| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 0011573 | A. BUILDING: _____ B. WING _____ | R-C 12/04/2024 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| HEARTSONG ASSISTED LIVING | 415 EAST AVENUE BELLEVILLE, WI 53508 |

| (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 |
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| N 000 | Initial Comments<br><br>On 12/04/2024 Surveyors conducted a verification visit at Heartsong Assisted Living, a CBRF in Belleville.<br><br>Two deficiencies were identified. Two deficiencies were repeat deficiencies - See Statement of Deficiency (SOD) MS6212, dated 04/10/2024 and SOD MS6213, dated 08/03/2024.<br><br>Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed.<br><br>Census: 12 | N 000 | | |
| N 243 | 83.21(1)-(3) All employee training.<br><br>The CBRF shall provide, obtain or otherwise ensure adequate training for all employees in all of the following:<br>Resident rights. Training shall include general rights of residents including rights as specified under s. DHS 83.32(3). Training shall be provided as applicable under ss. 50.09 and 51.61 and chs. 54, 55, and 304, Stats., and ch. DHS 94, depending on the legal status of the resident or service the resident is receiving. Specific training topics shall include house rules, coercion, retaliation, confidentiality, restraints, self-determination, and the CBRF ' s complaint and grievance procedures. Residents ' rights training shall be completed within 90 days after starting employment.<br>Client Group. Training shall be specific to the client group served and shall include the physical, social and mental health needs of the client group. Specific training topics shall include, as applicable: characteristics of the client group served, activities, safety risks, environmental considerations, disease processes, | N 243 | | |

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

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| N 243 | Continued From page 1<br>communication skills, nutritional needs, and vocational abilities. Client group specific training shall be completed within 90 days after starting employment.<br>Client Group. In a CBRF serving more than one client group, employees shall receive training for each client group.<br>Recognizing, preventing, managing, and responding to challenging behaviors. Specific training topics shall include, as applicable: elopement, aggressive behaviors, destruction of property, suicide prevention, self-injurious behavior, resident supervision, and changes in condition. Challenging behaviors training shall be completed within 90 days after starting employment.<br><br>This Rule is not met as evidenced by:<br>Based on record review and interview, the provider did not ensure 3 of 3 employees reviewed, obtained all training as required within 90 days after starting employment.<br><br>Caregiver M did not have training in resident rights within 90 days after starting employment.<br><br>Caregiver M, Manager O, and Caregiver P did not have training in recognizing, preventing, managing, and responding to challenging behaviors within 90 days after starting employment.<br><br>Caregiver M, Manager O, and Caregiver P did not have training in required client groups within 90 days after starting employment. | N 243 | | |

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| N 243 | Continued From page 2<br><br>This is a repeat deficiency. See Statement of Deficiency (SOD) MS6212, dated 04/10/2024 and SOD MS6213, dated 08/03/2024.<br><br>Findings include:<br><br>On 12/04/2024, Surveyor conducted a review of 3 employees to verify compliance with all employee training requirements. Surveyor requested training records from Manager O.<br><br>Resident Rights<br><br>The record for Caregiver M, hired 09/04/2024, did not contain evidence of training or evidence of meeting an exemption for resident rights. On 12/04/2024, at approximately 11:00 a.m., Surveyor interviewed QA Consultant N. QA Consultant N confirmed the provider did not have evidence Caregiver M completed or met an exemption for resident rights training.<br><br>Recognizing, Preventing, Managing and Responding to Challenging Behaviors<br><br>The record for Caregiver M, hired 09/04/2024, did not contain evidence of training or evidence of meeting an exemption for challenging behaviors training. On 12/04/2024, at approximately 11:00 a.m., Surveyor interviewed QA Consultant N. QA Consultant N confirmed the provider did not have evidence Caregiver M completed or met an exemption for challenging behaviors training.<br><br>The record for Manager O, hired 08/26/2024, did not contain evidence of training or evidence of meeting an exemption for challenging behaviors training. On 12/04/2024, at approximately 11:00 a.m., Surveyor interviewed QA Consultant N. QA | N 243 | | |

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| N 243 | Continued From page 3<br>Consultant N confirmed the provider did not have evidence Manager O completed or met an exemption for challenging behaviors training.<br><br>The record for Caregiver P, hired 07/31/2024, did not contain evidence of training or evidence of meeting an exemption for challenging behaviors training. On 12/04/2024, at approximately 11:00 a.m., Surveyor interviewed QA Consultant N. QA Consultant N confirmed the provider did not have evidence Caregiver P completed or met an exemption for challenging behaviors training.<br><br>Client Group<br><br>The facility was licensed to provide care and services to residents within the client groups of developmentally disabled, irreversible dementia/Alzheimer's, physically disabled, and advanced age.<br><br>The record for Caregiver M, hired 09/04/2024, did not contain evidence of training or evidence of meeting an exemption for client group training. On 12/04/2024, at approximately 11:00 a.m., Surveyor interviewed QA Consultant N. QA Consultant N confirmed the provider did not have evidence Caregiver M completed or met an exemption for client group training specific to developmentally disabled, irreversible dementia/Alzheimer's, physically disabled, and advanced age.<br><br>The record for Manager O, hired 08/26/2024, did not contain evidence of training or evidence of meeting an exemption for client group training. On 12/04/2024, at approximately 11:00 a.m., Surveyor interviewed QA Consultant N. QA Consultant N confirmed the provider did not have evidence Manager O completed or met an | N 243 | | |

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| N 243 | Continued From page 4<br>exemption for client group training specific to developmentally disabled, irreversible dementia/Alzheimer's, physically disabled, and advanced age.<br><br>The record for Caregiver P, hired 07/31/2024, did not contain evidence of training or evidence of meeting an exemption for client group training. On 12/04/2024, at approximately 11:00 a.m., Surveyor interviewed QA Consultant N. QA Consultant N confirmed the provider did not have evidence Caregiver P completed or met an exemption for client group training specific to developmentally disabled, irreversible dementia/Alzheimer's, physically disabled, and advanced age. | N 243 | | |
| N 408 | 83.37(1)(i) PRN psychotropic medication.<br><br>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 | N 408 | | |

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| N 408 | Continued From page 5<br>psychotropic medication given.<br><br>This Rule is not met as evidenced by:<br>Based on record review and interview, the provider did not ensure 2 of 2 residents reviewed that were prescribed a PRN psychotropic medication had an individual service plan (ISP) that included the rational for use and detailed description of behaviors that indicated the use of the PRN psychotropic medication. Resident 2 and Resident 4's PRN psychotropic was not included in their ISPs.<br><br>This is a repeat deficiency. See Statement of Deficiency (SOD) MS6212, dated 04/10/2024 and SOD MS6213, dated 08/03/2024.<br><br>Findings include:<br><br>On 12/04/2024 at approximately 10:00 a.m., Surveyor reviewed resident records and identified the following:<br><br>- Resident 2 was admitted to the provider's facility on 10/04/2023. Resident 2's physician orders included Quetiapine 50 mg (Start Date 05/10/2024) - Take 1 tablet 1 time daily as needed for anxiety/insomnia. Resident 2's ISP, not dated, was not updated to include the rationale of use or definded behaviors that inidcated his/her use of Quetepine PRN.<br><br>- Resident 4 was admitted to the provider's facility on 11/13/2023. Resident 4's physician orders included Quetiapine 25 mg (Start Date: 12/12/2023) - Take 1 ½ tablet daily as needed for anxiety. Resident 4's ISP, not dated, was not updated to include the rationale of use or definded behaviors that inidcated his/her use of | N 408 | | |

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| N 408 | Continued From page 6<br>Quetepine PRN.<br><br>On 12/04/2024 at approximately 11:00 a.m., Surveyor interviewed QA Consultant N and Manager O regarding PRN psychotropic medications being included in the ISP. QA Consultant N and Manager O stated that the facility was in the process of redoing the ISP's. Manager O wrote down the requirements to address PRN medications being included in ISP's. | N 408 | | |