STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0015080	A. BUILDING: _____ B. WING _____	03/17/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COLONIAL HOME CARE	3165 N 96TH STREET MILWAUKEE, WI 53222

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M 000	INITIAL COMMENTS On 03/14/2025 with information gathered through 03/17/2025, Surveyor conducted a standard survey at Colonial Home Care. Six deficiencies were identified. Census:03	M 000		
M 246	88.04(5)(b) TRAINING-8 HOURS ANNUALLY Except as provided in pars. (c) and (d), the licensee and each service provider shall complete 8 hours of training approved by the licensing agency related to the health, safety, welfare, rights and treatment of residents every year beginning with the calendar year after the year in which the initial training is received. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure all employees received 8 hours of training approved by the licensing agency related to the health, safety, welfare, rights and treatment of residents annually for 1 of 2 employees reviewed who required continuing education. Caregiver C did not receive annual training in 2023 and 2024. Findings include: On 03/14/2025, Surveyor reviewed Caregiver C's employee record. Caregiver C was hired 05/17/2016. There was no documentation Caregiver C received training related to the	M 246		

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

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M 246	Continued From page 1 health, safety, welfare, rights and treatment annually in 2023 and 2024. On 03/17/2025, at 10:56 AM, Surveyor interviewed Administrator A who confirmed Caregiver C did not receive annual training related to the health, safety, welfare, rights and treatment in 2023 and 2024. Administrator A reported they had just taken over administrative duties and were in process of updating all files and establishing systems to bring the home into compliance.	M 246		
M 336	88.05(4)(b)2 SMOKE DETECTORS-TESTING AND MAINTENANCE The licensee shall maintain each required smoke detector in working condition and test each smoke detector monthly to make sure that it is operating. If a unit is found to be not operating, the licensee shall immediately replace the battery or have the unit repaired or replaced. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure smoke detectors were maintained in working condition. Two of 7 required smoke detectors were not installed and 1 was missing a battery. Findings include: On 03/14/2025, Surveyor completed tour of the facility. The facility is a ranch style home with 3 bedrooms, living room, kitchen, and full	M 336		

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M 336	Continued From page 2 basement. During the tour of the facility, the smoke detectors in the dining room and the basement had smoke detector mounts but no smoke detectors. The smoke detector at the basement stairs was tested and found to be not working due to a missing battery. On 03/14/2025, at approximately 2:30 PM, Surveyor interviewed Administrator A and asked if they conducted monthly testing of all smoke detectors. Administrator A showed Surveyor completed logs which documented all smoke detectors were tested and found working on 02/2025. Administrator A reported they had just taken over administrative duties and were in process of establishing new systems to bring the home into compliance.	M 336		
M 346	88.05(4)(d)2.b FIRE EVACUATION ANNUAL EVALUATION Each resident shall be evaluated annually for evacuation time, using the departments form. All service providers who work on the premises shall be made aware of each resident having an evacuation time of more than 2 minutes. This Rule is not met as evidenced by: Based on record review and interview, the provider did not complete an annual evacuation assessment review for 2 of 2 residents who had lived in the facility beyond one year. Resident 1 and Resident 2 were not assessed annually for evacuation in 2023 and 2024. Findings include:	M 346		

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M 346	Continued From page 3 On 03/14/2025, Surveyor reviewed resident records and identified the following: -Resident 1 was admitted on 09/16/2022, with diagnoses including bipolar disorder, depression and dementia. Resident 1's record did not include evidence of an annual evacuation assessment for 2023 and 2024. -Resident 2 was admitted on 09/10/2021, with diagnoses including depression and anxiety disorder. Resident 2's record did not include evidence of an annual evacuation assessment for 2022. On 03/14/2025, at approximately 2:30 PM, Surveyor interviewed Administrator A regarding annual evacuation assessments. Administrator A reported s/he was unaware of the requirement to review them annually. Administrator A reported they had just taken over administrative duties and were in process of establishing new systems to bring the home into compliance.	M 346		
M 356	88.05(6)(a) HOUSEHOLD PETS Pets may be allowed on the premises of an adult family home. Cats, dogs and other pets vulnerable to rabies which are owned by any resident or household member shall be vaccinated as required under local ordinance. A pet suspected of being ill or infected shall be treated immediately for its condition or removed from the home. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure 1 of 1 household pet was vaccinated for rabies. Caregiver C had a small	M 356		

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M 356	Continued From page 4 dog they brought to the home whenever they worked. The dog had not been vaccinated for rabies. Findings include: On 03/14/2025, at 9:00 AM, Surveyor observed a dog in the home. On 03/14/2025, at approximately 12:10 PM, Surveyor interviewed Caregiver C who confirmed they routinely bring the dog along when they are working. The dog was approximately 5 years old. Caregiver C reported they had never had the dog vaccinated for rabies. On 03/17/2025, at approximately 11:00 AM, Surveyor interviewed Administrator A regarding vaccination records for the dog. Administrator A reported s/he was unaware of the requirement to ensure pets have their rabies vaccinations. Administrator A reported s/he will have the dog vaccinated as soon as possible or not allow Caregiver C to bring it into the home.	M 356		
M 380	88.06(2)(a) ADMISSION-HEALTH EXAM Except as provided in subd. 2., the licensee shall ensure that a new resident of an adult family home receives a health examination by a physician to identify health problems and is screened for communicable disease, including tuberculosis. Screening for communicable disease may be provided by a physician, a registered nurse or a physician assistant. The health examination and screening shall take place within 90	M 380		

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M 380	Continued From page 5 days prior to admission to the home or within 7 days after admission. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure each resident admitted to the facility received a health examination to identify health problems and was screened for communicable disease, including tuberculosis (TB), for 2 of 2 residents (Resident 1 and Resident 2). Findings include: On 03/14/2025, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 04/15/2019. Resident 1's record did not include an admission health examination or a screening for communicable disease, including TB. On 03/14/2025, Surveyor reviewed Resident 2's record. Resident 2 was admitted on 09/16/2022. Resident 2's record did not include screening for communicable disease, including TB. On 03/14/2025, at approximately 1:30 PM, Surveyor interviewed Administrator A regarding the missing TB tests and free from communicable diseases documentation for Resident 1 and Resident 2. Administrator A reported the documents might be at the office and s/he would send them by 03/17/2025 if they were found. No additional information was provided. On 03/17/2025 at 10:56 AM, Surveyor conducted phone exit interview with Administrator A who confirmed they could not find documentation which showed the residents had been screened for communicable disease, including tuberculosis	M 380		

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M 380	Continued From page 6 (TB). Administrator A stated they would make appointments for both residents immediately and add the information to their records.	M 380		
M 456	88.07(2)(e) ANNUAL HEALTH EXAM The licensee shall ensure that each resident has an annual health exam by a physician. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 residents reviewed had completed an annual health exam by a physician. Resident 1 and Resident 2's records were reviewed and had no documentation of an annual health exam by a physician Findings include: On 03/14/2025, Surveyor reviewed resident records. -Resident 1 was admitted to the facility on 04/15/2019. Surveyor observed no evidence showing Resident 1 completed an annual health exam in 2023 or 2024. -Resident 2 was admitted to the facility on 09/16/2022. Surveyor observed no evidence showing Resident 2 completed an annual health exam in 2023 or 2024. On 03/14/2025 at approximately 1:35 PM, Surveyor interviewed Administrator A regarding the missing annual health examination documentation. Administrator A reported the documents might be at the office and s/he would send them by 03/17/2025, if they were found. No additional information was received.	M 456		

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M 456	Continued From page 7 On 03/17/2025 at 10:56 AM, Surveyor conducted phone exit interview with Administrator A who confirmed they could not find documentation which showed the residents had an annual health exam.	M 456		