STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0012240	A. BUILDING: _____ B. WING _____	C 06/16/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ASTER ASSISTED LIVING OF MARSHFIELD	305 SOUTH CHESTNUT AVE MARSHFIELD, WI 54449

(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
U 000	INITIAL COMMENTS On 06/16/2025, Surveyor conducted an onsite visit at Aster Assisted Living of Marshfield to investigate one complaint. The complaint was substantiated and one deficiency was identified. Census: 61	U 000		
U 272	89.35(3) GRIEVANCES Written Summary. (3) The residential care apartment complex shall provide a written summary of the grievance, findings, conclusions and any action taken as a result of the grievance to the tenant, the tenant's designated representative, if any, and, for tenants whose services are funded under s. 46.277, Stats., the county department or aging unit designated to administer the medical assistance waiver. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure written summaries of grievances including the findings, conclusions and any actions taken, were provided to Resident 1's power of attorney (POA E), for grievances s/he made during April 2025 on Resident 1's behalf. Findings include: The Department received a complaint alleging care concerns and noted concerns were reported to management. On 06/16/2025 at 12:43 PM, Surveyor	U 272		

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

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U 272	Continued From page 1 interviewed Caregiver C. Caregiver C said Resident 1 required staff assistance with all activities of daily living including toileting assistance and incontinence care needs. In connection with these care needs, staff are supposed to provide 2 hour checks for incontinence and toileting during awake hours. Caregiver C said Resident 1's power of attorney for healthcare (POE E) installed and routinely monitors cameras in Resident 1's room and has frequently complained Resident 1 was not receiving 2 hour checks. Caregiver C explained when POE E would complain to him/her s/he would tell POE E, "I'll mention it to (staff)" and POE E would respond with frustration and say, "It's the same thing over and over." On 06/16/2025 at 1:17 PM, Surveyor interviewed Manager B. S/he confirmed Resident 1's care needs as described by Caregiver C and also confirmed POE E has complained Resident 1 is not receiving necessary care. Manager B provided the following recent examples: On 04/18/2025 at approximately 11:00 PM, POE E sent text messages reporting s/he viewed the cameras and Resident 1 had not yet been assisted to bed (normal bedtime approximately 8:00 PM.) Manager B contacted facility staff to ensure Resident 1 was assisted to bed. Shortly after, POE E complained again via text because when Caregiver D assisted Resident 1 to bed, s/he did not toilet Resident 1 first. Manager B showed Surveyor the text string from that evening. On 04/22/2025, s/he met with POE E to discuss the 04/18 concerns during which time POE E complained about another incident on 04/12/2025. POE E described camera footage which showed Resident 1 was not checked on during the afternoon, subsequently was	U 272		

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U 272	Continued From page 2	U 272		

incontinent of bowel and then was not promptly provided incontinence care. POA E specifically reported it was again Caregiver D who did not provide the care.
Manager B said in response to the incidents, s/he informed Caregiver D s/he received the 2 complaints and as a result (and based on POE E's request), Caregiver D was no longer allowed to be responsible for Resident 1's care. In addition, Caregiver D received a written warning. Manager B provided Surveyor the written warning which read, "4/12/25 - Assisted resident to dinner with soiled pants of feces and on [his/her] hands. Walker was cleaned, however resident was not. No checks done prior, nor after. 4/18/2025 - Assisted resident to bed w/out [sic] toileting [him/her] at 11 p.m., only after family member called...Job duties/resident needs MUST not be neglected..."

Manager B said s/he did not investigate the concerns by conducting interviews with Caregiver L or others and only issued the warning based on POE E's reports. Manager B said s/he did not provide a written summary of the grievance, the findings, conclusions or any actions taken to POE E. Surveyor reviewed the June 2025 schedule, Caregiver L remained on the schedule working 2nd shift.

On 06/16/2025, Surveyor interviewed POE E. S/he confirmed observing care concerns via the cameras on 04/12/2025 and 04/18/2025 and complained to Manager B about both incidents, first on 04/14 and again on 04/18 and 04/22. POE E said s/he was given verbal reassurance Caregiver D would no longer be employed at the facility, but recently s/he was disappointed to learn Caregiver D still worked in the building. POE E said s/he did not receive a written

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U 272	Continued From page 3	U 272		

response to his/her grievances made during the month of April 2025.

On 06/16/2025 at 4:31 PM, Surveyor interviewed Director of Operations A and Manager B.

During the interview, Manager B provided Surveyor the provider's "Grievance/Complaint Policy" which read in part:
"Residents and/or their families are encouraged to exercise their rights to voice or present a complaint, resolution, concern, or suggestion addressing all areas of living, without concern of reprisal or unfair treatment. Complaints, concerns, or suggestions shall be acknowledged and addressed in a timely and expeditious manner. DEFINITION: A grievance is a resident's, family member's, or a team member's concern or request not met by the facility that may cause distress to the resident, or other residents...PROCEDURE: 1...All verbal complaints/grievances are to be recorded in writing and submitted to the Executive Director...The residential care apartment complex shall provide a written summary of the grievance, findings, conclusions and any action taken as a result of the grievance to the resident, and/or to the resident's designated representative...."

Director of Operations A confirmed the provider's response to the grievance was to issue a written warning to Caregiver D and a verbal update to POE E. Director of Operations A stated that is not his/her normal process and s/he would ensure in the future grievances were investigated and the communicated in writing to the person who filed the grievance. Director of Operations A said they would also retroactively investigate the care concerns and if it was determined neglect occurred, they would report to as required to the

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U 272	Continued From page 4 Office of Caregiver Quality.	U 272		