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N 000	Initial Comments On 11/26/2024 with additional information gathered through 12/03/2024, Surveyor conducted a complaint investigation and a self-report review at McCormick Assisted Living in Green Bay. As a result, 1 of 2 complaints was substantiated and 2 deficiencies were identified. The self-report reviewed no findings. Census: 42	N 000		
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 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 Individual Service Plans (ISPs) were updated to reflect the needs of Resident 1. Resident 1's ISP was not updated to reflect	N 389		

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

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N 389	Continued From page 1 his/her needs for transfer assistance from staff. This is a repeat deficiency. See Statement of Deficiency (SOD) 0YPS11, dated 04/28/2023. Findings include: On 06/28/2024, the Department received a complaint alleging concerns with falls. On 11/26/2024 at 10:45 AM, Surveyor interviewed Personal Care Assistant (PCA) C and PCA D who reported Resident 1 needs staff assistance with transfers and toileting. PCA C stated Resident 1 is "off balance with walking" and s/he "falls often." On 11/26/2024 at 11:30 AM, Surveyor observed Resident 1 in his/her room sitting in a recliner chair. Resident 1 had a walker with a tray on the top in front of him/her and another walker on the side of the recliner chair. Surveyor observed Resident 1 wearing a wrist pendant, another pendant hanging around his/her neck and several signs hanging on his/her walls stating, "Please call for staff assist prior to getting up." Surveyor observed two signs hanging on the wall in Resident 1's room and another one on the wall in his/her bathroom near the toilet. Surveyor interviewed Resident 1 who stated s/he needs staff assistance with showering, getting on and off the toilet and transferring. Surveyor asked about the signs on the wall and s/he stated they were put there to help remind him/her to call for assistance prior to getting up from his/her bed, chair and toilet. Resident 1 stated "I've had some crazy falls. It feels like something grabs me and I lose my balance, and fall." On 11/26/2024 at approximately 1:15 PM, Surveyor reviewed Resident 1's record and noted	N 389		

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the following:
Resident 1 was admitted to the facility on 11/21/2023 with diagnoses including but not limited to, chronic obstructive pulmonary disease, hypertension, heart failure, hypokalemia (low potassium), iron deficiency, mild neurocognitive disorder due to physiological condition without behavioral disturbance, weakness, reduced mobility, anxiety, depression, hemiplegia and hemiparesis following cerebral infarction affecting right dominant side. Resident 1 has a history of falls and requires staff assistance with bathing, medication administration, dressing, mobility and reminders, cues and verbal prompts to utilize his/her walker.

Resident 1's ISP that was current as of 11/24/2024 read in part:

*Transferring: Goal - "I will be able to transfer safely with assistance." Interventions - "...I am independent with transferring from bed/chair to a standing position and ambulating around my home with the use of my walker."

Surveyor note: The ISP was not updated based on assessment to reflect Resident 1's need for transfer assistance.

During an interview on 11/26/2024 at approximately 1:40 PM, Assistant ADM E, Executive
Director (ED) F, Household Coordinator B and Director of Nursing (DON) G verified Resident 1 uses a walker to ambulate and required staff assistance with transfers.

On 12/03/2024 at 12:00 PM, Surveyor interviewed ADM A, Assistant ADM E and ED F who acknowledged the ISP was not updated to

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N 389	Continued From page 3 reflect Resident 1's need for transfer assistance. Cross Reference: Y3244 CH 50.09(1)(L) Care	N 389		
Y3244	50.09(1)(L) Care (1) RESIDENTS' RIGHTS. Every resident in a nursing home or community based residential facility shall, except as provided in sub. (5), have the right to (l) Receive adequate and appropriate care within the capacity of the facility. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure adequate and appropriate care was provided within the capacity of the facility for Resident 1. This is a repeat deficiency. See Statement of Deficiency (SOD) DS6L11, dated 05/25/2021. Findings Include:	Y3244		

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Y3244	Continued From page 4 On 06/28/2024, the Department received a complaint alleging long wait times when requesting assistance with the pendant/call light system. Review of Resident 1's Individual Support Plan (ISP) updated on 09/17/2024, identified the following: *MOBILITY: Requires assistance with being transported in a wheelchair up and down different floors via the elevator. *BATHROOM USAGE: Hands-on assistance with transferring to and from the toilet, undressing/dressing and peri-care. *ASSISTIVE DEVICES: Requires reminders, cues and verbal prompting to utilize my walker and a wheelchair for long distances. *FALLS: Resident 1 is at risk for falls due to mobility therefore "I will be encouraged to call for assistance when needed." *EXPRESSIVE ACTIONS: Requires staff assistance in managing expressive actions ... "Staff can kindly tell me: That they want to promote my independence, so after I have completed what I am able to independently, I will push my button to alert staff that I need help. That they need to complete other tasks, but I can push my button if I need immediate help ..." On 11/26/2024 at 11:30 AM, Surveyor interviewed Resident 1 who reported staff do not respond timely when s/he needs help. Resident 1 stated, "I was left on the toilet for 2 hours and 15 minutes this morning." S/he reported Personal Care Assistant (PCA) H assisted him/her initially and	Y3244		

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then "[s/he] was like a little bird and left me sitting on the toilet." Resident 1 stated PCA H did not say anything to him/her when s/he left. Surveyor observed Resident 1 wearing a wrist pendant and a neck pendant. When Surveyor asked about the pendant around his/her neck, s/he stated it was new and a "real gem." Resident 1 reported a family member got him/her the pendant due to the falls s/he has had. Surveyor also observed approximately 2 pull cords in his/her room, one in the bathroom near the toilet and the other near the door in the bedroom/living room area.

At 12:06 PM, Surveyor interviewed Friend I who came to visit Resident 1. Friend I reported s/he visits frequently and recalled a time s/he came to visit Resident 1 and when Resident 1 pressed for bathroom assistance, no one came for an hour and a half. Friend I stated since no one came and Resident 1 needed to urgently use the bathroom, s/he assisted Resident 1 his/herself as no staff came. Friend I stated when s/he questioned why it took staff so long to respond, s/he was told it was shift change. Friend I also stated there have been times when the pendant was not working and when s/he brought it to the staff's attention, s/he was told it was a system wide failure. Friend I reported s/he got Resident 1 bells s/he could shake if s/he needed for assistance.

At approximately 12:40 PM, Surveyor interviewed PCA C. Surveyor asked for clarification on how the pull cords and wrist pendant operate. PCA C reported once the cord is pulled or the wrist pendant is pressed it sends a message to their cell phones through an app. Surveyor asked Resident 1 if his/her wrist pendant was working and s/he held up his/her wrist and told Surveyor to press the button. Surveyor tested Resident 1's wrist pendant by pressing the button and felt as it

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vibrated. PCA C confirmed the wrist pendant was working properly as s/he received an alert on his/her cell phone. Surveyor observed as PCA C attempted to pull the cord in Resident 1's bathroom near the toilet; however, it did not light up. PCA C reported if the pull cord was working the light would have lit up. S/he confirmed the pull cord in Resident 1's bathroom was not working and would let management know. PCA C also checked the pull cord in Resident 1's bedroom and confirmed it was working properly. Surveyor also asked PCA C if s/he was aware of the incident that occurred this morning when Resident 1 was left on the toilet for over 2 hours by PCA H. Resident 1 explained to PCA C what happened with PCA H. PCA C reported, "I didn't know any of this happened and I will let management know. [PCA H] is fairly new and doesn't know [Resident 1's] routine."

During an interview on 11/26/2024 at approximately 1:40 PM with Assistant ADM E, Executive Director (ED) F, Household Coordinator B and Director of Nursing (DON) G, Surveyor requested call light data. ED F reported they have a new call light system within the last 2 weeks and would need to reach out to the company to get the report as they were not able to access it currently. Surveyor also explained Resident 1's pull cord in his/her bathroom did not appear to be working properly as the light did not activate when the cord is pulled and PCA C was able to verify this. They stated they were not aware, but would have it fixed. In addition, Surveyor asked if they were aware of an incident that occurred this morning when Resident 1 was left on the toilet for over 2 hours by PCA H. They confirmed they were not aware and would look into the incident, and update Surveyor. Assistant ADM E reported Resident 1 is on 2-hour checks,

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but they are done more frequently due to Resident 1 pressing his/her button more within the timeframe.

On 11/27/2024 at 5:08 PM, Surveyor received an email from ED F with Resident 1's call light data from 11/13/2024 to 11/27/2024.

On 12/02/2024 at 8:30 AM, Surveyor reviewed a sample of call light data from 11/13/2024 to 11/27/2024. The call light data demonstrated several response times that exceeded 20 minutes. The data was as follows:

11/27/2024 at 11:50 AM: 24 minutes and 10 seconds
11/26/2024 at 9:09 AM: 1 hour 25 minutes 32 seconds
11/26/2024 at 7:54 AM: 50 minutes and 35 seconds
11/25/2024 at 9:29 PM: 1 hour 6 minutes and 30 seconds
11/25/2024 at 6:55 PM: 25 minutes and 22 seconds
11/25/2024 at 3:27 PM: 30 minutes and 29 seconds
11/25/2024 at 12:12 AM: 1 hour 27 minutes and 54 seconds
11/24/2024 at 9:15 AM: 37 minutes and 48 seconds
11/23/2024 at 8:16 PM: 34 minutes and 36 seconds
11/22/2024 at 11:14 AM: 44 minutes and 51 seconds
11/21/2024 at 7:32 AM: 1 hour 3 minutes and 4 seconds
11/21/2024 at 10:54 PM: 33 minutes and 58 seconds
11/21/2024 at 9:14 PM: 1 hour 25 minutes and 19 seconds

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Y3244	Continued From page 8 11/21/2024 at 3:11 PM: 23 minutes and 19 seconds 11/21/2024 at 1:45 PM: 1 hour 2 minutes and 35 seconds 11/21/2024 at 12:51 PM: 50 minutes and 22 seconds 11/20/2024 at 11:35 PM: 30 minutes and 11 seconds 11/20/2024 at 10:06 AM: 52 minutes and 5 seconds 11/20/2024 at 8:46 AM: 33 minutes and 21 seconds 11/20/2024 at 7:39 AM: 23 minutes and 21 seconds 11/19/2024 at 10:56 AM: 48 minutes and 15 seconds 11/18/2024 at 9:17 AM: 50 minutes and 53 seconds 11/18/2024 at 7:38 AM: 34 minutes and 35 seconds 11/17/2024 at 9:36 PM: 57 minutes 11/16/2024 at 8:45 PM: 3 hours 15 minutes and 32 seconds 11/16/2024 at 8:21 AM: 1 hour 31 minutes and 31 seconds 11/16/2024 at 12:44 AM: 54 minutes and 13 seconds 11/15/2024 at 10:55 PM: 1 hour 17 minutes and 54 seconds 11/15/2024 at 11:13 AM: 23 minutes and 35 seconds 11/15/2024 at 9:13 AM: 43 minutes and 46 seconds 11/14/2024 at 10:25 AM: 46 minutes and 51 seconds 11/13/2024 at 9:53 PM: 35 minutes and 2 seconds On 12/02/2024 at 4:30 PM, Surveyor sent a follow up email to ADM A, Assistant ADM E and ED F	Y3244		

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regarding the numerous long wait times Surveyor observed on the call light data report. Surveyor also requested information on the incident that occurred on 11/26/2024.

On 12/02/2024 at 6:07 PM, Surveyor received an email with attachments from ADM A stating, "We have been working with our staff to get comfortable with using an app based system. There were many call response times on the call log that are not up to our standards or expectations. In regards to the incident on 11/26/24, I have attached my discussions with [PCA H] and [Resident 1] from 11/26/24. I provided [PCA H] with education regarding checking the app for call lights going off even if the phone does not ring. I completed call light education with our team at shift change this afternoon, and attached the signed education. I am continuing to educate staff about the importance of answering call lights timely. Our expectation is that call lights are answered within 15 minutes. We have not been completing regular call light audits; however, they will be easier to monitor once we get the reports function up and running on our new call system. We plan to complete audits going forward and review the findings at our QAPI [sic] meetings."

On 12/03/2024 at 9:45 AM, Surveyor reviewed the attachments from ADM A. Surveyor reviewed a document titled "Call Light Education 12/2/2024" with various staff signatures. The document read in part: "It is everyone's responsibility to ensure that we are answering resident call lights in a timely manner. Although we may understand resident routines, it is important to check on resident call lights quick and not assume that we know what the resident needs. There has been trends of resident call

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lights taking an excessive amount of time to be answered (some in excess of 1 hour). If you are in with a resident, and a call pendant is going off, please communicate with your other team members to ensure that the call light is answered quickly. Responding to calls lights should be our number 1 priority to ensure residents are safe and their needs are met..."

Surveyor also reviewed a document with statements from PCA H and Resident 1 from the incident that occurred on 11/26/2024. These statements were obtained by ADM A and Assistant ADM E on 11/26/2024. PCA H's statement to ADM A and Assistant ADM E read in part: "[PCA H] explained that [s/he] was helping another resident on 3rd floor get ready for the day around 9:00am when [s/he] heard [PCA C] over the walkie ask if [PCA H] was available to help in room [Resident 1's room number]. [PCA H] stated that [s/he] would be down there shortly [s/he] was just wrapping up with another resident. [PCA H] arrived in [Resident 1's] room and [PCA C] was in the room folding clothes in the dresser and helping [Resident 1] pick out clothes to wear for the day. [Resident 1] was sitting on the edge of the bed, and [PCA H] helped [him/her] take [his/her] pajama pants off while sitting on the bed. [Resident 1] and [PCA H] noticed that there were not any wash clothes in the room, so [PCA H] left to get wash clothes. When [PCA H] returned to the room, [Resident 1] was walking around the room looking at clothes. [Resident 1] told [PCA H] to put the washcloths in the bathroom. [PCA H] thought this was interesting as they are usually by the sink in the room, and [PCA H] questioned [Resident 1] if [s/he] meant by the sink in the room and not the bathroom. [PCA H] stated that [Resident 1] then told [PCA H] that [s/he] doesn't know what [s/he] is doing. [PCA H] put the

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washcloths in the bathroom and told [Resident 1] that [s/he] wasn't going to argue with [him/her]. [Resident 1] made [his/her] way into the bathroom, and [PCA H] said that [s/he] would come back if/when [Resident 1] needed help. [PCA H] left the room and heard a walkie page about an hour later while [s/he] was helping a resident in St. Francis to the bathroom that [Resident 1] needed assistance. [PCA H] finished up with the resident and went to help [Resident 1]. When [PCA H] entered [Resident 1's] room, [Resident 1] said that [s/he] told someone else that [s/he] wanted [PCA H] to return and help [him/her]. [Resident 1] then told [PCA H] to leave the room. [PCA H] did not know if [Resident 1's] call light was going off at this time or not as [s/he] did not check the app while with another resident."

On 12/03/2024 at 12:00 PM, Surveyor interviewed ADM A, Assistant ADM E and ED F who acknowledged Surveyor's findings. ADM A stated the call light data was concerning and unacceptable. ADM A reported s/he is continuing to educate all staff on the call light response times.

Cross Reference:
N0389 DHS 83.35(3)(d) Service Plans Updated Annually Or On Changes