STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0010415	A. BUILDING: _____ B. WING _____	R 12/05/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
KINDREDHEARTS OF ELKHORN	450 E GENEVA ST ELKHORN, WI 53121

(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 On 12/05/2024, the Bureau of Assisted Living, Southern Regional Office, conducted a verification visit at Kindredhearts of Elkhorn, a community-based residential facility (CBRF) located in Elkhorn, WI. As a result of the survey, 3 deficiencies were identified. Two deficiencies are repeat deficiencies. See Statement of Deficiency (SOD) FTUV13, dated 07/12/2024, and SOD FTUV12, dated 02/02/2024. Under statutory provisions of Wis. Stat. Chapter 50, a $200 revisit fee is being assessed. Census: 16	N 000		
N 196	83.14(2)(a) Licensee ensures facility complies with laws The licensee shall ensure the CBRF and its operation comply with all laws governing the CBRF. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that the CBRF and its operation complied with all laws governing it. There was no evidence that special orders included in the "Notice and Order" letter with the issuance of Statement of Deficiency (SOD) FTUV13 on 08/23/2024 were followed. Findings include:	N 196		

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

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N 196	Continued From page 1 On 12/05/2024, Surveyor reviewed Department files for the provider, which included the most recently issued SOD, SOD FTUV13, and its corresponding "Notice and Order" letter. The "Notice and Order" letter was dated 08/23/2024 and documented the following special orders: "Based on the results of the Department ' s investigation, and pursuant to Wis. Stat. § 50.03(5g)(b), EFFECTIVE UPON RECEIPT OF THIS NOTICE and ORDER, the Department of Health Services HEREBY ORDERS that Kindredhearts of Elkhorn: "1. Pursuant to Wis. Stat. § 50.03(5g)(b)6., within 7 days of receipt of this notice, the licensee shall provide each resident's legal representative and case manager (if any) with a copy of Statement of Deficiency FTUV13 and a copy of this Notice and Order letter. The licensee shall retain documentation, acceptable to the department, to verify compliance with Order #1. Acceptable documentation will be a signed, certified mail receipt or a verification letter or email from each legal representative and case manager. Required evidence will be made available to the department representatives upon request." At approximately 12:13 p.m., Surveyor interviewed Administrator O and Assistant Director P. Both reported that SOD FTUV13 was issued a couple of months before they began working with the provider and so they did not have previous awareness of any special orders that were issued by the Department. Administrator O reported that Caregiver H was previously in charge and would have been so around that time. Administrator O reported that s/he would check with Caregiver H, who was working that day, to see if s/he had followed	N 196		

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N 196	Continued From page 2 through with the special orders. A couple of minutes later, Administrator O returned to the interview and reported that Caregiver H reported that the special orders were not followed. At approximately 12:34 p.m., Consultant Q joined the interview with Administrator O and Assistant Director P. Consultant Q reported that another company had been helping out with the provider around the time SOD FTUV13 was issued and so it was possible that staff from that company had followed the special orders. Surveyor gave a deadline of 5:00 p.m. that day for any additional evidence to be submitted. At approximately 1:25 p.m., Administrator O e-mailed Surveyor and confirmed that there was no evidence that the special orders from the "Notice and Order" letter were followed.	N 196		
N 310	83.29(2) Admission agreement include services, charges The admission agreement shall be given in writing and explained orally in the language of the prospective resident or legal representative. Admission is contingent on a person or that person ' s legal representative signing and dating an admission agreement. The admission agreement shall include all of the following: (a) An accurate description of the basic services provided, the rate charged for those services and the method of payment; (b) Information about all additional services offered, but not included in the basic services. The CBRF shall provide a written statement of the fees charged for each of these services; (c) The method for notifying residents of a change in charges for services; (d) Terms for resident notification to the CBRF of voluntary	N 310		

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N 310	Continued From page 3	N 310		

discharge. This paragraph does not apply to a resident in the custody of a government correctional agency; (e) Terms for refunding charges for services paid in advance, entrance fees, or security deposits in the case of transfer, death or voluntary or involuntary discharge; (f) A statement that the amount of the security deposit may not exceed one month ' s fees for services, if security deposit is collected; (g) Terms for holding and charging for a resident ' s room during a resident ' s temporary absence. This paragraph does not apply to a resident in the custody of a government correctional agency; (h) Reasons and notice requirements for involuntary discharge or transfer, including transfers within the CBRF. This paragraph does not apply to a resident in the custody of a government correctional agency.

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure that the admission agreements for Residents 8, 9, 11, or 12 contained correct information regarding the facility, state's advocacy groups, resident rights, and refunds.

This is a repeat deficiency. See Statement of Deficiency (SOD) FTUV13, dated 07/12/2024, and SOD FTUV12, dated 02/02/2024.

Findings include:

On 12/05/2024, Surveyor reviewed Department records for the provider. The provider's records indicated that the current licensed facility was owned by Company L. An e-mail in the provider's record, dated 02/16/2024, documented a

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N 310	Continued From page 4	N 310		

notification of "a change in management of operations" for Kindredhearts of Elkhorn. The e-mail identified that Company M "will be the new management company" and that Company M has owned and operated several assisted living facilities in an adjacent state.

Examples 1-3 - Residents 8, 9, and 11

On 12/05/2024, Surveyor reviewed the signed admission agreements for Residents 8, 9, and 11. The admission agreements for all 3 documented on the first page: "Establishment Owner: [Company M]" and provided Company M's mailing address. Underneath that, the following was documented: "Community Full Address:..." The address listed was for a separately licensed community-based residential facility (CBRF) located in a different city of the state.

The first page of the agreement documented, "This agreement is between [Company M] and, (RESIDENT NAME) hereafter referred to as [Company M initials] Resident, and hereafter referred to as Responsible Party, who,...do hereby agree to be bound by the following terms, conditions and arrangements regarding the provision of Assistance Services to Family Member. [Company M] is licensed as a Shared Housing Establishment by the [adjacent state] Department of Public Health." The entire 12 page admission agreement documented terms in conjunction with Company M. There was no information about Company L or "Kindredhearts of Elkhorn" in any of the admission agreements.

Under the "Complaint Resolution Process" section of the admission agreements, the following advocacy information was documented: "The Resident may request assistance with

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N 310	Continued From page 5 complaint resolution from [adjacent state] Department on Aging Helpline or the Long Term Care Ombudsman. [Adjacent state] Department of Aging Senior Helpline #--- [phone number]. Long Term Care County Ombudsman #--- [specific ombudsman's name and phone number]." Upon Surveyor's further investigation, the name and phone number listed for the ombudsman were linked on a website for a company whose services were documented as being located in the same adjacent state as listed elsewhere in the agreement. There was no information regarding resident advocacy groups that served clients in Wisconsin, including the ombudsman program located in Wisconsin or Disability Rights Wisconsin, Inc. Under the "Resident Rights" section of the admission agreements, the following was documented: "According to Section [statute number] Resident Rights include..." The rights listed were not the resident rights as defined by Wis. Admin Code § DHS 83.32(3). Upon Surveyor's further investigation, the administrative code listed in the admission agreement was for administrative code of an adjacent state (the same state as referenced elsewhere in the agreement), which identified resident rights of assisted living residents in that state. Upon comparison of the that state's rights listed from the administrative code in the agreement and Wis. Admin Code § DHS 83.32(3), the following rights were not documented in the agreements: - Rights under Wis. Admin Code § DHS 83.32(3)(a) (Communications) - Information regarding the right to be free from misappropriation of property, as under Wis. Admin Code § DHS 83.32(3)(d) (Freedom from Mistreatment)	N 310		

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N 310	Continued From page 6 - Rights under Wis. Admin Code § DHS 83.32(3)(e) (Freedom from Seclusion) - Rights under Wis. Admin Code § DHS 83.32(3)(h) (Receive Medication) - Rights under Wis. Admin Code § DHS 83.32(3)(i) (Prompt and Adequate Treatment) - Rights under Wis. Admin Code § DHS 83.32(3)(L) (Least Restrictive Environment) - Rights under Wis. Admin Code § DHS 83.32(3)(m) (Recording, Filming, Photographing) - Rights under Wis. Admin Code § DHS 83.32(3)(n) (Safe Environment) One section of the admission agreements documented, "[Adjacent state] DEPARTMENT OF PUBLIC HEALTH [state agency initials] shall conduct an annual, unannounced on-site review of the establishment to determine compliance with the applicable licensure requirements and standards...During an on-site review, [adjacent state's public health department] may tour any area of the establishment, observe residents and staff,...[and] inspect the resident's clinical and administrative records with the resident's written consent..." A section titled "Refund PROCEDURE" documented that any refunds were to be issued to responsible parties "within 60-90 days following the removal of the [Company M initials] Resident from [Company M]." Surveyor observed that this information conflicted with Wis. Admin Code § DHS 83.29(3)(a), which directs that "The CBRF shall return all refunds due a resident under the terms of the admission agreement within 30 days after the date of discharge." According to Wis. Admin Code § DHS 83.29(4), "No statement of the admission agreement may be in conflict with any part of this chapter, unless the department has granted a waiver or variance of a provision of	N 310		

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N 310	Continued From page 7	N 310		

this chapter." Upon reviewing the Department's records for the provider again, Surveyor did not observe any waiver granted from the Department that allowed Company M to return funds in 60-90 days as opposed to 30 days after a resident's discharge.

At approximately 10:45 a.m., Surveyor interviewed Administrator O. Administrator O reported s/he was aware that the admission agreements had inconsistent information regarding the owner and facility, as well as incorrect information regarding relevant rights, advocacy groups, and refund terms. Administrator O confirmed that Company L continued to be the licensee for the CBRF and that Company M was the contracted management company. Administrator O reported that staff from Company M were aware of the admission agreement concerns and they had been working for a long time on creating a new admission agreement template to have residents or their legal representatives sign.

Example 4 - Resident 12

On 12/05/2024, Surveyor reviewed the signed admission agreements for Residents 12. The admission agreement documented on the first page: "Establishment Owner: [Company M]" and provided Company M's mailing address. Underneath that, the following was documented: "Community Name: [Company M] of Elkhorn WI." Surveyor observed that this was not the licensed name of the CBRF according to Department records.

The first page of the agreement documented, "This agreement is between [Company M] and, [Resident 12] hereafter referred to as [Company

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N 310	Continued From page 8 M initials] Resident, and hereafter referred to as Responsible Party, who,...do hereby agree to be bound by the following terms, conditions and arrangements regarding the provision of Assistance Services to Family Member. [Company M] is licensed as a Shared Housing Establishment by the [adjacent state] Department of Public Health." The entire 12 page admission agreement documented terms in conjunction with Company M. There was no information about Company L or "Kindredhearts of Elkhorn" in the admission agreement. The "Complaint Resolution Process" section of the admission agreements documented a contact number for the long term care ombudsman program located in Wisconsin but contained no information regarding Disability Rights Wisconsin, Inc. Surveyor did not observe any information regarding Disability Rights Wisconsin, Inc. documented throughout the admission agreement. Under the "Resident Rights" section of the admission agreements, the following was documented: "According to Section [statute number] Resident Rights include..." The rights listed were not the resident rights as defined by Wis. Admin Code § DHS 83.32(3). Upon Surveyor's further investigation, the administrative code listed in the admission agreement was for administrative code of an adjacent state (the same state as referenced elsewhere in the agreement), which identified resident rights of assisted living residents in that state. Upon comparison of the that state's rights listed from the administrative code in the agreement and Wis. Admin Code § DHS 83.32(3), the following rights were not documented in the agreements:	N 310		

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N 310	Continued From page 9 - Rights under Wis. Admin Code § DHS 83.32(3)(a) (Communications) - Information regarding the right to be free from misappropriation of property, as under Wis. Admin Code § DHS 83.32(3)(d) (Freedom from Mistreatment) - Rights under Wis. Admin Code § DHS 83.32(3)(e) (Freedom from Seclusion) - Rights under Wis. Admin Code § DHS 83.32(3)(h) (Receive Medication) - Rights under Wis. Admin Code § DHS 83.32(3)(i) (Prompt and Adequate Treatment) - Rights under Wis. Admin Code § DHS 83.32(3)(L) (Least Restrictive Environment) - Rights under Wis. Admin Code § DHS 83.32(3)(m) (Recording, Filming, Photographing) - Rights under Wis. Admin Code § DHS 83.32(3)(n) (Safe Environment) One section of the admission agreements documented, "[Adjacent state] DEPARTMENT OF PUBLIC HEALTH [state agency initials] shall conduct an annual, unannounced on-site review of the establishment to determine compliance with the applicable licensure requirements and standards...During an on-site review, [adjacent state's public health department] may tour any area of the establishment, observe residents and staff,...[and] inspect the resident's clinical and administrative records with the resident's written consent..." A section titled "Refund PROCEDURE" documented that any refunds were to be issued to responsible parties "within 60-90 days following the removal of the [Company M initials] Resident from [Company M]." Surveyor observed that this information conflicted with Wis. Admin Code § DHS 83.29(3)(a), which directs that "The CBRF shall return all refunds due a resident under the	N 310		

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N 310	Continued From page 10 terms of the admission agreement within 30 days after the date of discharge." According to Wis. Admin Code § DHS 83.29(4), "No statement of the admission agreement may be in conflict with any part of this chapter, unless the department has granted a waiver or variance of a provision of this chapter." Upon reviewing the Department's records for the provider again, Surveyor did not observe any waiver granted from the Department that allowed Company M to return funds in 60-90 days as opposed to 30 days after a resident's discharge. At approximately 10:45 a.m., Surveyor interviewed Administrator O. Administrator O reported s/he was aware that the admission agreements had inconsistent information regarding the owner and facility, as well as incorrect information regarding relevant rights, advocacy groups, and refund terms. Administrator O confirmed that Company L continued to be the licensee for the CBRF and that Company M was the contracted management company. Administrator O reported that staff from Company M were aware of the admission agreement concerns and they had been working for a long time on creating a new admission agreement template to have residents or their legal representatives sign.	N 310		
N 389	83.35(3)(d) Service plans updated annually or on changes Individual service plan review. Annually or when there is a change in a resident ' s needs, abilities or physical or mental condition, the individual service plan shall be reviewed and revised based on the assessment under sub. (1). All reviews of the individual service plan shall include input from	N 389		

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N 389	Continued From page 11	N 389		

the resident or legal representative, case manager, resident care staff, and other service providers as appropriate. The resident or resident ' s legal representative shall sign the individual service plan, acknowledging their involvement in, understanding of and agreement with the individual service plan.

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure that for 1 of 3 residents reviewed, the resident or their legal representative signed the individual service plan (ISP) acknowledging their involvement in, understanding of, and agreement with it.

There was no evidence that Resident 10's legal representative reviewed the ISP for Resident 10 since 08/19/2023 (over 1 year since the survey).

This is a repeat deficiency. See Statement of Deficiency (SOD) FTUV13, dated 07/12/2024.

Findings include:

On 12/05/2024, Surveyor reviewed Resident 10's record. Resident 10 was admitted to the provider on 07/20/2023. Resident 10 was documented as having an activated power of attorney (POA) for healthcare. Surveyor reviewed Resident 10's current ISP, provided by Administrator O. The ISP was dated 11/21/2024 as created by Administrator O, but there was no evidence of it having been reviewed by Resident 10's POA.

At approximately 11:40 a.m., Surveyor requested from Administrator O evidence of the last reviewed ISP for Resident 10. Administrator O

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N 389	Continued From page 12 reported s/he had just begun working with the provider but the last reviewed ISP s/he could find within Resident 10's record was dated 08/19/2023. Administrator O reported that it looked like from the provider's electronic system that Resident 10's ISP was supposed to have been reviewed in February 2024 but s/he could not find any evidence of this having been completed. Administrator O reported that s/he planned to send Resident 10's ISP to his/her POA that day for him/her to review. In reviewing the last reviewed ISP for Resident 10, Surveyor observed that it was signed and dated as reviewed by his/her POA on 08/19/2023.	N 389		