STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0012494	A. BUILDING: _____ B. WING _____	C 04/08/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HAVENWOOD LLC	614 E OAK ST GLENWOOD CITY, WI 54013

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U 000	INITIAL COMMENTS On 04/01/2024, Surveyor conducted a complaint investigation and abbreviated licensure survey at Havenwood LLC. Data was collected through 04/08/2024. The complaint was unsubstantiated. Five violations were identified. Census: 13 tenants and 13 occupied apartments	U 000		
U 129	89.23(4)(a)2. SERVICES PROVIDER QUALIFICATIONS. Service Providers. Nursing services and supervision of delegated nursing services shall be provided consistent with the standards contained in the Wisconsin nurse practice act. Medication administration and medication management shall be performed by or, as a delegated task, under the supervision of a nurse or pharmacist. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure Caregiver A was delegated to administer medications. Findings include: The facility, a residential care apartment complex (RCAC), was located under the same roof as a community based residential facility (CBRF).	U 129		

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

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U 129	Continued From page 1 On 04/01/2024 at 11:04 AM, Surveyor interviewed House Manager (HM) B. HM B stated s/he was responsible for scheduling staff. S/he stated Caregiver A was the only staff member that was not cross trained to work in the CBRF and the RCAC. HM B stated Caregiver A worked in the RCAC because s/he had not completed his/her CBRF training. Surveyor reviewed March 2024 medication administration records (MARs). According to these records, Caregiver A administered medications to tenants. At 2:35 PM, Surveyor interviewed Registered Nurse (RN) C about the provider's nurse delegation process. RN C stated staff received delegation during their CBRF medication class. Surveyor reviewed Caregiver A's (hired 03/06/2023) record and did not find evidence of medication training or nurse delegation. On 04/02/2024 at 1:52 PM, Surveyor sent HM B, RN C, and Administrator D an email indicating Caregiver A's record did not include medication training or delegation. HM B replied at 6:16 PM with Caregiver A's training log indicating s/he completed 30 minutes of medication training with Caregiver E on 03/06/2023. The attachment did not include evidence of delegation. On 04/03/2024 at 8:04 PM, Surveyor received an email from HM B that read, "Upon hire these trainings will be scheduled and will be done by [RN C] or myself House Manager. We also utilize Medline University for educational purposes."	U 129		

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U 135	Continued From page 2	U 135		
U 135	89.23(4)(d)2.a. SERVICES PROVIDER QUALIFICATIONS. Staff training. Staff providing residential care apartment complex services to tenants shall have documented training or experience in the following areas: a. Physical, functional and psychological characteristics associated with aging or likely to be present in the tenant population and their implications for service needs. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 caregivers (Caregiver A and Caregiver F) sampled received training on the physical, functional and psychological characteristics associated with aging and their implications for service needs. Findings include: On 04/01/2024, Surveyor reviewed Caregiver A's record. Caregiver A was hired on 03/06/2023. His/her record did not include evidence of training on the characteristics associated with aging. On 04/02/2024 at 1:52 PM, Surveyor sent House Manager (HM) B, Registered Nurse (RN) C, and Administrator D an email indicating Caregiver A's record did not include evidence s/he completed training on the characteristics associated with aging. Surveyor requested evidence of Caregiver A's training be sent via email by the end of the	U 135		

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U 135	Continued From page 3 business day. On 04/03/2024 at 8:04 PM, Surveyor received an email from HM B that read, "Upon hire these trainings will be scheduled and will be done by [RN C] or myself House Manager. We also utilize Medline University for educational purposes." On 04/08/2024, Surveyor sent HM B, RN C, and Administrator D an email requesting to review Caregiver F's training on the characteristics associated with aging. Surveyor received an email from RN C at 2:43 PM that read, "I have attached what I have here." The attachment did not include evidence that Caregiver F (hired 10/02/2023) completed this training requirement. As of 04/08/2024 at 4:30 PM, Surveyor did not receive evidence Caregiver A or Caregiver F completed training on the physical, functional and psychological characteristics associated with aging and their implications for service needs.	U 135		
U 136	89.23(4)(d)2.b. SERVICES PROVIDER QUALIFICATIONS. Staff training. Staff providing residential care apartment complex services to tenants shall have documented training or experience in the following areas: b. The purpose and philosophy of assisted living, including respect for tenant privacy, autonomy and independence.	U 136		

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U 136	Continued From page 4 This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 caregivers (Caregiver A and Caregiver F) sampled received training on the purpose and philosophy of assisted living. Findings include: On 04/01/2024, Surveyor reviewed Caregiver A's record. Caregiver A was hired on 03/06/2023. His/her record did not include evidence of training on the purpose and philosophy of assisted living. On 04/02/2024 at 1:52 PM, Surveyor sent House Manager (HM) B, Registered Nurse (RN) C, and Administrator D an email indicating Caregiver A's record did not include evidence s/he completed training on the purpose and philosophy of assisted living. Surveyor requested evidence of Caregiver A's training be sent via email by the end of business day. On 04/03/2024 at 8:04 PM, Surveyor received an email from HM B that read, "Upon hire these trainings will be scheduled and will be done by [RN C] or myself House Manager. We also utilize Medline University for educational purposes." On 04/08/2024, Surveyor sent HM B, RN C, and Administrator D an email requesting to review Caregiver F's training on the purpose and philosophy of assisted living. Surveyor received an email from RN C at 2:43 PM that read, "I have attached what I have here." The attachment did not include evidence that Caregiver F (hired 10/02/2023) completed this training requirement. As of 04/08/2024 at 4:30 PM, Surveyor did not	U 136		

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U 136	Continued From page 5 receive evidence Caregiver A or Caregiver F completed training on the purpose and philosophy of assisted living.	U 136		
U 171	89.26(4) ANNUAL REVIEW A tenant's capabilities, needs and preferences identified in the comprehensive assessment shall be reviewed at least annually to determine whether there have been changes that would nescessitate a change in the service or risk agreement. The review may be initiated by the facility, the county department designated under sub. (3)(c)2., or at the request of or on the behalf of the tenant. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure Tenant 1 was assessed prior to a change in Tenant 1's service agreement. Findings include: On 04/01/2024 at 11:30 AM, Surveyor interviewed Tenant 1. Tenant 1 stated staff administered and managed his/her medication, and s/he was not satisfied with these services. Tenant 1 stated s/he believed s/he was given narcotic pain medication incorrectly on 12/22/2023, resulting in hospitalization. At 12:45 PM, Surveyor interviewed House Manager (HM) B. HM B confirmed Tenant 1 was hospitalized in December 2023 due to an overdose of pain medication. HM B stated Registered Nurse (RN) C conducted an	U 171		

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U 171	Continued From page 6	U 171		

investigation into the alleged medication error.

Surveyor reviewed Tenant 1's record. Tenant 1 was admitted to the facility on 08/01/2023. His/her record included a preadmission assessment, dated 06/23/2023. The assessment read, "Needs doses prepared in advance (and may include written instruction regarding time of administration) but can then manage own medications."

Tenant 1's undated service agreement read, "MEDICATIONS: All medications are given by staff. Tenant has a history of unsafe independent medication management as evidenced by previous documented overdoses at home... Has a history of requesting and taking pain medications before time allowed... Requires daily supervision of medication."

At 2:35 PM, Surveyor interviewed RN C. RN C stated Tenant 1 was hospitalized on 12/22/2023 due to an overdose. RN C stated s/he conducted an investigation and did not find evidence that staff administered Tenant 1 his/her medication incorrectly. RN C questioned if Tenant 1 got medication elsewhere. RN C stated this was not the first time Tenant 1 overdosed on pain medication which was why Tenant 1 was not able to manage his/her medication anymore. Surveyor asked if the provider assessed Tenant 1 since admission. RN C reviewed the assessment, dated 06/23/2023, and stated, "I believe this is the only one we've done... We need to get another assessment done." RN C stated the provider did not know about Tenant 1's history of overdose when they conducted the assessment on 06/23/2023.

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U 211	Continued From page 7	U 211		
U 211	89.28(6) RISK AGREEMENT UPDATING. The risk agreement shall be updated when the tenant's condition or service needs change in a way that may affect risk, as indicated by a review and update of the comprehensive assessment, by a change in the service agreement or at the request of the tenant or facility. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure Tenant 1's risk agreement was updated when Tenant 1's condition or service needs changed in a way that affected risk. Findings include: On 04/01/2024 at 11:30 AM, Surveyor interviewed Tenant 1. Tenant 1 stated staff administered and managed his/her medication. Tenant 1 stated s/he believed s/he was given narcotic pain medication incorrectly on 12/22/2023, resulting in hospitalization. Surveyor reviewed Tenant 1's record. Tenant 1 was admitted to the facility on 08/01/2023. Tenant 1's undated service agreement read, "MEDICATIONS: All medications are given by staff. Tenant has a history of unsafe independent medication management as evidenced by previous documented overdoses at home... Has a history of requesting and taking pain medications before time allowed... Requires daily supervision of medication." Tenant 1's risk agreement, dated 08/01/2023, did not reference Tenant 1's risk associated with	U 211		

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U 211	Continued From page 8 medication. At 2:35 PM, Surveyor interviewed RN C. RN C stated Tenant 1 was hospitalized on 12/22/2023 due to an overdose. RN C stated s/he conducted an investigation and did not find evidence that staff administered Tenant 1 his/her medication incorrectly. RN C questioned if Tenant 1 got medication elsewhere. RN C stated this was not the first time Tenant 1 overdosed on pain medication which was why Tenant 1 was not able to manage his/her medication anymore. RN C stated the provider did not know about Tenant 1's history of overdose when they conducted Tenant 1's preadmission assessment. Surveyor asked if Tenant 1's risk agreement was updated after they became aware of this situation or after Tenant 1 was hospitalized in December. RN C stated it was not.	U 211		