to 2 of 2 residents reviewed. The provider did not have a physician order for the home's staff to administer Resident 1 and Resident 2's medications.

Findings include:

On 08/22/2023 at approximately 9:45 a.m., Surveyor reviewed resident records, which documented the following:

- Resident 1 was admitted to the provider's home on 05/27/2023. Resident 1's record included a medication administration record (MAR), indicating that staff administered his/her medications. Resident 1's record did not include a physician order for the home's staff to administer medications.
- Resident 2 was admitted to the provider's home on 08/02/2021. Resident 2's record included a MAR, indicating that staff administered his/her medications. Resident 2's record did not include a physician order for the home's staff to administer medications.

On 08/22/2023 at approximately 10:00 a.m., Surveyor interviewed Licensee A. Licensee A confirmed the home's staff administered Resident 1 and Resident 2's medications. Surveyor asked if Licensee A had obtained a physician order for staff to administer medications. Licensee A replied, "No. I didn't know we have to."