STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018033	A. BUILDING: _____ B. WING _____	C 08/24/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOLDEN HANDS ADULT FAMILY HOME LLC 2	4448 NORTH 72ND STREET MILWAUKEE, WI 53218

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M 000	INITIAL COMMENTS On 08/24/2023, Surveyor completed a standard survey and complaint investigation at Golden Hands Adult Family Home LLC 2. As a result, 6 deficiencies were identified and the complaint was unsubstantiated. Census: 2	M 000		
M 232	88.04(2)(g)1 HEALTH SCREENING FOR STAFF The licensee shall obtain documentation from a physician, a registered nurse or a physician's assistant indicating that the licensee and any service provider has been screened for illness detrimental to residents, including for tuberculosis. The documentation is to be completed within 90 days before the start of providing service. The documentation shall be kept confidential except that the licensing agency shall have access to the documentation for verification. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure caregivers were screened for illness detrimental to residents, including tuberculosis (TB), within 90 days before the start of providing service for 2 of 2 caregivers reviewed. Caregiver C's and Caregiver D's communicable disease screening was late and the box indicating s/he was free from communicable disease was not checked. Findings include: On 08/22/2023, at 11:30 AM, Surveyor reviewed	M 232		

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

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M 232	Continued From page 1 employee records and identified the following: -Caregiver C was hired on 12/25/2021, with a start date of 12/29/2021. Caregiver C's file contained a communicable disease screening form, dated 01/10/2022. The screening was late and the box indicating s/he was free from communicable disease was not checked. -Caregiver D was hired on 10/24/2022, with a start date of 10/28/2022. Caregiver D's file contained a communicable disease screening form, dated 11/03/2022. The screening was late and the box indicating s/he was free from communicable disease was not checked. On 08/15/2023, at 11:30 AM, Surveyor interviewed Licensee A. Licensee A reported s/he was aware of the code requirements. Licensee A reported s/he contracted with a registered nurse to complete the communicable disease screenings. Licensee A reported s/he was unaware the screenings were late.	M 232		
M 330	88.05(3)(o) HOME NOT BE USED FOR OTHER BUSINESS The home shall not be used for any business purpose that regularly brings customers to the home so that the residents' use of the home as their residence or the resident's privacy is adversely affected. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure the facility was not used	M 330		

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M 330	Continued From page 2	M 330		

for another business purpose which regularly brought customers to the home so that the residents' use of the home as their residence or the residents' privacy was adversely affected. Person E, a 17-year-old minor, resided in the home for respite from approximately 05/02/2023 until 08/15/2023. Person E had significant behaviors including physical and verbal aggression, destruction of property, and was threatening to staff and residents.

Findings include:

On 08/22/2023, at 10:20 AM, Surveyor interviewed Licensee A regarding Person E. Licensee A reported Person E resided in the house for respite. Licensee A confirmed Person E was 17 years old, had significant behaviors including physical aggression, verbal aggression, and property destruction. Licensee A reported staff provided assistance with medication administration, supervision, and household tasks. Licensee A reported Person E was going to be admitted to the facility once Person E turned 18 years old, at the end of September 2023. Licensee A denied the home was licensed as a children's foster home.

On 08/22/2023, at 11:00 AM, Surveyor interviewed Caregiver B. Caregiver B confirmed Person E was physically aggressive and "put [her/his] hands on us." Caregiver B reported Person E aggressively approached and stood directly "in [Resident 1's] face."

On 08/22/2023, at 11:00 AM, Surveyor reviewed Person E's record. Person E resided at the facility from 05/02/2023 until 08/15/2023. Person E's record included a document titled Plan Of Care (POC), dated 06/21/2023 and identified the

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M 330	Continued From page 3 following: -Person E was placed at the facility for respite purposes on 05/02/2023. The facility "is only used for respite purposes." -Person E was terminated from her/his previous placement due to physical aggression and destruction of property. -Person E's diagnoses included behavioral and emotional disorders, anxiety disorder, and moderate intellectual disability. Person E's record included an intake form from Mental Health Emergency Center (MHEC) Emergency Department, dated 05/07/2023, and identified the following: -Person E was brought to MHEC due to Person E was "threatening the staff at group home," property destruction, and verbal aggression. -Person E's previous visits for violent behavior occurred 7 times between 02/06/2023 and 04/28/2023. On 08/22/2023, at 11:30 AM, Surveyor interviewed Resident 2. Resident 2 reported s/he "keeps to myself." Resident 2 confirmed Person E was physically and verbally aggressive toward staff; however, not towards her/him. Resident 2 reported the house was quieter with Person E no longer residing there.	M 330		
M 464	88.07(3)(d) MEDICATION- WRITTEN ORDER Before the licensee or service provider dispenses or administers a prescription medication to a resident, the licensee shall obtain a written order from the physician who prescribed the medication specifying who by name or position is permitted	M 464		

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M 464	Continued From page 4 to administer the medication, under what circumstances and in what dosage the medication is to be administered. The licensee shall keep the written order in the resident's file. This Rule is not met as evidenced by: Based on record review, and interview, the provider did not obtain a written order from the physician who prescribed the medication specifying who by name or position was permitted to administer the medication, under what circumstances, and in what dosage the medication was to be administered for 2 of 2 residents prior to administration. Resident 1's record did not contain physician's orders. Resident 2's written order was obtained 72 days after admission. Findings include: On 08/22/2023, at 11:00 AM, Surveyor reviewed resident records and identified the following: Example 1-Resident 1 -Resident 1 was admitted on 07/01/2023, with diagnoses including attention deficit disorder, autism, obsessive compulsive disorder, anxiety, intellectual disabilities, and mood disorder. -Resident 1's August 2023 MAR, identified Resident 1 received ziprasidone 80 milligrams (mg), trazodone 300 mg, topiramate 200 mg, propranolol 80 mg, lamotrigine 150 mg, oxcarbazepine 300 mg, gabapentin 400 mg, clonazepam 0.5 mg, and Haldol 10 mg. -Resident 1's record did not include a written order from the physician who prescribed the	M 464		

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M 464	Continued From page 5	M 464		

medication specifying who by name or position was permitted to administer the medication, under what circumstances, and in what dosage the medication was to be administered.
-Resident 1's Individual Service Plan (ISP), dated 07/01/2023, indicated Resident 1 required assistance with medication administration.

Example 2- Resident 2

-Resident 2 was admitted on 07/03/2022, with diagnoses including bipolar disorder, schizophrenia, anxiety disorder and mood disorder.
-Resident 2's August 2023 MAR, identified Resident 2 received famotidine 20 mg, amlodipine 5 mg, atorvastatin 40 mg, naproxen 500 mg, metformin 500 mg, quetiapine 200 mg, duloxetine 60 mg, hydroxyzine 50 mg, quetiapine 100 mg, zolpidem 10 mg, and lorazepam 1 mg.
-Resident 2's record included a written order from the physician who prescribed the medication specifying who by name or position was permitted to administer the medication, under what circumstances, and in what dosage the medication was to be administered dated 09/13/2022, 72 days after admission.

Interview

On 08/24/2023, at 11:50 AM, Surveyor interviewed Licensee A. Licensee A confirmed staff had been administering medications to Resident 1 and Resident 2 since their admission. Licensee A reported s/he did not have physician's orders for the staff to administer medications for Resident 1 and Resident 2. Licensee A reported Resident 1's parent accompanied her/him to the doctor appointment and did not obtain an order. Licensee A did not offer an explanation as to why

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M 464	Continued From page 6 Resident 1 did not have an order or why Resident 2's order was 72 days late. Licensee A reported s/he would contact the physicians to obtain orders.	M 464		
M 502	88.09(1)(d)7 RESIDENT RECORD-MEDICAL EXAMINATIONS The report of the medical examination required under s. HSS 88.06(2)(a). This Rule is not met as evidenced by: Based on record review and interview, the provider did not maintain a report of the medical examinations for 1 of 1 resident reviewed. Resident 1's record did not contain the results of a tuberculosis (TB) test or screening of communicable disease. Findings include: On 08/22/2023, at 11:50 AM, Surveyor reviewed resident records. Resident 1 was admitted on 07/01/2023. Resident 1's record did not contain evidence Resident 1 was screened for communicable disease, including TB. On 08/22/2023 at 11:55 AM, Surveyor interviewed Licensee A. Licensee A confirmed Resident 1 was tested for TB and screened for communicable disease prior to admission. Licensee A reported "it's in the system. I don't have a copy." Licensee A reported s/he would obtain a copy and would fax the results of Resident 1's communicable disease including TB to Surveyor. As of 08/24/2023, Surveyor did not receive the results of Resident 1's health screening.	M 502		

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M 532	88.09(2)(a)9 HEALTH SCREENING The results of screening for communicable disease. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure each service provider record contained documentation of the results of screening for communicable disease for 1 of 1 service providers reviewed. Caregiver B's record did not include completed documentation of the communicable disease screening. Findings include: On 08/22/2023, at 12:00 PM, Surveyor reviewed Caregiver B's record. Caregiver B was hired on 05/09/2023. Caregiver B's record did not include completed documentation of the communicable disease screening. On 08/22/2023, at 12:05 PM, Surveyor interviewed Licensee A regarding service provider records. Licensee A reported the provider required staff have their communicable disease screening and tuberculosis test completed prior to being allowed in the home. Licensee A reported s/he did not have a copy and would have to obtain it. Licensee A reported s/he would send a copy of the communicable disease screening. Licensee A reported s/he would ensure documentation was included in all service providers records. As of 08/24/2023, Surveyor did not receive the results of Caregiver B's health screening.	M 532		
M 570	88.10(3)(l) Safe Physical Environment	M 570		

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M 570	Continued From page 8 Individuals, except for correctional residents, have basic rights which they do not lose when they enter an adult family home. A resident shall have a safe environment in which to live. The adult family home shall safeguard residents who cannot fully guard themselves from environmental hazards to which they are likely to be exposed, including conditions which would be hazardous to anyone and conditions which would be or are hazardous to a particular resident because of the resident's condition or disability. This Rule is not met as evidenced by: Based on observation, and interview, the provider did not ensure water temperatures did not exceed 115° Fahrenheit (F) for 1 of 1 resident bathroom. The hot water temperature in the resident bathroom was 142° F. Findings include: This facility was licensed by the Department, effective 11/02/2020, to admit up to 3 residents in the client groups of advanced age, emotionally disturbed/mental illness, irreversible dementia/Alzheimer's, and developmentally disabled. On 08/22/2023, at 1:05 PM, Surveyor, accompanied by Licensee A, tested the hot water temperature in the resident bathroom sink faucet. The hot water was 142° F. "Exposure to hot water is a potential environmental danger for residents. Elderly residents and residents with mental and physical disabilities may have neurological conditions that prevent instant recoil from hot water. Because	M 570		

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M 570	Continued From page 9 these individuals do not instantly react to dangerous temperature levels, they are at particular risk for injury. Hot water can cause scalding; e.g., second and third degree burns in which the skin blisters and swells. In such instances, skin does not return to normal and forms scar tissue upon healing. These burns may lead to permanent disability. (DQA Publication-01942, Hot Water Temperatures in Adult Family Homes, August 2017.)" On 08/22/2023, at 1:05 PM, Surveyor interviewed Licensee A regarding the hot water in the resident bathroom. Licensee A confirmed the water was too hot. Licensee A reported s/he would turn it down. Licensee A reported on 08/14/2023, s/he informed the homeowner of the hot water temperature and was waiting for a new water heater. Licensee A reported the residents were not supervised while in the bathroom.	M 570		