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	0013109	A. BUILDING: _____ B. WING _____	C 03/21/2025

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GEORGIAS PARADISE ASSISTED LIVING LLC	842 N 25TH ST MILWAUKEE, WI 53233

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M 000	INITIAL COMMENTS On 03/21/2025, Surveyor concluded three complaint investigations at Georgia's Paradise Assisted Living. Three deficiencies were identified. One of 3 deficiencies identified were repeat deficiencies. Two complaints were unsubstantiated. One complaint was substantiated. Census: 4	M 000		
M 134	88.03(5)(e)1 SIGNIFICANT CHANGE TO THE RESIDENT Within 24 hours, a significant change in resident status, such as but not limited to an accident requiring hospitalization, missing from the home or a reportable death. A death shall be reported if there is reasonable cause to believe the death was related to use of a physical restraint or psychotropic medications, was a suicide or was accidental. This Rule is not met as evidenced by: Based on record review and interview, the provider did not report to the Department, within 24 hours, when 1 of 1 resident (Resident 2) eloped and was reported missing. Resident 2 eloped from the facility on 10/19/2024, 12/31/2024, 02/04/2025, and 02/20/2025 and the provider did not report to the department.	M 134		

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

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M 134	Continued From page 1 This is a repeat deficiency. See Statement of Deficiency (SOD) 76S714, dated 01/16/2025. Findings include: On 03/06/2025, the department received a complaint which indicated resident was eloping from the facility in the middle of the night. Complaint indicated one instance where provider was unaware resident had gone to hospital in the middle of the night. Concerns expressed with lack of timely response to care and medical needs of residents, and lack of communication with the guardian and case managers. On 03/13/2025, Surveyor reviewed Resident 2's record. Resident 2 was admitted to the provider's home on 11/04/2019, with diagnoses including schizoaffective disorder, bipolar disorder, anxiety disorder, dementia with behavioral disturbances, and chronic kidney disease. Resident 2 had a legal guardian. Resident 2 was enrolled in services with a managed care organization (MCO) and was assigned case managers. Record Review On 03/13/2025, Surveyor reviewed Resident 2's facility record, guardianship documentation and managed care organization (MCO) file for the time-period of 05/01/2024 to 03/12/2025 and identified the following: Resident 2's record included a resident health assessment dated 08/20/2024. Resident 2's assessment identified Resident 2 was independent with: ambulation, bathing, dressing, eating, grooming, transferring, and toileting. Resident 2's assessment identified Resident 2	M 134		

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needed assistance to perform other self-care tasks such as preparing meals, shopping and or making phone calls. Resident 2's assessment identified Resident 2 needed daily oversight in observing his/her well-being/whereabouts and reminding him/her of important tasks.

Surveyor observed a series of conditions and requirements with yes and no checkmarks to identify Resident 2's needs. Required 24-hour nursing care and required 24-hour psychiatric supervision were both was checked, "yes." Licensee A was named examiner.

MCO documentation dated 05/28/2024 stated, "[Resident 2] exhibits behaviors requiring intervention, member requires 24/7 line-of-sight supervision and would require cues and guidance evacuating his/her adult family home quickly and safely in the event of an emergency."

MCO documentation dated 05/28/2024 read, "Guardianship ... [Resident 2] has a guardian due to verified cognitive impairments."

Elopement Incidents

MCO critical incident report, dated 10/19/2024, stated Resident 2 eloped from facility. Care Manager (CM) D documented, "[Resident 2] eloped from his/her adult family home (AFH) on 10/19/2024 and ended up in the emergency room (ER)."

Resident 2's facility observation notes, dated 12/31/2024, read, "[Resident 2] is still at hospital."

The MCO critical incident report, dated 02/20/2025, stated Resident 2 eloped from providers facility. CM D documented, "[Resident

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2] showed up to ER overnight with complaints of eye pain and not being able to sleep. [Resident 2] was discharged back to the AFH without AFH staff being aware. The ER records show the member was there for about an hour."

CM D documented a follow up visit with Licensee A, who reported Resident 2 did not go to the ER on 02/20/2025, after Licensee A followed up with his/her staff. CM D provided Licensee A with the AVS from the ER visit on 02/20/2025. Licensee A indicated s/he was not aware of how the Resident 2 ended up in the ER and returned without staff knowing.

Interviews

On 03/13/2025 between 12:50 p.m. and 1:45 p.m., Surveyor interviewed Resident 2's guardian. Guardian E reported the following documented incidents:

On 12/31/2024, Guardian E received a telephone call from St. Francis hospital at 1:00 a.m. Resident 2 had gone to St. Luke's hospital first but s/he had waited too long, so s/he travelled to St. Francis hospital with abdominal pain. Caller told Guardian E that they would check Resident 2 over and send him/her back to provider.

On 02/04/2025, Guardian E stated the on-call guardian received a telephone call from Mt. Sinai hospital requesting permission to treat Resident 2.

On 02/20/2025, Guardian E stated the on-call guardian received a telephone call from Mt. Saini hospital at 3:00 a.m., requesting permission to treat Resident 2. Guardian E stated the note in the file stated, "Resident 2 lost his/her glasses

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M 134	Continued From page 4 and his/her eyes hurt." On 03/20/2025 at 10: 40 a.m., Surveyor interviewed Nurse Case Manager (RN CM) G, who stated, "[Resident 2] leaves the facility and the staff calls the police. The staff cannot leave other residents." On 03/20/2025 at 10: 50 a.m., Surveyor interviewed CM D, who stated, "The staff would try to engage and redirect [Resident 2]. But not all staff would do that." CM D reported eventually, the caregivers just started calling the police. On 03/20/2025 at 10: 50 a.m., Surveyor interviewed MCO Lead Supervisor (LS) H, who stated, "I'm looking through his/her updated behavior support plan (BSP) as we talk. I do not see anything specific on how to assist [Resident 2] with elopements. I see interventions that suggest talking with [Resident 2], providing him/her space, providing him/her with a cigarette or a glass of milk. I do not see calling the police as an intervention on the behavioral support plan." On 03/14/2025, Surveyor reviewed the provider's self-report history. The Department did not receive a self-report for Resident 2 eloping from the home on 10/19/2024, 12/31/2024, 02/04/2025, and 02/20/2025.	M 134		
M 410	88.06(3)(d) INDIVIDUAL SERVICE PLAN The individual service plan shall contain at least the following:	M 410		

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M 410	Continued From page 5 This Rule is not met as evidenced by: Based on record review and staff interview, the provider did not ensure 1 of 1 Individual Service Plans (Resident 2) included all required information. The provider's ISP form did not identify services provided by the licensee, identification of the level of supervision Resident 2 required in the home and community, who would monitor the plan, and a statement of agreement by all persons involved in developing the plan was not present. Findings include: On 03/13/2025, Surveyor reviewed resident records. Resident 2 was admitted to the provider's home on 11/04/2019, with diagnoses including schizoaffective disorder, bipolar disorder, anxiety disorder, dementia with behavioral disturbances, and chronic kidney disease. Resident 2's medical record included a resident health assessment dated 08/20/2023. Resident 2's assessment identified Resident 2 was independent with: ambulation, bathing, dressing, eating, grooming, transferring, and toileting. Resident 2's assessment identified Resident 2 needed assistance to perform other self-care tasks such as preparing meals, shopping and or making phone calls. Resident 2's assessment identified Resident 2 needed daily oversight in observing his/her well-being/whereabouts and reminding him/her of important tasks. Surveyor observed a series of conditions and	M 410		

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M 410	Continued From page 6	M 410		

requirements with yes and no checkmarks to identify Resident 2's needs. Required 24-hour nursing care and required 24-hour psychiatric supervision were both checked, "yes." Licensee A was named examiner.

Resident 2's medical record included a resident health assessment dated 08/20/2024. Resident 2's assessment identified Resident 2 was independent with: ambulation, bathing, dressing, eating, grooming, transferring, and toileting. Resident 2's assessment identified Resident 2 needed assistance to perform other self-care tasks such as preparing meals, shopping and or making phone calls. Resident 2's assessment identified Resident 2 needed daily oversight in observing his/her well-being/whereabouts and reminding him/her of important tasks.

Surveyor observed a series of conditions and requirements with yes and no checkmarks to identify Resident 2's needs. Required 24-hour nursing care and required 24-hour psychiatric supervision were both was checked, "yes." Licensee A was named examiner.

Resident 2's medical record included an ISP dated 08/01/2024. Resident 2's ISP identified Resident 2 was independent with bathing. Resident 2 was, "independent to go to restroom however, staff makes every effort to make sure s/he's using it." Staff prepares three meals and three snacks daily. Resident 2 was ambulatory. Resident 2's medication, "has been prescribed by ALPS PHARMACY." Resident 2 was independent to choose his/her own activities and had no history of substance abuse, only tobacco use. Resident 2 had pain management for chronic kidney disease.

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M 410	Continued From page 7 The ISP did not include descriptions of services provided to meet assessed needs. The ISP identified Resident 2 was, "independent to go to restroom however, staff makes every effort to make sure s/he's using it" and had pain management for chronic kidney disease. There was no description of the services provided by the provider to meet Resident 2's assessed needs, no identification of the level of supervision Resident 2 required in the home and community, no identification of who would monitor the plan, no statement of agreement with the plan by all persons involved in developing the plan. The ISP signature section contained a typed signature by Former Manager B on 02/01/2024. On 03/13/2025 at 1:00 PM, Surveyor interviewed Manager C regarding the ISP and Resident 2's care needs; Manager C stated Resident 2 required 24-hour supervision. Manager C stated, "Especially since there have been recent incidents." Manager C confirmed the ISPs in Resident 2's record was utilized by caregivers. On 03/13/2025 at 4:30 p.m., Surveyor informed Licensee A of the above information. Licensee A stated s/he unaware the current ISP form did not include the required information related to the services provided by the provider, no identification of the level of supervision, who would monitor the plan, and the need to have persons involved in developing the plan sign the plan. Licensee A stated due to recent incidents, s/he would be revising Resident 2's ISP to include risk for elopement. On 03/21/2025 at 8:30 a.m., Surveyor interviewed	M 410		

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M 410	Continued From page 8 Licensee A, who confirmed Resident 2's ISP was not comprehensive and that s/he updated Resident 2's ISP in March, after Surveyor visit. The provider did not ensure the ISP contained all required information.	M 410		
M 450	88.07(2)(b)6 NOTIFICATION OF CHANGES Notifying the placing agency, if any, the guardian, if any, of any significant changes in the resident's medical condition, including any life-threatening, disabling or serious illness, any illness lasting more than 3 days, an injury sustained by the resident, medical treatment needed by the resident or the resident's absence from the home for more than 24 hours. This Rule is not met as evidenced by: Based on record review and interview, the provider did not notify the guardian of resident (Resident 2) who required medical treatment in a timely manner. The guardian learned of Resident 2's emergency room (ER) visit from the hospital ER department. The provider did not notify the guardian of Resident 2's ER visit. Findings include: On 03/13/2025, Surveyor reviewed Resident 2's record. Resident 2 was admitted to the provider's home on 11/04/2019, with diagnoses including	M 450		

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M 450	Continued From page 9	M 450		

schizoaffective disorder, bi-polar/manic depressive, anxiety disorder, dementia with behavioral disturbances and chronic kidney disease. Resident 2 had a legal guardian. Resident 2 was enrolled in services with a managed care organization (MCO) and was assigned case managers.

Record Review

On 03/13/2025, Surveyor reviewed Resident 2's facility record, guardianship paperwork and managed care organization (MCO) documentation for the time-period of 05/01/2024 to 03/12/2025 and identified the following:

Resident 2's facility observation notes, dated 01/13/2025 at 10:30 p.m., stated Resident 2 was complaining about his/her lower stomach and head hurting. Resident 2 stated s/he could not use the bathroom. Caregiver F called ambulance. Surveyor did not observe an accident/incident report for this date, indicating Resident 2's care team and guardian were notified of ER visit.

Resident 2's facility observation notes on 01/14/2025 at 6:45 a.m., stated Resident 2 returned to the facility with no discharge paperwork. Caregiver F wrote, "[Resident 2] caught a ride from someone."

Guardian E's billing note report documented on 01/14/2025, Guardian E received a telephone call from St. Luke's hospital at 5:30 a.m. The caller stated Resident 2 had been seen for constipation. Guardian E visited Resident 2 later that day and provided him/her the after-visit summary (AVS). Resident 2 stated s/he had requested an ambulance in the past, but staff had not called for one, stating that s/he was okay. Guardian E

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wrote, "[Resident 2] had to walk to St. Lukes (hospital) last night, in the middle of the night, in the cold, which was not safe."

Interviews

On 03/13/2025 between 12:50 p.m. and 1:45 p.m., Surveyor interviewed Resident 2's guardian. Guardian E reported the following documented incidents:

On 01/14/2024, Guardian E received a telephone call from the ER department at Ascension hospital, Greenfield. Caller stated Resident 2 left facility, went to ER department at Ascension Greenfield and then travelled to St. Lukes ER. Guardian E stated s/he received the call at 1:00 a.m.

On 01/14/2024, Guardian E stated s/he received a telephone call from the ER department at St. Lukes hospital at 5:30 a.m. to inform him/her that Resident 2 was treated for constipation. Guardian E stated, "We met with facility staff and [Former Manager B] later that day. [Resident 2] informed [Guardian E] that s/he requested an ambulance and staff did not call. [Resident 2] eloped." Guardian E told Former Manager B, in the future, when Resident 2 asked for an ambulance, the staff would call him/her an ambulance. Guardian E stated, "I just don't know how s/he is getting around. S/he does not have money. We think s/he has been walking, which is so unsafe." Guardian E reported the provider did not call to update him/her on Resident 2's ER visit.

On 03/21/2025 at 9:15 a.m., Surveyor interviewed Licensee A, who confirmed s/he was not aware Resident 2 was in the ER on 02/20/2025. Licensee A stated s/he and his/her new

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M 450	Continued From page 11 management team are developing new systems to be sure critical communication, and documentation is not missed in the future.	M 450		