STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017048	A. BUILDING: _____ B. WING _____	C 03/25/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MILESTONE SENIOR LIVING NSD	4686 N SHORE DR RHINELANDER, WI 54501

(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 03/20/2024, Surveyor conducted a standard survey at Milestone Senior Living NSD. Data collection continued through 03/25/2024. Four deficiencies were identified. Census: 20	U 000		
U 133	89.23(4)(c) SERVICES PROVIDER QUALIFICATIONS. Freedom from abuse, neglect and exploitation. A residenial care apartment complex shall ensure that tenants are free from abuse, neglect or financial exploitation by the facility or its staff. A residential care apartment complex shall not employ an individual who has been convicted of a crime that is substantially related to the circumstances of the job or for whom there is a substantiated finding of abuse or neglect or misappropriation of property in the department's registry for nurse aides, home health aides and hospice aides. The facility shall conduct a criminal records check with the Wisconsin department of justice and shall check with the department's registry for nurse aides, home health aides and hospice aides when hiring a service manager, service providers and other persons to work in the facility or have contact with tenants.	U 133		

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

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U 133	Continued From page 1	U 133		

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure caregiver background checks (CBC) were completed for 2 of 2 caregivers sampled.

Findings include:

According to The Wisconsin Caregiver Program Manual (P-00038), Wis. Stat. ch. 50, and Wis. Admin. Code ch. 12, a complete CBC, 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 "Response to Caregiver Background Check" letter from the Department of Health Service, also referred to as the Integrated Background Information System (IBIS).

On 03/20/2024, Surveyor reviewed staff files for Caregiver B [Hired: 01/09/2023] and Caregiver C [Hired: 02/09/2023]. Apart from a BID form, dated 01/02/2023, Caregiver B's file did not include a completed CBC. Apart from a BID form, dated 02/09/2023, Caregiver C's file did not include a completed CBC.

On 03/20/2024 at 3:30 PM, Surveyor interviewed Director A. Surveyor asked Director A if additional CBC records were available for Caregiver B and Caregiver C. Director A reported that s/he would look for additional CBC information and would forward the records to Surveyor via e-mail.

On 03/25/2024 at 12:00 PM, Surveyor

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U 133	Continued From page 2 interviewed Director A. Director A verified that s/he was unable to locate additional CBC information for Caregiver B and Caregiver C. Director A reported that s/he would complete the CBCs for Caregiver B and Caregiver C today. On 03/25/2024 at 2:13 PM, Director A provided Surveyor with completed CBCs for Caregiver B and Caregiver C, dated 03/25/2024. On 03/25/2024 at 2:15 PM, Surveyor interviewed Director A. Director A confirmed Caregiver B was hired on 01/09/2023 and Caregiver C was hired on 02/09/2023. Director A reported that s/he was unable to locate additional CBC information for Caregiver B and Caregiver C prior to today's date, 03/25/2024. Director A confirmed completing CBCs for Caregiver B and Caregiver C on today's date.	U 133		
U 134	89.23(4)(d)1. SERVICES PROVIDER QUALIFICATIONS. Staff training. All facility staff shall have training in safety procedures, including fire safety, first aid, universal precautions and the facility's emergency plan, and in the facility's policies and procedures relating to tenant rights. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 2 caregivers sampled	U 134		

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U 134	Continued From page 3 completed training related to tenant rights. Findings include: On 03/20/2024, Surveyor reviewed Caregiver C's file. Caregiver C was hired on 02/09/2023. Caregiver C's file did not contain training related to tenant rights. On 03/20/2024 at 3:30 PM, Surveyor interviewed Director A. Surveyor asked Director A for Caregiver C's training record related to tenant rights. Director A reported that s/he would look for Caregiver C's tenant right's training and would forward the training records to Surveyor via e-mail. On 03/25/2024 at 2:15 PM, Surveyor interviewed Director A. Director A verified that s/he was unable to locate tenant right's training for Caregiver C.	U 134		
U 172	89.27(1) SERVICE AGREEMENT REQUIREMENT. A residential care apartment complex shall enter into a mutually agreed-upon written service agreement with each of its tenants consistent with the comprehensive assessment under s. DHS 89.26. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure Tenant 1 had a signed service agreement. Findings include: On 03/20/2024, Surveyor reviewed Tenant 1's	U 172		

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U 172	Continued From page 4 record. Tenant 1 was admitted on 09/14/2021. Tenant 1's record did not include a signed service agreement. On 03/20/2024 at 3:30 PM, Surveyor interviewed Director A. Surveyor requested Tenant 1's service agreement. Director A informed Surveyor that Director A would look for Tenant 1's service agreement and would forward to Surveyor via e-mail. On 03/25/2024 at 2:15 PM, Surveyor interviewed Director A. Director A reported that s/he was unable to locate Tenant 1's service agreement. Director A confirmed Tenant 1 was admitted on 09/14/2021.	U 172		
U 189	89.28(1) Risk Agreement (1) REQUIREMENT As a protection for both the individual tenant and the residential care apartment complex, a residential care apartment complex shall enter into a signed, jointly negotiated risk agreement with each tenant by the date of occupancy. This Rule is not met as evidenced by: Based on record review and interview, the provider did not enter into a signed, jointly negotiated risk agreement with Tenant 2 by the date of occupancy. Findings include: On 03/20/2024, Surveyor reviewed Tenant 2's record. Tenant 2 was admitted on 04/17/2021. Tenant 2's record did not include a signed	U 189		

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U 189	Continued From page 5 negotiated risk agreement at time of admission. Tenant 2's record included signed negotiated risk agreements, dated 08/11/2021 and 05/26/2022. On 03/20/2024 at 3:30 PM, Surveyor interviewed Director A. Surveyor asked Director A if Tenant 2 had a signed negotiated risk agreement at time of admission. Director A informed Surveyor that Director A would look for additional risk agreements and would forward to Surveyor via e-mail. On 03/25/2024 at 2:15 PM, Surveyor interviewed Director A. Director A reported that s/he was unable to locate a signed risk agreement for Tenant 2 at time of admission. Director A confirmed Tenant 2 was admitted on 04/17/2021. Surveyor asked Director A what the facility's policy and procedure was for entering into signed, jointly negotiated risk agreements with tenants. Director A stated that risk agreements should be reviewed and signed with tenants at the time of admission and then reevaluate them after 30 days.	U 189		