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	0017223	A. BUILDING: _____ B. WING _____	R 07/23/2024

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{M 000}	INITIAL COMMENTS On 07/17/2024, Surveyor conducted a verification visit and a complaint investigation. Four deficiencies were identified. Complaint was substantiated. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 3	{M 000}		
M 444	88.07(2)(b)3 TRANSPORTATION TO MEDICAL Providing, arranging, transporting or accompanying a resident to medical or other appointments as part of the resident's individual service plan. This Rule is not met as evidenced by: Based on interview and record review, the provider did not provide or arrange for transportation to 1 of 1 (Resident 3) medical appointments. Findings include: On 07/02/2024, the Department received a concern alleging residents were not being transported to scheduled medical appointments. On 07/17/2024, Surveyor reviewed Resident 3's record and supporting documentation submitted with concern which documented: Provider has missed several routine appointments for [3]. Podiatry: S/he has not had any podiatry care since 10/2023. Providers own documents state that s/he needs to be seen every 3 months. An appointment was not made until after guardian	M 444		

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

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requested.
Ear cleaning: [3] is to have his/her ears cleaned out every 3 months. Last appointment was prior to 09/2023. It is to be done every 3 months due to small ear canal. Provider scheduled and missed or no showed for appointments on April 11, April 19, and May 23. Ear cleaning took place on June 3, 2024.
Neurology - Referral done for movement clinic by psychiatrist. No show for 08/03/2023. Appointment scheduled again for 01/04/2024. Showed up to appointment more than 15 minutes late. Provider made exception and saw [3].

On 07/17/2024, at approximately 4:00 PM, Surveyor interviewed Program Director B. Program Director B stated Resident 3's individual service plan had been set up incorrectly and when s/he became the program director did not realize what medical appointments Resident 3 required. Program Director B stated that there had been some transportation concerns due to staffing levels and timing of other resident appointments. Program Director B stated management had a meeting with Resident 3's Guardian C to discuss the scheduling of Resident 3's medical appointments and the transportation to the appointments.

On 07/23/2024, at approximately 11:50 AM, Area Director A contacted Surveyor. Area Director A stated there had been concerns with the previous program director not scheduling appointments and/or notifying management that a resident had an appointment and needed transportation. Area Director A stated, "Unfortunately, [Resident 3] did miss appointments or have to have appointments rescheduled due to this miscommunication. We had to reschedule one of [Resident 3's] recent appointments and [Guardian C] stated [s/he]

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M 444	Continued From page 2 understood but then [his/her] frustration escalated. I understand, as there was frustration due to the previous program directors miscommunication."	M 444		
M 446	88.07(2)(b)4 RECORD OF MEDICAL VISITS AND REPORTS Keeping a current record of all medical visits, reports and recommendations for a resident. This Rule is not met as evidenced by: Based on interview and record review, the licensee did not ensure that record was kept of all medical records. The provider did not have the medical record for 1 of 1 medical visits Resident 3 had in 2024. Findings include: On 07/02/2024, the Department received a concern alleging residents were not being transported to scheduled medical appointments. On 07/17/2024, Surveyor reviewed complaint supporting documentation. Documentation stated that Resident 3 had an ear cleaning appointment on 06/03/2024, after 3 missed appointments, 04/11/2024, 04/19/2024, and 05/23/2024. Resident 3 had a podiatry appointment after 10/2023. Resident 3's record did not contain these medical records. On 07/17/2024, at approximately 4:00 PM, Surveyor interviewed Program Director B. Program Director B reviewed the available medical records in Resident 3's binder. Program	M 446		

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M 446	Continued From page 3 Director B then stated s/he would need to review Resident 3's medical appointments on his/her insurance providers charting system. Program Director B could not easily determine what documentation referenced the appointments in question. On 07/23/2024, at approximately 11:50 AM, Area Director A contacted Surveyor. Area Director A stated medical records are also to be stored internally on the providers software system. Area Director A stated there could have been a delay in the documents being scanned in.	M 446		
M 448	88.07(2)(b)5 MONITORING HEALTH Monitoring resident health by observing and documenting changes in each resident's health and referring a resident to health care providers when necessary. This Rule is not met as evidenced by: Based on record review and interview, the provider did not monitor 1 of 1 resident's (Resident 3) behavioral health. Findings include: On 07/02/2024, the Department received a concern that alleged resident's health was not properly monitored. On 07/17/2024, at approximately 3:30 PM, Surveyor conducted an onsite survey investigation. Upon arrival, Resident 2 approached Surveyor and said, "sick" as s/he pointed to a chair. Resident 4 stated Resident 3	M 448		

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had broken his/her foot and was at rehab.

On 07/17/2024, Surveyor reviewed Resident 3's record.

Resident 3 moved into the home 08/02/1995 with diagnoses including down syndrome and autism.

Resident 3's "Behavioral Support Plan," dated 04/2024, documented:
"[S/he] screams and cries frequently, this is mostly due to sensitivity to noise and inability to communicate with those around her. During periods of change or transition and lack of sensory input, [Resident 3's] challenging behaviors may increase. Challenges also increase when [Resident 3] has issues communicating [his/her] needs. ... [Resident 3] does have sensory sensitivities and can display some challenging behaviors in association with those concerns. Although [Resident 3] has normal to below normal hearing, [s/he] has on going medical concerns with [his/her] ears due to small ear canals. Along with pain and discomfort that this can cause, [s/he] is also very sensitive to sounds and has an adverse reaction to especially loud sounds like dishes clanking, running water, ringing sounds, lawn mowers, barking dogs, children playing, and loud music or television. [Resident 3] also needs oral input to stay regulated."

Resident 3's Individual Service Plan, dated 06/11/2024, documented:
"Behavioral Challenges which require support interventions: Aggressive to staff, Self Harm or SIB (self-injurious behavior), Aggressive to peers, Verbal aggression"

Resident 3's "Body Chart," dated 06/27/2024,

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documented:
"Fell. Left ankle swelling. [S/he] fell while banging [his/her] head on the wall."

Resident 3's "Behavior Tracker," dated 04/11/2024 to 06/25/2024, documented:
04/11/2024 - Behavior Start Time: 12 PM to 5 PM, Interventions Used: Talk until calm
04/28/2024 - Behavior Start Time: 7 AM to 7:30 AM, Interventions Used:
05/18/2024 - Behavior Start Time: 12:30 PM to 4 PM, Interventions Used: Talk until calm
05/21/2024 - Behavior Start Time: 4:20 PM to 5:30 PM, Interventions Used: Talk until calm; escort to room
05/26/2024 - Behavior Start Time: 1:30 PM to 3:30 PM, Interventions Used: Talk until calm; escort to room
06/05/2024 - Behavior Start Time: 2:17 PM to 3:25 PM, Interventions Used: Talk until calm
06/09/2024 - Behavior Start Time: 1 PM to 2 PM, Interventions Used: Talk until calm
06/25/2024 - Behavior Start Time: 4 PM to 5:20 PM, Interventions Used: Talk until calm

On 07/17/2024, at approximately 4:30 PM, Surveyor interviewed Program Director B. Program Director B stated management was working with Resident 3's Guardian C on the best way to track Resident 3's behaviors. Program Director B stated the current behavior tracking forms do not identify what could have caused a behavior nor does the form identify the behavior. Program Director B stated, "We really do not know at this point what caused [Resident 3] to become upset to start kicking the wall resulting in [his/her] foot fracture." Program Director B stated a new behavior tracking form was being developed.

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M 448	Continued From page 6 On 07/17/2024, Surveyor reviewed the providers written report submitted to the Department on 06/28/2024 which documented: "The resident was crying and screaming in the living room and staff offered [him/her] to go in [his/her] bedroom if [s/he'd] like. The resident went to [his/her] room and then the staff heard [him/her] kicking the wall and screaming. The staff then checked on [him/her] and staff noticed [his/her] left foot was red and swelling. It then started bruising and staff notified [his/her] supervisors and the resident went to the ER (emergency room). The resident ended up fracturing [his/her] foot and was admitted to [hospital] over the weekend. The hospital social worker is putting out referrals for a rehab stay for the resident." On 07/23/2024, at approximately 11:50 AM, Area Director A contacted Surveyor. Area Director A stated a new behavior charting form had been developed and s/he would follow up to ensure it was being utilized. Area Director A stated, "Sometimes having staff fill out forms can be difficult as there can be language barriers." Area Director A stated, "There is always the possibility that we do not know what caused the behavior or that staff did not consider the residents behavior above baseline."	M 448		
{M 462}	88.07(3)(c) MEDICATION ASSISTANCE If the licensee or service provider assists a resident with prescription medication, the licensee or service provider shall help the resident securely store the medication, take the correct dosage at the correct time and communicate effectively with his	{M 462}		

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{M 462}	Continued From page 7 or her physician. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure 1 of 1 resident received prescribed medications that were not expired. Resident 2 expired Azelastine and Fluticasone were stored with his/her current prescriptions. Findings include: On 07/17/2024, at approximately 3:30 PM, Surveyor reviewed Resident 2's medications in the med closet. Surveyor observed expired a bottle of Azelastine (eye drop) with a dispensed date of 05/23/2023 and a prescription expiration date of 06/14/2023; a bottle of Fluticasone (nasal spray) with a dispensed date of 08/11/2023 and a prescription expiration date of 11/14/2023; and a bottle of Fluticasone with a dispensed date of 01/13/2023 and a prescription expiration date of 11/14/2023 stored with Resident 2's current prescriptions. On 07/17/2024, Surveyor reviewed Resident 2's record. Resident 2 was admitted to the home, 07/01/1985, with diagnoses including developmental delay and allergies. Resident 2's July 2024 Medication Administration Record documented the following: Azelastine: Instill 1 drop into both eyes 2 times	{M 462}		

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{M 462}	Continued From page 8 daily. Scheduled at 8:00 AM and 8:00 PM. Start Date: 02/29/2024. Fluticasone: Instill 2 sprays into each nostril daily for allergic rhinitis. Scheduled at 8:00 AM. Start Date: 02/29/2024. On 07/17/2024, at approximately 4:30 PM, Surveyor interviewed Program Director B. Program Director B stated s/he had been informed by the pharmacy that medications can be administered even after their prescription expiration date. Program Director B stated s/he did not know the eye drops and nasal sprays expiration time once opened. Program Director B could not state if the expired medications had not been given since they were stored with the current prescribed medications. "Eye drops only keep for four weeks once the bottle has been opened - do not use the drops if the bottle has been open for longer than this. This helps to prevent the risk of eye infections." (Source: Azelastine website, How to store azelastine eye drops, November 08, 2022, https://patient.info/medicine/azelastine-eye-drops-for-allergies-optilast (retrieval date - July 17, 2024).) On 07/23/2024, at approximately 11:50 AM, Area Director A contacted Surveyor. Area Director A stated s/he would be contacting the pharmacy about obtaining new labels for medications that have not expired, but the prescription had expired. Area Director A stated, "All the dates listed on a medication label can be confusing."	{M 462}		