STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018594	A. BUILDING: _____ B. WING _____	C 05/21/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ASPIRE OSHKOSH	150 ASPIRE LANE OSHKOSH, WI 54904

(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 05/21/2025, Surveyor conducted a complaint investigation at Aspire Oshkosh CBRF. As a result one deficiency was identified and the complaint was substantiated. Census: 54	N 000		
N 425	83.38(1)(a) Personal care. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the resident's highest level of functioning. In addition to the assessed needs as determined under s. DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Personal care. Personal care services shall be designed and provided to allow a resident to increase or maintain independence. This Rule is not met as evidenced by: Based on interviews and record review, the provider did not ensure personal care services were provided to meet the needs of Resident 1. Resident 1 had been assessed to require assistance with bathing and showering and was to receive baths/showers twice a week (Tuesdays and Fridays). Resident 1 received a total of 8 documented showers from 02/01/2025 through 04/19/2025. Additionally, Resident 1's ISP	N 425		

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

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N 425	Continued From page 1 (Individualized Service Plan) indicated the resident was resistive to cares and after two attempts of encouragement staff were to call APOA (Activated Power of Attorney)-A to help guide Resident 1 to take a bath/shower. APOA-A was not called after Resident 1 refused to take a bath or shower. Findings include: On 05/21/2025, Surveyor reviewed the closed medical record for Resident 1. The closed record indicated Resident 1 was admitted to the facility on 01/24/2023 with diagnosis to include Alzheimer's disease, dementia and depression. On 04/24/2025, Resident 1 was admitted to the hospital and did not return. Additionally, the record indicated Resident 1 had a APOA. On 05/21/2025, Surveyor reviewed Resident 1's most current ISP last reviewed/revised on 04/23/2025 which documented, Resident 1 was resistive to cares and required assistance with dressing, bathing and showering. An intervention listed on the ISP, initiated on 04/04/2024 and revised on 11/20/2024 stated, "If after two attempts of encouraging [Resident 1] to shower and [Resident 1] refuses. Call [APOA-A] to help guide [Resident 1] to take a shower." Resident 1's "Bathing/Showering" reports for 02/01/2025 through 04/19/2025 indicated Resident 1 was to have a bath/shower on Tuesdays and Fridays. The bath/shower reports did not include documentation Resident 1 received a bath/shower on the following dates: ~ week of 02/02/2025 - 02/08/2025; had a bath/shower on Tuesday not Friday ~ week of 02/09/2025 - 02/15/2025; had a	N 425		

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N 425	Continued From page 2	N 425		

bath/shower on Tuesday not Friday
~ week of 02/16/2025 - 02/22/2025; had a bath/shower on Tuesday not Friday
~ week of 02/23/2025 - 03/01/2025; no bathes/showers
~ week of 03/09/2025 - 03/15/2025; no bathes/showers
~ week of 03/16/2025 - 03/22/2025; had a bath/shower on Tuesday not Friday
~ week of 03/23/2025 - 03/29/2025; had a bath/shower on Tuesday and refused on Friday
~ week of 03/30/2025 - 04/05/2025; no bathes/showers
~ week of 04/06/2025 - 04/12/2025; had a bath/shower on Friday not Tuesday
~ week of 04/13/2025 - 04/19/2025; no bathes/showers

On 05/21/2025 at 9:50 AM, Surveyor interviewed APOA-A. APOA-A stated s/he had concerns staff were not bathing/showering Resident 1. APOA-A indicated s/he would visit Resident 1 weekly, and Resident 1 was "Always wearing dirty clothes, had greasy hair and a strong body odor." APOA-A indicated s/he sent texts messages to [DON (Director of Nursing)-C] on a "number of occasions" regarding concerns with Resident 1 not receiving [his/her] bathes/showers, but "nothing was ever done." APOA-A went on to say, "[Resident 1] had a care plan in place for at least a year stating if [Resident 1] refuses to take a bath/shower staff are to call me so I can encourage [Resident 1] to take one, which has worked in the past...I never once received a call [Resident 1] refused a bath/shower."

On 05/21/2025 at 10:00 AM, Surveyor interviewed RA (Resident Assistant)-D. RA-D recalled Resident 1 was to receive a bath/shower twice a week and stated, "I never personally gave

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N 425	Continued From page 3	N 425		

[Resident 1] a bath/shower because [s/he] was not assigned to me...When baths/showers are completed, staff documented it in our computer charting."

On 05/21/2025 at 2:00 PM, Surveyor interviewed DON-C regarding Resident 1. DON-C verified s/he received a text message from APOA-A stating when APOA-A came to visit Resident 1 was dirty and her/his hair looked greasy. DON-C indicated after receiving the text message from APOA-A s/he followed up with staff to ensure bathing/showering was being completed for Resident 1.

On 05/21/2025 at 2:05 PM, Surveyor interviewed DON-B regarding the facility's bathing/showering policy. DON-B indicated baths/showers were provided on a weekly basis or more frequently per the resident's request. DON-B verified Resident 1 was to be bathed/showered twice a week on Tuesdays and Fridays. DON-B verified the facility did not have documentation to show a bath/shower was routinely provided to Resident 1. DON-B confirmed Resident 1 refused a bath/shower on 03/28/2025, 04/04/2025 and 04/08/2025 and stated, "I talk to [CNA (Certified Nursing Assistant)-E] who told me [Resident 1] refused a bath/shower on 04/04/2025, but [CNA-E] couldn't remember the details and could not recall if [s/he] contacted [APOA-A] after the refusal...Staff are suppose to call [APOA-A] per [Resident 1's] ISP, but there's no documentation [APOA-A] was called...If it wasn't documented I can't prove it was done."

In conclusion, Resident 1 relied on staff assistance for baths/showers twice per week, however during a two-and-a-half-month period only 8 baths/showers were documented.

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N 425	Continued From page 4 Additionally, Resident 1's ISP identified the resident had a tendency to refuse baths/showers and an intervention for staff to call APOA-A for guidance to assist with bathing/showering. The facility did not have evidence this intervention was being implemented as written.	N 425		