STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0020254	A. BUILDING: _____ B. WING _____	C 03/20/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ASHWABAY HOUSE	7310 ASHWABAY LANE MADISON, WI 53719

(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 03/18/2025, Surveyors conducted a complaint investigation at Ashwabay House. Six (6) deficiencies were identified. The complaint was substantiated. Census: 8	N 000		
N 219	83.17(1) Licensee conduct caregiver background check Caregiver background check. At the time of hire, employment or contract and every 4 years after, the licensee shall conduct and document a caregiver background check following the procedures in s. 50.065, Stats., and ch. DHS 12. A licensee shall not employ, contract with or permit a person to reside at the CBRF if the person has been convicted of the crimes or offenses, or has a governmental finding of misconduct, found in s. 50.065, Stats., and ch. DHS 12, Appendix A, unless the person has been approved under the department ' s rehabilitation process as defined in ch. DHS 12. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that caregiver background checks were completed for 3 of 3 caregivers. Caregiver C, D and E did not have a Background Information Disclosure (BID) completed and Caregiver C did not have a Department of Justice (DOJ) or Integrated Background Information System (IBIS) background check completed at time of hire.	N 219		

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

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N 219	Continued From page 1 Findings include: On 03/18/2025 at 9:30 AM, Surveyor reviewed the employee files for Caregiver C, D and E. Caregiver C's employee file, hired 02/18/2025, did not include a BID, DOJ or IBIS background check. Caregiver D's employee file, hired 08/01/2024. did not include a BID background check. Caregiver E's employee file, hired 12/03/2024, did not include a BID background check. On 03/18/2025 at 11:30 AM, Surveyor asked Consultant B if there were any documented background checks for Caregiver C, D or E. Consultant B stated that s/he would send the background checks for Caregiver C, D and E to Surveyor via email. On 03/19/2025 at 12:17 PM, Consultant B sent DOJ and IBIS background checks for Caregiver D and E. Consultant B stated in the email that there was no background check conducted for Caregiver C prior to day of survey. There were no BID background checks included in the email.	N 219		
N 243	83.21(1)-(3) All employee training. The CBRF shall provide, obtain or otherwise ensure adequate training for all employees in all of the following: Resident rights. Training shall include general rights of residents including rights as specified under s. DHS 83.32(3). Training shall be provided as applicable under ss. 50.09 and 51.61 and chs. 54, 55, and 304, Stats., and ch. DHS 94,	N 243		

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N 243	Continued From page 2 depending on the legal status of the resident or service the resident is receiving. Specific training topics shall include house rules, coercion, retaliation, confidentiality, restraints, self-determination, and the CBRF ' s complaint and grievance procedures. Residents ' rights training shall be completed within 90 days after starting employment. Client Group. Training shall be specific to the client group served and shall include the physical, social and mental health needs of the client group. Specific training topics shall include, as applicable: characteristics of the client group served, activities, safety risks, environmental considerations, disease processes, communication skills, nutritional needs, and vocational abilities. Client group specific training shall be completed within 90 days after starting employment. Client Group. In a CBRF serving more than one client group, employees shall receive training for each client group. Recognizing, preventing, managing, and responding to challenging behaviors. Specific training topics shall include, as applicable: elopement, aggressive behaviors, destruction of property, suicide prevention, self-injurious behavior, resident supervision, and changes in condition. Challenging behaviors training shall be completed within 90 days after starting employment. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure 3 of 3 employees	N 243		

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N 243	Continued From page 3 reviewed obtained all training as required within 90 days after starting employment. Caregiver C did not have training in recognizing, preventing, managing, and responding to challenging behaviors or client groups and was working alone on day of survey. Caregiver D and E did not have training in recognizing, preventing, managing, and responding to challenging behaviors or client groups within 90 days after starting employment. Findings include: On 03/18/2025, Surveyor conducted a review of 3 employees to verify compliance with all employee training requirements. Surveyor requested training records from Administrator A for Caregiver D and Caregiver E. Resident Rights The record for Caregiver D, hired on 08/01/2024, did not contain evidence of training or meeting an exemption for resident rights training. The record for Caregiver E, hired on 12/03/2024, did not contain evidence of training or meeting an exemption for resident rights training. Recognizing, Preventing, Managing, and Responding to Challenging Behaviors The record for Caregiver D, hired on 08/01/2024, did not contain evidence of training or meeting an exemption for challenging behaviors training. The record for Caregiver E, hired on 12/03/2024, did not contain evidence of training or meeting an exemption for challenging behaviors training.	N 243		

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N 243	Continued From page 4 Client Group The facility is licensed to provide care and services to residents within the client groups of Irreversible Dementia/Alzheimer's. The record for Caregiver D, hired on 08/01/2024, did not contain evidence of training or meeting an exemption for client group training. The record for Caregiver E, hired on 12/03/2024, did not contain evidence of training or meeting an exemption for client group training. On 03/18/2025 at 10:00 AM, Surveyor reviewed the facility staff schedules for the months of February 2025 and March 2025, which confirmed that Caregivers D and E all work alone while on duty. On 03/18/2025 at 11:30 AM, Surveyor asked Consultant B if there was any documented training in resident rights, challenging behaviors and client group for Caregivers D and E. Consultant B stated, "I don't think so, but I will check." Surveyor gave Consultant B until 03/19/2025 at 11:00 AM to provide further information. On 03/18/2025 at 11:59 PM, Consultant B sent an email that stated, "Staff training is a hole we have noticed and discovered since stepping into the buildings. I have planned a staff meeting for all staff to attend prior to the state visit today. That meeting is planned for next week. I know this doesn't change the fact that it was not completed prior to, however, I am attaching all the training the staff will receive during that meeting."	N 243		

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N 247	83.22(1)-(4) Task specific training. The CBRF shall provide, obtain or otherwise ensure adequate training for employees performing job duties in all of the following: Assessment of residents. All employees responsible for resident assessment shall successfully complete training in the assessment of residents prior to assuming these job duties. Specific training topics shall include: assessment methodology, assessment of changes in condition, sources of assessment information, and documentation of the assessment. Individual service plan development. All employees responsible for service plan development shall successfully complete training in individual service plan development prior to assuming these job duties. Specific training topics shall include: identification of the resident ' s needs and desired outcomes, development of goals and interventions, service plan evaluation and review of progress. Provision of personal care. All employees responsible for providing assistance with activities of daily living shall successfully complete training prior to assuming these job duties. Specific training topics shall include, as appropriate: bathing, eating, dressing, oral hygiene, nail and foot care, toileting and incontinence care, positioning and body alignment, and mobility and transferring. Dietary training. All employees performing dietary duties shall complete dietary training within 90 days after assuming these job duties. Specific training topics shall include: determining nutritional needs, menu planning, food preparation and food sanitation.	N 247		

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N 247	Continued From page 6 This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that 3 of 3 caregivers had completed training in personal cares or dietary. Caregiver C, D and E did not have documented completion of training in personal cares or dietary. Findings include: On 03/18/2025 at 10:00 AM, Surveyor reviewed the files of Caregiver C, D and E to ensure that training in personal cares and dietary was completed. Caregiver C was observed to be assisting residents with personal cares and meals on day of survey. The file for Caregiver C, hired 02/18/2025 did not contain documentation of completed training in personal cares. Caregiver C is not a Certified Nursing Assistant (CNA). There were no other documented exemptions found in Caregiver C's file. The file for Caregiver D, hired 08/01/2024 did not contain documentation of completed training in personal cares or dietary. Caregiver D is not a Certified Nursing Assistant (CNA). There were no other documented exemptions found in Caregiver D's file. The file for Caregiver E, hired 12/03/2024 did not contain documentation of completed training in personal cares or dietary. Caregiver E is not a Certified Nursing Assistant (CNA). There were no other documented exemptions found in Caregiver	N 247		

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N 247	Continued From page 7 E's file. On 03/18/2025 at 11:19 a.m., Surveyor asked Caregiver C if s/he had received training in assessment of residents, personal care, dietary or individual service plans. Caregiver C stated no, that s/he just completed nurse delegation. Caregiver C stated that Manager A hired him/her and just threw him/her into the facility but that since Consultant B has been involved, how there are training classes coming up. Caregiver C stated that his/her date of hire was 02/19/2025 and that was his/her first day on the floor. On 03/18/2025 at 11:30 AM, Surveyor interviewed Consultant B. Consultant B confirmed that Caregiver C, D and E work at the facility, and do work alone and assist residents with personal cares and dietary. Consultant B acknowledged that there was no documentation to indicate that Caregiver C, D or E had completed training in personal cares or dietary. Consultant B stated that neither Caregiver C, D or E had any documented exemptions for training in personal cares or dietary. On 03/18/2025 at 11:59 PM, Consultant B sent an email that stated, "Staff training is a hole we have noticed and discovered since stepping into the buildings. I have planned a staff meeting for all staff to attend prior to the state visit today. That meeting is planned for next week. I know this doesn't change the fact that it was not completed prior to, however, I am attaching all the training the staff will receive during that meeting."	N 247		
N 301	83.28(3) Provide admission agreement as required.	N 301		

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N 301	Continued From page 8 Admission agreement. Before or at the time of admission, the CBRF shall provide the admission agreement as required under s. DHS 83.29(2). This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 residents were provided an admission agreement before or at the time of admission. Resident 1 and Resident 2 did not have an admission agreement from the current provider. Findings include: On 03/18/2025, Surveyor conducted a complaint investigation alleging that the building was sold with no notice. The provider was licensed as a class CNA (nonambulatory) community based residential facility (CBRF) on 08/01/2024 with the ability to serve up to 8 residents within the client groups of: physically disabled, advanced age, traumatic brain injury, emotionally disturbed/mental illness, and irreversible dementia/Alzheimer's. Example 1 - Resident 1 Surveyor reviewed Resident 1's record. Resident 1 was admitted to the facility on 02/07/2022. Current provider assumed ownership 08/01/2024. Resident 1 was admitted with diagnosis including diabetes. Resident 1's admission agreement was dated 02/07/2022 and documented the services, fees, and general information and agreements from the previous owner of the facility. Example 2 - Resident 2	N 301		

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N 301	Continued From page 9 Surveyor reviewed Resident 2's record. Resident 2 was admitted to the previous provider on 06/14/2011. Current provider assumed ownership 08/01/2024. Resident 2 was admitted with diagnoses that include but are not limited to: acute kidney injury, depression psychosis, neurogenic bladder, catheter, UTI, spinal bifida, GERD, iron deficiency anemia, insomnia, HTN. Resident 2's admission agreement was dated 06/14/2011 and documented the services, fees, and general information and agreements from the previous owner of the facility. On 03/18/2025, at approximately 11:50 a.m., Surveyor reviewed the above concerns with Consultant B. Consultant B stated s/he was aware that the previous administrator (Manager A) had not updated the admission agreements so s/he already has a plan in place to update them.	N 301		
N 352	83.32(3)(h) Rights of Residents: Receive medication In addition to the rights under s. 50.09, Stats., each resident shall have all of the following rights: Receive medication. Receive all prescribed medications in the dosage and at intervals prescribed by a practitioner. The resident has the right to refuse medication unless the medication is court ordered. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure Resident 1's insulin was available so s/he could receive his/her prescribed Lantus as prescribed by a practitioner.	N 352		

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N 352	Continued From page 10 Findings include: On 03/18/2025, Surveyor reviewed Resident 1's record. Resident 1 was admitted to the facility on 02/07/2022 with diagnosis including diabetes. Surveyor reviewed Resident 1's physician orders, which include an updated order for insulin 100 unit/ml inj pen to administer 40 units every morning for diabetes with a start date of 03/05/2025. Surveyor reviewed Resident 1's medication administration record (MAR) for March 2025. Surveyor observed that the order for Lantus Solostar 100 Unit/ml to inject 40 units subcutaneously every morning was either not documented for or documented as "not available" from 03/11/2025 to 03/17/2025. Resident 1's Lantus was documented as administered on 03/18/2025. At 10:10 a.m., Surveyor reviewed Resident 1's medications with Caregiver C. Surveyor observed Resident 1's insulin pen, with the date 03/18/2025 written on it, and asked Caregiver C if Resident 1 had been out of insulin. Caregiver C stated yes, that his/her insulin had not been available few days and his/her Novolog had just been delivered this morning. At approximately 11:50 a.m., Surveyors shared the above concerns with Consultant B. Consultant B stated that s/he and the nurse were unaware that Resident 1's insulin needed to be reordered. Consultant B stated that typically staff would notify Consultant B and they would ensure the medication was re-stocked, however, when Manager A took over, s/he left everything to the	N 352		

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N 352	Continued From page 11 caregivers and now Consultant B is retraining staff and trying to figure out how to get things back in order.	N 352		
N 415	83.37(2)(d) Documentation of medication administration. Documentation of medication administration. As required under s. DHS 83.42(1)(o), at the time of medication administration, the person administering the medication or treatment shall document in the resident record the name, dosage, date and time of medication taken or treatments performed and initial the medication administration record. Any side effects observed by the employee or symptoms reported by the resident shall be documented. The need for any PRN medication and the resident ' s response shall be documented. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure accurate documentation for 2 of 2 residents in the Medication Administration Record (MAR). The MAR for Resident 1 and Resident 2 had numerous blank entries for the calendar months of February 2025 and March 2025. Findings include: Example 1: Resident 1 On 03/18/2025, Surveyor reviewed Resident 1's record. Resident 1 was admitted to the facility on 02/07/2022 with diagnosis including diabetes and anxiety.	N 415		

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N 415	Continued From page 12 On 03/18/2025, Surveyor reviewed Resident 1's MAR for the month of March 2025. The following dates were left blank in Resident 1's MAR: 03/05/2025- Acetaminophen 325 MG TAB 03/05/2025- Tamsulosin HCL 0.4 MG CAPSULE 03/05/2025- Metformin HCL ER 500 MG TAB 03/07/2025- Acetaminophen 325 MG TAB 03/07/2025- Tamsulosin HCL 0.4 MG CAPSULE 03/07/2025- Metformin HCL ER 500 MG TAB 03/11/2025- Lantus Solostar 100 UNIT / ML 03/11/2025- Acetaminophen 325 MG TAB 03/13/2025- Acetaminophen 325 MG TAB 03/14/2025- Acetaminophen 325 MG TAB 03/13/2025- Aspirin EC 81 MG TAB 03/13/2025- Metformin HCL ER 500 MG TAB 03/13/2025- Amlodipine Besylate 10 MG Tab 03/13/2025- Finasteride 5 MG TAB 03/13/2025- Lantus Solostar 100 UNIT / ML 03/13/2025- Sertraline HCL 100 MG 03/13/2025- Levothyroxinel 100 MCG Tab 03/15/2025- Lantus Solostar 100 UNIT / ML 03/16/2025- Lantus Solostar 100 UNIT / ML 03/17/2025- Acetaminophen 325 MG TAB Example 2: Resident 2 On 03/18/2025, Surveyor reviewed Resident 2's medical record. Resident 2 was admitted 08/01/2024 with diagnoses that include but are not limited to: acute kidney injury, depression psychosis, neurogenic bladder, catheter, UTI, spinal bifida, GERD, iron deficiency anemia, Vitamin D deficiency, insomnia, HTN. On 03/18/2025, Surveyor reviewed Resident 2's MAR for the month of February 2025. The following dates were left blank in Resident 2's MAR:	N 415		

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N 415	Continued From page 13 02/03/2025- Trazodone 150 milligram (mg) tablet 02/08/2025- Trazodone 150 mg tablet 02/08/2025- Stimulant laxative 02/09/2025- Omeprazole DR 20 mg capsule 02/09/2025- Sevelamer Carbonate 800 mg 02/09/2025- Cranberry with Vitamin C 2 caps 02/16/2025- Sevelamer Carbonate 800 mg 02/16/2025- Cranberry with Vitamin C 2 caps 02/22/2025- Vitamin D3 50 microgram(mcg) tablet 02/22/2025- Stimulant laxative 02/23/2025- Vitamin D3 50 mcg tablet 02/23/2025-Stimulant laxative 02/23/2025- Sevelamer Carbonate 800 mg 02/24/2025- Levothyroxine 25 mcg tablet 02/24/2025- Loratadine 10 mg tablet 02/24/2025- Vitamin B-12 500 mcg tablet 02/24/2025- Vitamin D3 50 mcg tablet 02/24/2025- Omeprazole DR 20 mg capsule 02/24/2025- Stimulant laxative 02/24/2025- Sevelamer Carbonate 800 mg 02/24/2025- Cranberry with Vitamin C 2 caps 02/24/2025- Levothyroxine 25 mcg tablet 02/24/2025- Olmesartan Medoxmil 40 mg 02/27/2025- Citalopram HBR 40 mg 02/27/2025- Olanzapine 15 mg 02/27/2025- Olanzapine 2.5 mg 02/27/2025- Famotidine 20 mg 02/27/2025- Trazodone 150 mg 02/27/2025- Omeprazole 20 mg 02/27/2025- Stimulant laxative 02/27/2025- Sevelamer Carbonate 800 mg 02/27/2025- Cranberry with Vitamin C 2 caps 02/282025- Citalopram HBR 40 mg 02/282025- Olanzapine 15 mg 02/282025- Olanzapine 2.5 mg 02/282025- Famotidine 20 mg 02/282025- Trazodone 150 mg 02/282025- Omeprazole 20 mg	N 415		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0020254	A. BUILDING: _____ B. WING _____	C 03/20/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ASHWABAY HOUSE	7310 ASHWABAY LANE MADISON, WI 53719

(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 415	Continued From page 14 02/282025- Stimulant laxative 02/282025- Sevelamer Carbonate 800 mg 02/282025- Cranberry with Vitamin C 2 caps On 03/18/2025, Surveyor reviewed Resident 2's MAR for the month of March 2025. The following dates were left blank in Resident 2's MAR: 03/01/2025- Vitamin B-12 500 mcg tab 03/01/2025- Vitamin D-3 50 mcg tab 03/01/2025- Stimulant laxative 03/01/2025- Cranberry with Vitamin C 2 caps 03/02/2025- Vitamin D-3 50 mcg tab 03/02/2025- Stimulant laxative 03/02/2025- Cranberry with Vitamin C 2 caps 03/07/2025- Omeprazole DR 20 mg 03/07/2025- Sevelamer Carbonate 800 mg 03/07/2025- Cranberry with Vitamin C 2 caps 03/09/2025- Vitamin D-3 50 mcg tab 03/09/2025- Stimulant laxative 03/13/2025- Levothyroxine 25 mcg tablet 03/13/2025- Loratadine 10 mg tablet 03/13/2025- Vitamin B-12 500 mcg tab 03/13/2025- Vitamin D-3 50 mcg tab 03/13/2025- Omeprazole DR 20 mg 03/13/2025- Stimulant laxative 03/13/2025- Sevelamer Carbonate 800 mg 03/13/2025- Vitamin B-12 500 mcg tab 03/13/2025- Vitamin D-3 50 mcg tab 03/13/2025- Omeprazole DR 20 mg 03/13/2025- Stimulant laxative 03/13/2025- Cranberry with Vitamin C 2 caps 03/13/2025- Levothyroxine 25 mcg tablet 03/13/2025- Olmesartan Medoxomil 40 mg 03/13/2025- Lokelma 5 gram powder packet 03/13/2025- Nifedipine ER 90 mg tablet At approximately 11:50 a.m., Surveyors shared the above concerns with Consultant B. Consultant B stated s/he is aware that medication	N 415		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0020254	A. BUILDING: _____ B. WING _____	C 03/20/2025

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N 415	Continued From page 15 documentation needs work and that additional training for staff will be provided.	N 415		