

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0020312	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 05/22/2025
NAME OF PROVIDER OR SUPPLIER STILL WATERS ASSISTED LIVING LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 521 N GRANT AVE JANESVILLE, WI 53548		
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N 000	Initial Comments From 04/29/2025 to 05/22/2025, Surveyor conducted a standard survey and two complaint investigations at Still Waters Assisted Living LLC, a CBRF in Janesville. Three deficiencies were identified. One of 2 complaints was substantiated. Census: 11	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 caregiver background checks for 1 of 3 caregivers were conducted at time of hire or every four years. The facility could not provide a complete four-year background checks for Caregiver C following the procedures in S.50.065, Stats., and ch. DHS 12.	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 04/29/2025 at approximately 10:00 a.m., Surveyor requested Caregiver C's employee records to include background checks from Administrator A. According to The Wisconsin Caregiver Program Manual (P-00038), a complete Caregiver Background Check, at minimum, consists of: 1) A completed DHS form F-82064, Background Information Disclosure (BID). 2) A response from the Department of Justice (DOJ). 3) A Governmental Findings Report from DHS that reports the person's status, including administrative finding or licensing restrictions (IBIS). On 04/29/2025 at approximately 11:30 a.m., surveyors reviewed and documented the following: -Caregiver C was hired on 11/15/2018. Caregiver C's record included DOJ, dated 01/12/2023, and IBIS, dated 01/12/2023. The record did not include an updated BID. On 05/01/2025 at approximately 4:30 p.m., Surveyor interviewed Administrator A. Surveyor stated they were unable to locate a BID that was part of the four-year background documentation for Caregiver C. Administrator A stated that those documents were received from the previous owner.	N 219		
N 355	83.32(3)(k) Rights of Residents: Self-determination	N 355		

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N 355	Continued From page 2 In addition to the rights under s. 50.09, Stats., each resident shall have all of the following rights: Self-determination. Make decisions relating to care, activities, daily routines and other aspects of life which enhance the resident ' s self reliance and support the resident ' s autonomy and decision making. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure Resident 1's right of self-determination, to make decisions relating to care, activities, daily routines and other aspects of life which enhanced and supported their autonomy and decision making was recognized. Resident 1 was deemed ready for discharge by hospital providers on 03/21/2025. The assisted living facility did not feel they could manage care for Resident 1. Resident 1 was not allowed to return to his/her home. FINDINGS INCLUDE: On 04/03/2025, the Department received a complaint related to resident care. On 04/29/2025, Surveyor conducted a complaint investigation and standard survey. At approximately 10:00 a.m., Surveyor requested the record for Resident 1. On 04/29/2025 at 10:15 a.m., Surveyor discussed Resident 1's most recent admission to the hospital with Administrator A. Administrator A stated there were many issues concerning Resident 1. Administrator A stated before admission to the hospital Resident 1 was	N 355		

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N 355	Continued From page 3 wondering into other rooms in the facility and the facility increased the monthly fee due to care needs for Resident 1. Administrator A stated the facility issued Resident 1 a 30-day notice on 03/01/2025 for nonpayment of the increased monthly rate. Administrator A stated that Resident 1 went to the hospital for a stroke on 03/17/2025. Administrator A stated Licensee B accessed Resident 1 in the hospital on 03/28/2025 but the family stated Resident 1 was not returning to the facility. Administrator A stated s/he would provide the documentation and progress notes. Administrator A stated s/he would forward the email conversation between the family and facility staff. On 04/29/2025 at approximately 1:00 p.m., Surveyor Reviewed Resident 1's record. Resident 1 was admitted to the facility on 11/09/2012 with a diagnosis of type II diabetes, dementia and depression. Resident 1 had an activated healthcare power of attorney that made decisions on his/her behalf. Resident 1's ECP assess needs dated, 12/04/2024 indicated the following: -Resident 1 required 1 staff member to complete tasks of snack monitoring, special dietary needs, medication management, destructive/abusive behavior, attitude and interactions. On 04/29/2025, Surveyor reviewed notes from the facility to the Family Member F for Resident 1 from 01/01/2025 thru 03/15/2025: -On 01/08/2025 facility mailed a letter informing [Family Member F] of room rate increase and level of care cost share. The letter states "Due to increase operational costs, it has become apparent that it is necessary to impose a rate increase. The new monthly rate will increase from	N 355			

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N 355	Continued From page 4 \$3433.00 monthly to \$5100.00 for private pay, effective March 1, 2025. If you have any questions or concerns, please feel free to contact us." An updated admission agreement with new rate was included with this letter -On 02/18/2025, the Family Member F emailed a letter stating "I apologize for not returning the agreement forms sooner. I told [Licensee B] I had them printed. Through conversation with [Licensee B] that day, [s/he] encouraged me to contact [advocacy group] again. [S/he] said some changes were made for housing programs. I did reapply [Resident 1] for a program and am waiting for approval. I have been working with [advocacy group] and things are moving along quickly. I sent in more information yesterday. I should know by mid March or sooner. I held off on signing the rate increase form because I can't commit [Resident 1] to this price. [His/her] income will never increase without state help. [S/he] received \$3,569.53 total from social security and [his/her] annuity payment. [S/he] pays \$3,433 to [facility] and that leaves \$136.53 to pay for \$237-\$356 per month to [pharmacy] for prescriptions. I pay for [his/her] pull-ups and [his/her] petty cash. Let me know if you're willing to forgo [his/her] rate increase until [s/he's] approved for state aid." -Invoice dated, 02/23/2025, Family Member F sent a note back to facility stating "[Resident 1] has a few extra dollars from tax return, but not the full amount to cover March. I will pay the difference as soon as [his/her] state aid program gets approved." -On 03/01/2025 the facility issued a 30 day notice due to partial rent payment of \$4100.00 towards the \$5100.00 due 03/01/2025. On 04/29/2025, Surveyor reviewed Resident 1's incident reports. Incident reports indicated the	N 355		

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N 355	Continued From page 5 following -On 03/17/2025 at 7:30 p.m., Resident 1 was "found on the floor in the supplies (sic.) closet with shoes on his words were slurred and his face was dropping down so I called ems." On 04/29/2025 at approximately 12:30 p.m., Surveyor interviewed Administrator A and Administrator A confirmed that Resident 1 was transported to hospital. Administrator A stated Resident 1 was admitted to the hospital for a stroke. Administrator A stated that Licensee B texted Family Member F on 03/19/2025, with no response back from Family Member F. On 04/29/2025 Surveyor reviewed facility documentation. The facility had the following note in Resident 1's file: - "On 03/28/2025 at approximately 1:15 pm I went to [hospital] to evaluate [Resident 1] after agreeing to evaluate [him/her] for [MCO] and [Social Worker D]. When I walked into [Resident 1's] room [family member F] said "what are you doing here"? I informed her that [MCO] and [Social Worker D] have asked me to evaluate [Resident 1] for a temporary return to [facility]. I asked [him/her] if [s/he] wanted to talk in the room in front of [Resident 1] or in the hallway. [S/he] hesitated and said the hallway. I told [him/her] the [Administrator A], myself, and the staff are concerned about [Resident 1's] condition in wandering in other resident's room, sexual perversion, and [his/her] anger. [S/he] asked me "do you even know what dementia is? All you guys do is yell at [him/her] and [s/he] gets angry. Are you being charged with abandonment? Is that why you are here? I said, no that is not why I am here. I agreed to evaluate [Resident 1] for a	N 355		

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N 355	Continued From page 6 possible temporary stay at our facility until [MCO] finds a place for [Resident 1]. I said, "Apparently you had no idea I was stopping over. It is obvious this isn't going to work and started walking away. [Family member F] said, what did you with [his/her] meds? I told [him/her] we destroyed them when [Resident 1] moved out. I told [him/her] we don't keep meds in the building after a resident moves out. [S/he] told me the pharmacy takes the unused meds back. I said, "Not if the bubble pack has been opened. [S/he] told me I was wrong, and I disagreed with [him/her]. I started leaving because it was obvious no matter what I said it was wrong in [his/her] opinion. [S/he] said, see you're mad and leaving. I said, I'm not mad. I came here to possibly offer the opportunity for [Resident 1] to come back temporarily, but that isn't going to work and left. I called [Social Worker D] on my way out and informed [him/her] what happened. I also called [MCO] and informed of the situation." On 04/30/2025 at approximately 10:15 a.m., Surveyor interviewed Social Worker D. Social worker D stated s/he contacted the facility on 03/19/2025 to begin a discharge plan. Social Worker D stated that Licensee B informed him/her that the facility could not take Resident 1 back to the facility. Social Worker D stated that Licensee B was very hard to contact and took several days to return phone calls. Social Worker D stated that s/he informed the facility that Resident 1 was back his/her baseline behavior. Social Worker D stated that "Resident 1 sat at the hospital for several days waiting for placement." On 05/01/2025 at approximately 4:30 p.m., Surveyor interviewed Administrator A. Administrator A stated that the facility did not take 8 days to visit with Resident 1. Administrator A	N 355		

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N 355	Continued From page 7 stated that Licensee B was in contact with the hospital social worker. Surveyor submitted request for hospital records on 05/01/2025 On 05/21/2025 at approximately 10:00 a.m., Surveyor reinterviewed Social Worker D while s/he reviewed medical records in the hospital computer system. Social worker D stated s/he contacted the facility on 03/19/2025 to begin a discharge plan. Social Worker D stated that Licensee B informed him/her on 03/20/2025 that the facility could not meet the needs for Resident 1. Social Worker D informed the facility that Resident 1 was back to his/her baseline and could return to the facility on 03/21/2025. Social Worker D stated that the hospital was willing to monitor Resident 1 until 03/24/2025. Social Worker D stated that Licensee B did come up to the hospital on 03/28/2025 to assess Resident 1. Social Worker D stated that Licensee B called him/her and stated there was a disagreement with Family Member F. Social Worker D stated that Licensee B informed him/her that Resident 1 could not return to the facility. On 05/22/2025 at approximately 4:30 p.m., Surveyor shared concern that Resident 1 was not allowed to return to his/her home after his/her hospital stay. Administrator A acknowledged that the situation with Resident 1 was unfortunate. Administrator A did state that "family moved all of [his/her] belongings out on 03/22/2025 with telling the facility."	N 355			
N 389	83.35(3)(d) Service plans updated annually or on changes Individual service plan review. Annually or when there is a change in a resident 's needs, abilities	N 389			

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N 389	Continued From page 8 or physical or mental condition, the individual service plan shall be reviewed and revised based on the assessment under sub. (1). All reviews of the individual service plan shall include input from the resident or legal representative, case manager, resident care staff, and other service providers as appropriate. The resident or resident 's legal representative shall sign the individual service plan, acknowledging their involvement in, understanding of and agreement with the individual service plan. This Rule is not met as evidenced by: Based on record review and interview, the facility did not update the individual service plan (ISP) for Resident 1 and Resident 2 annually or upon change of condition. Findings include On 04/29/2025, Surveyor conducted a complaint investigation and standard survey. At approximately 10:00 a.m., Surveyor requested the records to include the most current ISP for Resident 1 and Resident 2. On 04/29/2025, at approximately 1:30 p.m., Surveyor reviewed the ISP for Resident 1 and Resident 2 and identified the following: -Resident 1 was admitted to the facility on 11/09/2012. Resident 1's ISP was dated 12/01/2023 and it was completed by the previous licensee. -Resident 2 was admitted to the facility on 03/29/2021. The ISP was dated 03/08/2023 and was completed by the previous licensee.	N 389		

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N 389	Continued From page 9 On 04/29/2025, at approximately 3:30 p.m., Surveyor interviewed Administrator A. Administrator A stated that the facility had just taken over in October of 2024 and they were working hard to update all the paperwork. Administrator A stated that the licensee brought in a new computerized system. Administrator A stated that s/he had been getting all the old paper files uploaded and the medications in order. Administrator A did provide updated assessments s/he was working on for Resident 1 and Resident 2. On 04/30/2025 at approximately 4:30 p.m., Surveyor reviewed the above concerns with Administrator A. Administrator A acknowledged the old ISPs for Resident 1 and Resident 2. Administrator A stated s/he would be updating Resident 1 and Resident 2's ISP's using the new computer system at the facility.	N 389		