STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0020580	A. BUILDING: _____ B. WING _____	C 05/23/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COURTYARD AT FITCHBURG ASSISTED LIVING (THE	5669 WILSHIRE DR FITCHBURG, WI 53711

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N 000	Initial Comments From 05/19/2025 to 05/23/2025, Surveyors conducted a complaint investigation at Courtyard at Fitchburg Assisted Living, a CBRF in Fitchburg. Two deficiencies were identified. The complaint was unsubstantiated. Census: 33	N 000		
N 386	83.35(3)(a) Comprehensive Individualized Service Plan Comprehensive individual service plan. Scope. Within 30 days after admission and based on the assessment under sub. (1), the CBRF shall develop a comprehensive individual service plan for each resident. The individual service plan shall include all of the following: 1. Identify the resident ' s needs and desired outcomes. 2. Identify the program services, frequency and approaches under s. HFS 83.38(1) the CBRF will provide. 3. Establish measurable goals with specific time limits for attainment. 4. Specify methods for delivering needed care and who is responsible for delivering the care. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 2 residents reviewed had an individual service plan (ISP) that included all needs of the resident and the frequency and approaches in which services would be provided. Findings include:	N 386		

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

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N 386	Continued From page 1 On 05/19/2025 at approximately 11:00 a.m., Surveyor reviewed Resident 1's record. Resident 1 was admitted to the provider's facility on 08/22/2024 with diagnoses including dementia and diabetes. Review of Resident 1's record and ISP, dated 04/21/2025, indicated the following needs were not included in the ISP: Wound Care: A hospital discharge summary, dated 04/14/2025, indicated Resident 1 required daily and as needed wound care that was to be completed by caregivers and home health. Resident 1's ISP did not include or indicate any wound care needs for Resident 1. Home Health: A hospital discharge summary, dated 04/14/2025, indicated Resident 1 was set up with home health services for nursing, physical therapy and occupational therapy. A home health note, dated 04/22/2025, indicated home health RN services were terminated. The note did not indicate therapy services had been terminated. Resident 1's ISP did not include home health's involvement in Resident 1's care. Private Care Providers: Resident 1's ISP indicated the provider's staff were responsible for care needs when private care providers were not available. On 05/19/2025 at approximately 12:30 p.m., Surveyor interviewed Administrator A and RN B regarding Resident 1's private care providers.	N 386		

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N 386	Continued From page 2 Surveyor asked how often Resident 1 had private care providers and what cares the provider care providers were responsible for. Administrator A stated Resident 1 had a private care provider visit 1 time every 4 hours for approximately 40 minutes from 8:00 a.m. to 8:00 p.m. Administrator A stated the provider's caregivers were responsible for cares whenever private care providers were not present. RN B stated private care providers were responsible for all wound care. The ISP did not indicate the hours or frequency private care providers were present or that private care providers were responsible for wound care. On 05/19/2025 at approximately 1:20 p.m., Surveyors reviewed concern with Administrator A that Resident1's ISP did not include wound care, home health services and private care provider's involvement. Administrator A nodded his/her head in agreement and stated s/he was working on increasing staffing to allow Administrator A to spend less time providing cares and more time updating ISPs. Administrator A stated RN B did not have experience with ISPs and what needed to be included.	N 386		
N 431	83.38(1)(g) Health monitoring. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the resident ' s highest level of functioning. In addition to the assessed needs as determined under s. DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Health monitoring. 1. The CBRF shall monitor the health of residents and make arrangements for physical	N 431		

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N 431	Continued From page 3	N 431		

health, oral health or mental health services unless otherwise arranged for by the resident. Each resident shall have an annual physical health examination completed by a physician or an advanced practice nurse as defined in s. N 8.02(1), unless seen by a physician or an advanced practice nurse as defined in s. N 8.02(1) more frequently. 2. When indicated, a CBRF shall observe residents ' food and fluid intake and acceptance of diet. The CBRF shall report significant deviations from normal food and fluid intake patterns to the resident ' s physician or dietician. 3. The CBRF shall document communication with the resident ' s physician and other health care providers, and shall record any changes in the resident ' s health or mental health status in the resident ' s record.

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure 1 of 2 residents reviewed had their physical health monitored and changes documented in his/her record. The provider did not monitor or care for Resident 1's wound.

Findings include:

On 05/19/2025 at approximately 11:00 a.m., Surveyor reviewed Resident 1's record. Resident 1 was admitted to the provider's facility on 08/22/2024 with diagnoses including dementia and diabetes. Resident 1's record included a hospital discharge summary, dated 04/14/2025, that indicated s/he was hospitalized from 03/29/2025 to 04/14/2025 for complications related to a foot infection. The discharge summary indicated Resident 1 had a diabetic foot ulcer that required daily and as needed wound

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N 431	Continued From page 4 care. On 05/19/2025 at approximately 12:00 p.m., Surveyor requested documentation of skin assessments/wound care monitoring from RN B. On 05/19/2025 at approximately 12:30 p.m., RN B provided Surveyor with a "Wound Record Report," dated 04/16/2025. The report indicated a home health agency completed 1 visit for wound care. RN B stated Resident 1's family declined further home health RN visits for wound care and stated Resident 1's private duty care providers were to complete wound care moving forward. Surveyor was then provided documentation of a home health note, dated 04/21/2025, that stated "Family has hired daily paid caregivers to manage all wounds and do not want [home health agency] nursing for any other services ... Family declined as they want to streamline communication from private caregivers managing wound care and ALF staff so there is not too much communication from too many different parties." Surveyor asked for further clarification regarding the responsibility of wound care for private duty care providers vs facility care providers from RN B. RN B stated the wound care responsibilities were addressed in Resident 1's ISP. RN B then reviewed Resident 1's ISP and acknowledged wound care responsibilities were not identified in the ISP. Surveyor asked if the provider had any additional assessments to indicate the provider was monitoring the wound. RN B stated, "I don't do wound care. That just isn't who I am." RN B stated s/he had provided all documentation s/he had related to Resident 1's wound and explained that s/he was not a wound specialist, did not know anything about wounds, did not complete wound care and did not have time to provide up to 3 hours of nursing services for residents on a	N 431		

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N 431	Continued From page 5 weekly basis. The provider did not monitor Resident 1's wound and document changes in his/her wound in the record.	N 431		