Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	590179	A. BUILDING: ____ B. WING ____	07/02/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WOODVIEW	**6001 E THIRD ST SUPERIOR, WI 54880**

(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 07/02/2024, Surveyor conducted an abbreviated survey at Woodview. Two deficiencies were identified. Census: 4.	M 000		
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 ensure the home was well-maintained. Findings include: The provider is licensed to care for 4 residents in the client group developmentally disabled. On 07/02/2024, Surveyor toured the home with Team Lead (TL) B and observed in the dining room an area approximately 2 feet by 4 feet of linoleum tiles that did not match the rest of the flooring. The linoleum tiles were duct taped in multiple locations where the new linoleum tiles met the old. TL B stated they had requested all the flooring be replaced approximately 2 years ago and that Maintenance D's solution was to replace the 2' x 4' area. Surveyor observed in the main bathroom what	M 276		

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

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M 276	Continued From page 1 appeared to be approximately 6 nail protrusions coming up through the linoleum floor in front of the toilet and significant damage to the trim around the left side of the bathtub. At approximately 1:30 PM, Surveyor interviewed Administrator C, who stated s/he was frustrated with Maintenance D and the delays with repairs and the poor workmanship of the repairs that were completed. The facility did not ensure the home was well-maintained.	M 276		
Y3097	50.06 CERTAIN ADMISSIONS TO FACILITIES Certain admissions to facilities. (1) In this section, incapacitated means unable to receive and evaluate information effectively or to communicate decisions to such an extent that the individual lacks the capacity to manage his or her health care decisions, including decisions about his or her post?hospital care. (2) An individual under sub. (3) may consent to admission, directly from a hospital to a facility, of an incapacitated individual who does not have a valid power of attorney for health care and who has not been adjudicated incompetent under ch. 880, if all of the following apply: (a) No person who is listed under sub. (3) in the same order of priority as, or higher in priority than, the	Y3097		

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Y3097	Continued From page 2 individual who is consenting to the proposed admission disagrees with the proposed admission. (am) 1. Except as provided in subd. 2., no person who is listed under sub. (3) and who resides with the incapacitated individual disagrees with the proposed admission. 2. Subdivision 1. does not apply if any of the following applies: a. The individual who is consenting to the proposed admission resides with the incapacitated individual. b. The individual who is consenting to the proposed admission is the spouse of the incapacitated person. (b) The individual for whom admission is sought is not diagnosed as developmentally disabled or as having a mental illness at the time of the proposed admission. (c) A petition for guardianship for the individual under s. 880.07 and a petition for protective placement of the individual under s. 55.06 (2) are filed prior to the proposed admission. (3) The following individuals, in the following order of priority, may consent to an admission under sub. (2): (a) The spouse of the incapacitated individual.	Y3097		

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Y3097	Continued From page 3 (b) An adult son or daughter of the incapacitated individual. (c) A parent of the incapacitated individual. (d) An adult brother or sister of the incapacitated individual. (e) A grandparent of the incapacitated individual. (f) An adult grandchild of the incapacitated individual. (g) An adult close friend of the incapacitated individual. (4) A determination that an individual is incapacitated for purposes of sub. (2) shall be made by 2 physicians, as defined in s. 448.01 (5), or by one physician and one licensed psychologist, as defined in s. 455.01 (4), who personally examine the individual and sign a statement specifying that the individual is incapacitated. Mere old age, eccentricity or physical disability, either singly or together, are insufficient to make a finding that an individual is incapacitated. Neither of the individuals who make a finding that an individual is incapacitated may be a relative, as defined in s. 242.01 (11), of the individual or have knowledge that he or she is entitled to or has a claim on any portion of the individual?s estate. A copy of the statement shall be included in the	Y3097		

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Y3097	Continued From page 4 individual?s records in the facility to which he or she is admitted. (5) (a) Except as provided in par. (b), an individual who consents to an admission under this section may, for the incapacitated individual, make health care decisions to the same extent as a guardian of the person may and authorize expenditures related to health care to the same extent as a guardian of the estate may, until the earliest of the following: 1. Sixty days after the admission to the facility of the incapacitated individual. 2. Discharge of the incapacitated individual from the facility. 3. Appointment of a guardian for the incapacitated individual. (b) An individual who consents to an admission under this section may not authorize expenditures related to health care if the incapacitated individual has an agent under a durable power of attorney, as defined in s. 243.07 (1) (a), who may authorize expenditures related to health care. (6) If the incapacitated individual is in the facility after 60 days after admission and a guardian has not been appointed, the authority of the person who consented to the admission to make	Y3097		

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Y3097	Continued From page 5 decisions and, if sub. (5) (a) applies, to authorize expenditures is extended for 30 days for the purpose of allowing the facility to initiate discharge planning for the incapacitated individual. (7) An individual who consents to an admission under this section may request that an assessment be conducted for the incapacitated individual under the long term support community options program under s. 46.27 (6) or, if the secretary has certified under s. 46.281 (3) that a resource center is available for the individual, a functional and financial screen to determine eligibility for the family care benefit under s. 46.286 (1). If admission is sought on behalf of the incapacitated individual or if the incapacitated individual is about to be admitted on a private pay basis, the individual who consents to the admission may waive the requirement for a financial screen under s. 46.283 (4) (g), unless the incapacitated individual is expected to become eligible for medical assistance within 6 months. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure a caregiver background check (CBC) was completed at least every four years for 2 of 2 employees reviewed. Findings include:	Y3097		

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Y3097	Continued From page 6 The provider is licensed to care for 4 residents in the client group developmentally disabled. On 07/02/2024, Surveyor reviewed Caregiver A's and Team Lead (TL) B's record. Caregiver A was hired on 02/14/2024. His/her record did not include a current CBC. TL B was hired on 05/25/2010. His/her record did not include a current CBC. At approximately 12:45 PM, Surveyor interviewed Administrator C, who stated s/he was unable to locate the current CBCs for Caregiver A and TL B but "knew" they were completed last March 2023 and most likely misfiled. Administrator C stated s/he and would need to check the files in the main office. Administrator C stated it was his/her and the administrative assistant's responsibility to ensure the CBCs were completed. Surveyor requested the CBCs for Caregiver A and TL B by 07/03/2024 at 12:00 PM. At 4:23 PM, Surveyor received an email from Administrator C that stated, "Attached are the Background Checks for [Caregiver A, TL B ...]. We had to re-do/resubmit for these Backgrounds [sic] this afternoon. I searched everywhere for these, and could not locate them. We called the state to see if they could send them over, and they only are able to if it has been within the past 6 months." Surveyor reviewed the documents attached to the email. The CBCs for Caregiver A and TL B were dated 07/02/2024, the day the survey was completed. The facility did not complete the required caregiver background checks.	Y3097		