STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0010103	A. BUILDING: _____ B. WING _____	C 02/17/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUST LIKE HOME IV	W5140 HWY A 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 02/06/2025, with information gathered through 02/17/2025, Surveyor conducted an abbreviated licensure survey and a complaint investigation at Just Like Home IV. Four deficiencies were identified. Complaint was substantiated. Census: 12	N 000		
N 408	83.37(1)(i) PRN psychotropic medication. As needed (PRN) psychotropic medication. When a psychotropic medication is prescribed on an as needed basis for a resident, the CBRF shall do all of the following: 1. The resident ' s individual service plan shall include the rationale for use and a detailed description of the behaviors which indicate the need for administration of PRN psychotropic medication. 2. The administrator or qualified designee shall monitor at least monthly for the inappropriate use of PRN psychotropic medication, including but not limited to, use contrary to the individual service plan, presence of significant adverse side effects, use for discipline or staff convenience, or contrary to the intended use. 3. Documentation in the resident ' s record shall include the rationale for use, description of behaviors requiring the PRN psychotropic medication, the effectiveness of the medication, the presence of any side effects, and monitoring for inappropriate use for each PRN psychotropic medication given. This Rule is not met as evidenced by: Based on observation, record review and interviews, the provider did not ensure that 2 of 2 residents (Resident 1 and Resident 2) prescribed	N 408		

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

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N 408	Continued From page 1	N 408		

PRN (as needed) psychotropic medication (Hydroxyzine) was documented on the resident's Individualized Service Plan (ISP) or include a rationale for use, nor a detailed description of the behaviors, which indicate the need for administration of PRN psychotropic medication.

Findings include:

On 02/06/2025, at approximately 1:50 PM, Surveyor and Manager B observed Resident 1's and Resident 2's blister cards of PRN Hydroxyzine in the med cart.

On 02/06/2025, Surveyor requested and reviewed Resident 1's and Resident 2's record.

Example 1: Resident 1

Resident 1 moved into the facility, 11/18/2021, with diagnoses including depression and anxiety.

Resident 1's December 2024, January and February 2025 Medication Administration Records documented:
Hydroxyzine HCL (hydrochloric acid) 25 MG (milligram) Tablet - Take 1 tablet by mouth 3 times a day as needed (anxiety). Start Date: 07/08/2024.
Administered on:
12/19/2024 9:20 AM - panic attack
12/20/2024 1:10 AM - panic attack
12/20/2024 8:00 PM - panic attack
01/12/2025 7:30 PM - panic attack
01/15/2025 9:30 PM - panic attack
01/26/2025 10:45 AM - panic attack
02/01/2025 11:15 AM - panic attack

Resident 1's ISP, unsigned, dated 01/18/2025, documented:

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N 408	Continued From page 2	N 408		

"Medications: Resident needs assistance with all medications."
"Cognition: Orientation - Remind, Cue, Supervise; Needs reminding from staff. Specialized Services - Resident Assistant to supervise and monitor daily and as needed."
"Mental Health: Resident Assistant to monitor for signs of depression/anxiety. Report and chart."

Surveyor noted there was no documentation regarding Resident 2's PRN psychotropic, Hydroxyzine.

Example 2: Resident 2

Resident 2 moved into the facility, 03/05/2020, with diagnosis including dementia.

Resident 2's January and February 2025 MARs documented:
Hydroxyzine Pamoate 50 MG capsule - Take 1 capsule by mouth every 6 hours as needed (anxiety). Start Date: 10/29/2024.
Administered on:
01/01/2025 12:30 AM - anxiety
01/01/2025 6:40 PM - anxiety
01/04/2025 8:00 - anxiety
01/08/2025 10:00 - anxiety
01/09/2025 7:00 - anxiety
01/18 11:30 - anxiety
01/21 7:20 PM - anxiety
01/25 1:42 AM - anxiety
01/28 7:40 PM - anxiety
02/04 7:30 PM - anxiety

Resident 2's ISP, unsigned, dated 10/23/2024, documented
"Medications: Resident Assistant to administer all medications."
"Cognition: Orientation - Remind, Cue,

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N 408	Continued From page 3 Supervise; Specialized Services - Supervision/Monitoring." "Mental Health: Monitor resident daily." Surveyor noted there was no documentation regarding Resident 2's PRN psychotropic, Hydroxyzine. On 02/06/2025, at approximately 3:00 PM, Surveyor and Manager B reviewed Resident 1's and Resident 2's progress notes and determined behaviors had not been documented to define a rationale as to why the resident was administered their PRN psychotropic. On 02/06/2025, at approximately 3:30 PM, Surveyor interviewed Assistant Administrator A and Manager B. Assistant Administrator B stated resident ISPs would be reviewed to include PRN psychotropic medication and the rationale for administration. Cross Reference: N0415 DHS 83.37(2)(d) Documentation of Medication Administration	N 408		
N 415	83.37(2)(d) Documentation of medication administration. Documentation of medication administration. As required under s. DHS 83.42(1)(o), at the time of medication administration, the person administering the medication or treatment shall document in the resident record the name, dosage, date and time of medication taken or treatments performed and initial the medication administration record. Any side effects observed by the employee or symptoms reported by the resident shall be documented. The need for any PRN medication and the resident ' s response	N 415		

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N 415	Continued From page 4	N 415		

shall be documented.

This Rule is not met as evidenced by:
Based on observation, record review and interview, the provider did not ensure proper documentation on the Medication Administration Record (MAR) for 1 of 2 residents reviewed.

Resident 2's Hydroxyzine medication was not documented when administered.

Findings include:

On 02/06/2025, at approximately 1:50 PM, Surveyor and Manager B observed Resident 2's blister card of as-needed (PRN) Hydroxyzine (psychotropic) in the med cart. The blister card had 1 out of 30 remaining capsules.

Resident 2's Hydroxyzine Medication Administration Record documented:
Hydroxyzine Pamoate 50 MG capsule - Take 1 capsule by mouth every 6 hours as needed (anxiety). Start Date: 10/29/2024.
Administered: 10/31/2024, 11/05, 11/10, 11/11,11/16, 11/25, 11/26, 11/29, 11/30, 12/05, 12/07, 12/10, 12/16, 12/28, 12/30, 01/01/2025 twice, 01/04, 01/08, 01/09, 01/18, 01/21, 01/25, 01/28, 02/04 for a total of 25 administration times.
Based on the 1 remaining capsule in the blister card, 4 capsules were not documented as administered.

On 02/13/2025 at 4:14 PM, Surveyor emailed Assistant Administrator A of the concern.

On 02/17/2025 at 5:19 PM, Assistant Administrator A emailed Surveyor and stated,

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N 415	Continued From page 5 "More staff training will be provided in this area and policies are followed."	N 415		
N 448	83.41(2)(a) Nutrition: diet. Diets. 1. The CBRF shall provide each resident with palatable food that meets the recommended dietary allowance based on current dietary guidelines for Americans and any special dietary needs of each resident. 2. The CBRF shall provide a therapeutic diet as ordered by a resident ' s physician. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not follow a menu based on current dietary standards. Findings include: On 01/16/2025, the Department received a concern that residents were not being served healthy meals. According to the USDA Center for Nutrition Policy and Promotion, "Food group amounts for 2000 Calories per day ...the daily recommended amounts for each food group: fruits 2 cups, vegetables 2 ½ cups, grains 6 ounces, protein 5 ½ ounces, dairy 3 cups." (Source: MyPlate Plan: 2000 calories, Age 14+, December 2020, https://www.dietaryguidelines.gov/sites/default/files/2021-03/Dietary_Guidelines_for_Americans-2020-2025.pdf (retrieval date: February 13, 2025).) Here's how the Academy of Nutrition and	N 448		

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N 448	Continued From page 6 Dietetics ranks processed foods from minimally to mostly or ultra-processed: -Minimally processed foods, such as fresh blueberries, cut vegetables and roasted nuts, prepped for convenience. -Foods processed at their peak to lock in nutritional quality and freshness including canned tomatoes, tuna, frozen fruit or vegetables. -Foods with ingredients added for flavor and texture, such as sweeteners, spices, oils, colors and preservatives, include jarred pasta sauce, salad dressing, yogurt and cake mixes. -Ready-to-eat foods like crackers, chips and deli meat, which are more heavily processed. -The most heavily or ultra-processed foods include sweetened breakfast cereals, soda, energy drinks, artificially flavored crackers and potato chips, chicken nuggets and hot dogs. Most labels now include added sugars. The Dietary Guidelines for Americans recommends that people older than 2 get less than 10% of total calories from added sugars, or about 200 calories in a 2,000-calorie diet. ... Learn to spot words like maltose, brown sugar, corn syrup, honey and fruit juice concentrate. When it comes to sodium, people often comment that they salt their food. As it turns out, you don't need to because manufacturers have already added salt for you, and it's often too much. The Dietary Guidelines also recommends adults consume less than 2,300 milligrams of sodium per day. Look for low- or reduced-sodium foods." (Source: Mayo Clinic website, What you should know about processed, ultra-processed foods, July 25, 2024, https://www.mayoclinichealthsystem.org/hometown-health/speaking-of-health/processed-foods-what-you-should-know (retrieval date - February 13, 2025).)	N 448		

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N 448	Continued From page 7 On 02/06/205, at approximately 12:55 PM, Surveyor observed the menu, dated 02/02 to 02/08, hanging on the refrigerator which read: 02/02 Breakfast: Yogurt Parfait Lunch: Egg Salad, pickle, mixed fruit Dinner: Lasagna, cheesy bread, peaches Snack: Cookies 02/03 Breakfast: French Toast, sausage Lunch: Mac n Cheese cauliflower, pudding Dinner: Chili and crackers, pears Snack: Chips and Dip 02/04 Breakfast: Cereal Lunch: Hot dog, chips, jello Dinner: Chicken nuggets, fries, fruit Snack: Twinkies 02/05 Breakfast: Cereal Lunch: Ham and Cheese, chips, fruit Dinner: Fish stx (sticks), mixed veggies, fruit Snack: Popcorn 02/06 Breakfast: Cereal Lunch: Turkey sandwich, mixed veggies, mixed fruit Dinner: Pancakes, sausage Snack: Honey Bun 02/07 Breakfast: Bacon, egg, cheese biscuit Lunch: PBJ (peanut butter and jelly), peaches Dinner: Tuna casserole, mixed fruit Snack: Brownies	N 448		

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N 448	Continued From page 8 02/08 Breakfast: Biscuits and gravy Lunch: Tuna on toast, pears, veggies Dinner: Cowboy beans, biscuit, mixed fruit Snack: Granola bars On 02/06/2025, at approximately 1:15 PM, Surveyor discussed the concern that the menu did not offer much for protein and fresh fruit and most of the food items were a form of processed and canned food with Assistant Administrator A. Assistant Administrator A showed Surveyor the freezers that were shared between this facility and the adjoining sister facility that could house up to 16 residents. There appeared to be a freezer for vegetables, 2 freezers for meat, and a freezer for fruit. Surveyor observed the meat freezers: -(4) 10-pound bags of leg quarters. Surveyor attempted to open the wire basket that the bags were in but was unable to. -Approximately 12 plastic Ziploc bags of what appeared to be ground hamburger, dated 12/24. -Two plastic Ziploc bags of what appeared to be chicken nuggets. -One plastic Ziploc bag of what appeared to be chicken patties. -One clear plastic bag of what appeared to be French fries. -A cardboard box that contained tubes of 16-ounce pork sausage. -Two clear plastic containers of what appeared to be precooked bacon. The freezer that stored the fruit contained approximately 8 bags. The freezer that stored the vegetables contained approximately 5 bags. The freezers were covered in thick layers of ice.	N 448		

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N 448	Continued From page 9 On 02/06/2025, at approximately 2:45 PM, Surveyor interviewed Resident 3, Resident 4, and Resident 5. Resident 3, Resident 4, and Resident 5 stated concerns regarding the number of sandwiches they are served. Resident 3 stated, "It is a lot, too many." On 02/13/2025, at approximately 10:00 AM, Surveyor interviewed Resident 4's managed care organization (MCO) Care Manager (CM) C. Surveyor reviewed the menu with CM F. CM F stated s/he would like to have seen more protein and fresh fruit options provided. CM F stated Resident 4 had diabetes and the menu did not sound conducive to that diagnosis. On 02/13/2025, at approximately 11:00 AM, Surveyor interviewed Resident 4's MCO CM G. CM G stated the food options appeared to be high in sugar and would have liked to see fresh fruit options provided. CM G stated, "Our clients at the home are primarily developmentally disabled and would not be able to tell us if they are being provided a healthy diet."	N 448		
N 499	83.45(3) Toxic substances. Toxic substances. The CBRF shall ensure that cleaning compounds, polishes, insecticides and toxic substances are labeled and stored in a secure area. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure that cleaning compounds and toxic substances were stored in a secure area. Findings include:	N 499		

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N 499	Continued From page 10 The provider is licensed to serve up to 16 residents with diagnoses including developmentally disabled, emotionally disturbed/mental illness, and advanced age. On 02/06/2025, at approximately 2:40 PM, Surveyor toured facility and observed the following unsecured cleaning compounds: -56 fluid ounce bottle of multi-purpose cleaner, bleach alternative -16 ounce spray can of ant killer, unscented -64 ounce jug of lemon scented bleach -19 ounce spray can of lavender scented disinfectant spray -32 ounce bottle of window cleaner -112 pac container of laundry detergent pods, moonlight breeze scent On 02/06/2025, at approximately 4:00 PM, Surveyors interviewed Assistant Administrator A and Manager B. Surveyor did not receive a response. On 02/17/2025 at 5:19 PM, Assistant Administrator A emailed Surveyor and stated, "More training will be provided to the staff to satisfy the requirement per the code listed here and the policy is followed."	N 499		