

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0018856	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 02/08/2024
NAME OF PROVIDER OR SUPPLIER ALPHA SENIOR CONCEPTS HOWARD		STREET ADDRESS, CITY, STATE, ZIP CODE 2723 LINEVILLE ROAD HOWARD, WI 54313		
(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
N 000	Initial Comments A complaint investigation and standard survey were conducted at Alpha Senior Concepts Howard on 02/07/2024 with information gathered through 02/08/2024. As a result of this survey the complaint was unsubstantiated. There were 2 deficiencies identified with the survey process. Census: 37	N 000		
N 277	83.25 Continuing education The administrator and resident care staff shall receive at least 15 hours per calendar year of continuing education beginning with the first full calendar year of employment. Continuing education shall be relevant to the job responsibilities and shall include, at a minimum, all of the following: (1) Standard precautions; (2) Client group related training; (3) Medications; (4) Resident rights; (5) Prevention and reporting of abuse, neglect and misappropriation; (6) Fire safety and emergency procedures, including first aid. This Rule is not met as evidenced by: Based on record review and staff interview the provider did not ensure that 1 out of 2 staff reviewed had completed continuing education as required. CG (Caregiver) - A had only 12 hours of continuing education instead of 15 hours as required for 2023 that did not include Standard Precautions training. Findings include: On 02/07/2024 Surveyor reviewed staff records	N 277		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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N 277	Continued From page 1 for training. CG - B was hired on 06/26/2022 and did not have exemption status. A review of training records by Surveyor showed 12 hours of training for 2023 and no training in 2023 in Standard Precautions. During an interview with Surveyor on 02/07/2024 at 12:15 RDN (Regional Director of Nursing) - A indicated CG - B may not have completed all continuing education for 2023 as required but would continue looking. On 02/08/2024 Surveyor received an email from RDN - A verifying CG - B did not have training in Standard Precautions for 2023 and only had completed 12 of 15 hours of training for 2023.	N 277		
N 525	83.47(2)(d) Fire drills. Fire drills. 1. Fire evacuation drills shall be conducted at least quarterly with both employees and residents. Drills shall be limited to the employees scheduled to work at that time. Documentation shall include the date and time of the drill and the CBRF 's total evacuation time. The CBRF shall record residents having an evacuation time greater than the time allowed under s. HFS 83.35(5) and the type of assistance needed for evacuation. Fire evacuation drills may be announced in advance. 2. At least one fire evacuation drill shall be held annually that simulates the conditions during usual sleeping hours. Fire evacuation drills may be announced in advance. Drills shall be limited to the employees scheduled to work during the residents ' normal sleeping hours. This Rule is not met as evidenced by:	N 525		

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N 525	Continued From page 2 Based on record review and staff interview the provider did not ensure fire drills were conducted quarterly including at least one drill simulating the conditions during usual sleeping hours for 2023 having the potential to affect all 37 residents in this facility. Findings include: This facility is licensed as a Class C non-ambulatory (CNA). A class C non-ambulatory CBRF serves residents who are ambulatory, semi-ambulatory or non-ambulatory, but one or more of whom are not physically or mentally capable of responding to a fire alarm by exiting the CBRF without help or verbal or physical prompting. This facility serves residents who are advanced aged, terminally ill, physically disabled, and who have irreversible dementia or Alzheimer's disease. On 02/07/2024 Surveyor reviewed the provider's records for fire drills at this facility. There were 3 noted fire drills for 2023 as follows: 01/09/23 at 8:45 a.m., 02/11/23 at 10:30 a.m., and 03/07/23 at 10:15 a.m. The drills were not done quarterly, there was no 4th drill for 2023, and there were no drills that indicated night time simulation. On 02/07/2024 at approximately 1:30 p.m. RDN (Regional Director of Nursing) - A confirmed to Surveyor no other drills could be found for 2023 but would continue to look. On 02/08/2024 RDN - A sent and email to Surveyor confirming there were no additional fire drills for 2023.	N 525		