STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017292	A. BUILDING: _____ B. WING _____	C 02/11/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OPEN ARMS ASSISTED LIVING	5422 WESTMORE DR RACINE, WI 53406

(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 02/11/2025, Surveyor completed a standard survey and complaint investigation at Open Arms Assisted Living. As a result, 4 deficiencies were identified. The complaint was unsubstantiated. Census: 4	M 000		
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 2 residents (Resident 1) was screened for tuberculosis (TB) 90 prior to or 7 days after admission. Resident 1 was screened for TB 68 days after admission and communicable diseases 45 days after admission. Findings include: On 02/11/2025, at 10:40 AM, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 12/16/2022 with diagnoses including dementia, diabetes, chronic obstructive pulmonary disease,	M 380		

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

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M 380	Continued From page 1 osteoarthritis, and post-traumatic stress disorder. Resident 1's record contained a TB test dated 02/22/2023. Resident 1's record contained a communicable disease screening dated 01/30/2023. On 02/11/2025, at 11:30 AM, Surveyor interviewed Administrator A. Administrator A reported s/he was aware of the code requirement. Administrator A reported Resident 1 was an emergency admission and needed to move in same day as s/he was referred, so the screening was completed after admission.	M 380		
M 384	88.06(2)(b) SERVICE AGREEMENT EXCEPT RESPITE An adult family home shall have a service agreement with each person to be admitted to the home except a person being admitted for respite care. The service agreement shall be completed prior to admission and revised at least 30 days prior to any change. The service agreement shall be dated and signed by the licensee and the person being admitted or the persons guardian or designated representative. Copies shall be provided to all parties and to the placing agency, if any. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure an admission agreement was completed, dated, and signed by each resident, guardian or designated representative, and licensee, prior to admission for 1 of 1 resident. Resident 1's service agreement was not signed by her/his guardian.	M 384		

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M 384	Continued From page 2 Findings include: On 02/11/2025, at 10:40 AM, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 12/16/2022 with diagnoses including dementia, diabetes, chronic obstructive pulmonary disease, osteoarthritis, and post-traumatic stress disorder. Resident 1 had a court appointed guardian. The guardian papers were dated 09/18/2017. Resident 1's file contained an admission agreement signed Administrator A. Resident 1's admission agreement was not signed by Resident 1's guardian. Resident 1's file did not contain any evidence of a signed agreement between the licensee and Resident 1's guardian. On 02/11/2025, at 11:30 AM, Surveyor interviewed Administrator A. Administrator A reported s/he was aware of the code requirement. Administrator A reported s/he was unaware the paperwork was not signed. Administrator A reported Resident 1 was an emergency placement. Administrator A reported s/he would ensure the paperwork was signed.	M 384		
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	M 464		

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M 464	Continued From page 3 order in the resident's file. This Rule is not met as evidenced by: Based on record review and interview, the provider did not obtain a written order from the physician who prescribed medications to the resident, stating who can administer the medications for 1 of 2 residents. Resident 1's record did not contain a written order to administer medications prior to staff administering medications. Findings include: On 02/11/2025, at 10:40 AM, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 12/16/2022 with diagnoses including dementia, diabetes, chronic obstructive pulmonary disease, osteoarthritis, and post-traumatic stress disorder. Resident 1's individual service plan (ISP), 04/17/2024, indicated Resident 1's medications were administered by staff. On 02/11/2025, at 11:30 AM, Surveyor interviewed Administrator A. Administrator A reported s/he was aware of the code requirement. Administrator A confirmed Resident 1 required staff to administer all her/his medications. Administrator A reported Resident 1 was an emergency admission. Administrator A confirmed the medication order was to be signed prior to staff administering medications.	M 464		
M 466	88.07(3)(e)1 MEDICATION- RECORD KEEPING The licensee shall keep a record of all prescription medications	M 466		

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M 466	Continued From page 4 controlled, dispensed or administered by the licensee which show the name of the resident, the name of the particular medication, the date and time the resident took the medication and errors and omissions. The medication controlled by the licensee shall be kept in a locked place. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 resident's (Resident 1) medication administration record (MAR) contained accurate medication administration. Resident 1's MAR contained inaccurate information related to her/his Mounjaro injection. Findings include: On 02/11/2025, at 10:40 AM, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 12/16/2022 with diagnoses including dementia, diabetes, chronic obstructive pulmonary disease, osteoarthritis, and post-traumatic stress disorder. Resident 1's MAR indicated Resident 1 was prescribed Mounjaro 7.5 milligrams (mg) to be injected every 7 days for type 2 diabetes. Resident 1's MAR indicated Resident 1 did not receive her/his injection of Mounjaro due to the medication was "not in the house" on the following days: 07/25/2024, 08/29/2024, 09/26/2024, 10/24/2024, 10/31/2024, and 02/06/2025. On 02/11/2024, at 11:30 AM, Surveyor interviewed Administrator A and Nurse B. When Surveyor relayed concerns regarding Resident	M 466		

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M 466	Continued From page 5 1's missed Mounjaro injections, Administrator A reported Resident 1 received all her/his scheduled injections as the medication was on autofill from the pharmacy. Nurse B reviewed the paperwork and confirmed Surveyor's concerns with the documentation. Nurse B placed a call to Caregiver C. Caregiver C reported s/he did give Resident 1 her/his Mounjaro injection. Caregiver C reported when s/he looked in the refrigerator for the medication and the medication was not in the refrigerator, s/he marked the MAR as not administered due to not in house. Caregiver C reported s/he reported the medication error to her/his manager, who then asked Caregiver C to check the medication closet. Caregiver C reported s/he would find the injection in the medication, and then would administer it to Resident 1. Caregiver C reported s/he did not go back in the MAR to adjust the record to indicate the medication was administered. When Surveyor inquired why this happened multiple times, Administrator A and Nurse B were unable to provide an explanation. Administrator A reported s/he would have the staff member retake a medication class to ensure compliance with the facility's policies for medication administration.	M 466		