STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	199036	A. BUILDING: _____ B. WING _____	R 02/29/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
REM EVERGREEN TRAIL	657-659 EVERGREEN TR PORTAGE, WI 53901

(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
{M 000}	INITIAL COMMENTS On 02/27/2024, with information obtained through 02/29/2024, the Bureau of Assisted Living, Southern Regional Office, conducted a verification visit at REM Evergreen Trail, an adult family home (AFH) located in Portage, WI. As a result of the survey, 2 deficiencies were identified. Both deficiencies were repeat deficiencies. See Statement of Deficiency (SOD) JUQV11, dated 09/05/2023. Under statutory provisions of Wis. Stat. Chapter 50, a $200 revisit fee is being assessed. Census: 4	{M 000}		
{M 424}	88.06(3)(f) REVIEW OF ISP The individual service plan shall be reviewed at least once every 6 months by the licensee, the resident or the resident's guardian, the service coordinator, if any, the designated representative, if any, the placing agency with the resident participating in a manner appropriate for the resident's level of understanding and method of communication. This review is to determine continued appropriateness of the plan and to update the plan as necessary. A plan shall be updated, in writing, whenever the resident's needs or preferences change substantially or when requested by the resident or the resident's guardian.	{M 424}		

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

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{M 424}	Continued From page 1	{M 424}		

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure that the individual service plans (ISPs) for 2 of 4 residents reviewed were reviewed at least once every 6 months by the resident or the resident's guardian.

There was no evidence that Resident 3's guardian reviewed an ISP for him/her, or a behavioral support plan (BSP), dated 10/11/2023.

There was no evidence of Resident 4's ISP having been reviewed since 11/16/2022.

This is a repeat deficiency. See Statement of Deficiency (SOD) JUQV11, dated 09/05/2023.

Findings include:

Example 1 - Resident 3

On 02/27/2024, Surveyor reviewed Resident 3's record. Resident 3 was admitted to the provider on 10/10/2022 and was under guardianship. The most recent individual service plan (ISP) located in Resident 3's record was dated 10/13/2022. There were no signatures on the ISP indicating who reviewed it. Surveyor also observed a BSP in Resident 3's record. The BSP was signed by Resident 3's case manager and the provider's staff on 10/11/2023. There was no evidence that Resident 3's guardian had reviewed an ISP for 2023 or his/her BSP from 10/11/2023.

At approximately 1:36 p.m., Surveyor interviewed Area Director A and Program Supervisor G. Program Supervisor G reported s/he thought Resident 3's guardian had been part of his/her

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{M 424}	Continued From page 2	{M 424}		

care plan meeting sometime in 2023, but could not recall a date that that occurred. Area Director A reported s/he thought there might be evidence that Resident 3's guardian had reviewed Resident 3's ISP at his/her offsite office. Surveyor gave a deadline of 8:00 a.m. on 02/28/2024 to receive additional evidence.

On 02/28/2024, Surveyor reviewed an e-mail from Area Director A. The e-mail contained an attachment, which showed that an e-mail with Resident 3's ISP was sent to his/her guardian on 02/27/2024 at 3:25 p.m. (after Surveyor was on site).

On 02/29/2024, at approximately 8:40 a.m., Surveyor interviewed Area Director A. Area Director A confirmed s/he sent the e-mail with Resident 3's ISP to his/her guardian on 02/27/2024, the day of the survey. Area Director A reported s/he sent the e-mail to Resident 3's guardian because s/he was unable to find any previous evidence of Resident 3's guardian having reviewed his/her ISP.

Example 2 - Resident 4

On 02/27/2024, Surveyor reviewed Resident 4's record. Resident 4 was admitted to the provider on 10/10/2022 and was under guardianship. The most recent ISP located in Resident 4's record was dated 11/16/2022.

At approximately 1:36 p.m., Surveyor interviewed Area Director A and Program Supervisor G. Area Director A reported s/he thought there might be evidence that Resident 4's guardian had reviewed Resident 4's ISP at his/her offsite office. Surveyor gave a deadline of 8:00 a.m. on 02/28/2024 to receive additional evidence.

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{M 424}	Continued From page 3 On 02/28/2024, at approximately 2:05 p.m., Surveyor interviewed Area Director A. Area Director A confirmed s/he did not have a more recent ISP for Resident 4.	{M 424}		
{M 488}	88.09(1)(d) RESIDENT RECORDS REQUIREMENTS A resident's record shall include all of the following: This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that Resident 1's record contained a written authorization from his/her guardian to control his/her funds. This is a repeat deficiency. See Statement of Deficiency (SOD) JUQV11, dated 09/05/2023. Findings include: On 02/27/2024, Surveyor reviewed Resident 1's record. Resident 1 was admitted to the provider on 10/10/2022 and was under guardianship. Resident 1's current individual service plan (ISP), last reviewed 06/21/2023, indicated that Resident 1 required staff assistance for financial management. Within a binder labeled for Resident 1, Surveyor observed a zippered pouch with a debit card and some loose change. Surveyor also observed a "Funds Record" sheet, where staff documented a running balance of Resident 1's funds. There was no evidence of a written authorization from Resident 1's guardian for the provider to control his/her funds.	{M 488}		

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{M 488}	Continued From page 4 At approximately 1:36 p.m., Surveyor interviewed Area Director A. Area Director A confirmed s/he could not find a written authorization for the provider to control Resident 1's funds within the record for Resident 1 located on site. Area Director A reported the record would maybe be in his/her offsite office. Surveyor gave a deadline of 8:00 a.m. on 02/28/2024 to receive the record. On 02/28/2024, Surveyor reviewed a record sent by Area Director A. The record showed that Resident 1's guardian signed a document authorizing the provider to control Resident 1's funds. The signature was dated 02/27/2024, the day Surveyor was on site for the survey. On 02/29/2024, at approximately 8:40 a.m., Surveyor interviewed Area Director A. Area Director A confirmed s/he was unable to find a previous written authorization for Resident 1.	{M 488}		