STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0014758	A. BUILDING: _____ B. WING _____	R-C 12/06/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AMERY MEMORY CARE	215 BIRCH STREET WEST AMERY, WI 54001

(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 11/20/2023, Surveyor conducted a verification visit and complaint investigation at Amery Memory Care. Data was collected through 12/06/2023. One of 2 complaints was substantiated. One violation was identified. The violations was a repeat deficiency. See Statement of Deficiency (SOD) QKNG13, dated 02/01/2023 and SOD T19F11, dated 10/29/2020. . Under statutory provisions of Wis. Stat. ch. 50, a $200 revisit fee is being assessed. Census: 48.	{N 000}		
{N 426}	83.38(1)(b) Supervision. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the resident's highest level of functioning. In addition to the assessed needs as determined under s. DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Supervision. The CBRF shall provide supervision appropriate to the resident's needs. This Rule is not met as evidenced by: Surveyor: Farah, Laura J. Based on record review and interview, the provider did not ensure adequate supervision for Resident 1.	{N 426}		

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

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{N 426}	Continued From page 1 On 11/16/2023, the Department received a complaint that on 11/14/2023, a resident eloped and was brought back to the facility by an individual from the public. This is a repeat deficiency. See Statement of Deficiency (SOD) QKNG13, dated 02/01/2023 and SOD T19F11, dated 10/29/2020. Findings include: The provider is licensed to care for 68 residents within the client groups of advanced aged and irreversible dementia/Alzheimer's disease. On 11/20/2023 at approximately 11:30 AM, Surveyor interviewed Administrator A and Registered Nurse (RN) B. Administrator A stated that on 11/14/2023 at approximately 6:30 PM, the front door delayed egress alarm went off and Dietary Aid (DA) C shut off the main panel speaker alarm at the front door. Administrator A stated DA C did not exit the building to see if a resident had eloped. Administrator A stated there were 3 other staff working at the time: Residential Care Coordinator 3 (RCC3) D, RCC3 E, and RCC F. RN B stated that on 11/14/2023, the high temperature was 44 degrees Fahrenheit, and the low temperature was 36 degrees Fahrenheit. On 11/20/2023, Surveyor reviewed documents provided by Administrator A regarding his/her investigation on Resident 1's elopement. -A document titled ASSISTED LIVING SELF-REPORT, dated 11/14/2023 read, "[Resident 1] is a 67-year-old [person] who admitted to [facility] on 9/21/2023. [Resident 1] has a diagnosis of dementia with behaviors and	{N 426}		

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{N 426}	Continued From page 2	{N 426}		

anxiety ...has made comments of wanting to leave but has not attempted to ...In a normal day, [Resident 1] likes to walk the facility hallways. On 11/15/2023 [date is incorrect and should be 11/14/2023] at approximately 6:25pm [sic] [Resident 1] was wandering around the building when [Resident 1] went to the front door and pushed on the door until it opened. Door alarms and speaker system did alarm. [Resident 1] exited the building. At 6:26pm [sic], Dietary [sic] staff heard the alarm going off ...shut the speaker alarm off on the front door. Dietary staff did not go out of the building to see if any residents had exited ...Another staff member reset the door.

At approximately 641pm [sic] staff heard the alarm going off on the front door and noticed a lady ...The lady explained that [s/he] saw [Resident 1] in the church parking lot (the parking lot is right on the property line with [facility] property) and [s/he] was trying to hitch a ride to [nearby city]. The lady returned [Resident 1] to the building and notified police ...[Resident 1's] CarePlan [sic] has been updated to reflect elopement precautions. Increase to ½-hour checks to ensure [Resident 1's] whereabouts."

Statements from Administrator A's investigation:
-Statement from DA C that was written by Administrator A read, "[Administrator A] explained the incident of a resident leaving the building and [DA C] was the first to shut the alarm off to the speakers. [DA C] did say that [s/he] didn't go out to check because [s/he] thought the residents were just pushing on the doors."
-Statement from RCC3 D read, " ...my one and only break I took this shift. I was out there less then [sic] 15 minutes [sic] I'm sure. [RCC3 E] and I went out at the same time and came in at the same time. I opened the door and heard the front

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{N 426}	Continued From page 3	{N 426}		

door alarm going off. I walked up to [RCC F], [Resident 1] ...and an unknown woman In [sic] the front lobby ...I tried calling on-call 6 times but could not get through ...I then took [Resident 1] back to [his/her] room. "
-Statement from RCC F read, " ...we heard the door alarm go off ...I walked to the front door where [DA C] was leaning against the dresser [sic] [s/he] told me [s/he] didn't have the key to stop the alarm. I shut the alarm off ...I heard the alarm again ...and went to the front. When I got there I shut it off again then saw ...[Resident 1] and a lady. the [sic] [person] started to yell at me stating [s/he] had been there for 10 minutes and was wondering where all the staff were."
-Statement from RCC3 E read, "[Resident 1] exist [sic] the building tonight. I had gone on break ...When I returned from break [sic] the front door alarm was going off and co-workers ...were working on shutting it off, went to the front lobby to help them...a lady was standing in the lobby and [Resident 1] was sitting in the lobby ...I was told from lady ...that [s/he] brought back [Resident 1] who was walking and picked [him/her] up in the church parking lot ...[Law Enforcement (LE) H] asked me if I knew [s/he] was missing or was [sic] alarm going off ...No one was aware of [sic] [Resident 1] had left the building till [sic] the alarm was going off again and lady and [Resident 1] was there."
-Statement from Person G read, "[Person G] explained to the administrator that [s/he] was driving down the road and saw a resident on the side of the church parking lot [located next to the facility] ...decided to stop because it was kind of weird that the resident had [his/her] thumb out trying to hitch a ride. [Resident 1] stated [s/he] needed a ride to [nearby city] ....[Person G] brought [him/her] in the building and ran [sic] the doorbell, no staff come [sic], [s/he] was outside

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{N 426}	Continued From page 4	{N 426}		

for about 5 minutes, then another resident come [sic] to the door and pull-on [sic] door and door came open, The door alarm was going off. [Person G] stated that [s/he] was in the lobby area for 10 minutes before any staff came to check on the door ...[Person G] called the police."

-Statement from Administrator A read, "At 702pm [sic]-[RCC3 E] called me to report that [Resident 1] got out of the building and some [person] brought [him/her] back to the building and the cops were called. The administrator went thru [sic] the cameras to figure out how long [sic], how did the resident get out.

-625pm [sic]-[Resident 1] pushed on the front door, alarm sounded, and [s/he] walked out the door.

-626pm [sic]-[DA C] shut off the panel for the speak [speaker] alarm ...but was unable to turn off the door alarm, [sic]

-About 40 seconds later, [RCC F] came and reset the door alarm. No staff attempted to look outside for residents.

-634pm [sic]-[Person G] came to the door with [Resident 1]. [Person G] set the doors off, and sat and waited for staff, alarm sounding.

-635pm [sic]-Another resident opened the door for [Person G] ...The door was alarming.

-637pm [sic]-[Person G] called the police.

-641pm [sic]-2 staff arrived at the front door to respond to the door. [RCC3 D] shut off the speakers, [RCC F] shut off the door."

Surveyor reviewed a document titled [CITY] POLICE DEPARTMENT CALL FOR SERVICE, dated 11/14/2023, that read, "Received a call form, [sic] dispatch stating a passerby noticed a patient from [FACILITY] wondering [sic] the parking lot street area and when the caller went to the building [s/he] was let in by a patient. I was

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{N 426}	Continued From page 5 told alarms were going off but no staff were around ...The door lock and alarm system seemed to be working when I was on the scene. I was unable to determine if the issue was mechanical or employee based. I asked the workers to speak with their managment [sic] asap (as soon as possible) to have the door systems checked ...and to also check the door throughout the night." Surveyor reviewed a document titled MISSING RESIDENT POLICY AND PROCEDURE CODE GREEN that read, in part, "It is imperative that in all instances, especially in extreme temperatures an outside of building check is immediately conducted ...If Facility [sic] staff suspect a resident is missing,.. issue a 'Code Green' via walkies ...All available staff shall conduct a search for the missing resident." On 12/06/2023, from 2:57 PM to 3:11 PM, Surveyor interviewed Administrator A and RN B. Administrator A stated that Resident 1 was not wearing a coat the day s/he eloped but was wearing a sweater. Administrator A and RN B stated that when staff were hired, they were trained on the alarm system and this training included a tour, how to set off the alarm systems, and how to shut off and/or reset the alarms. RN B stated that after Resident 1's elopement, the MISSING RESIDENT POLICY AND PROCEDURE CODE GREEN was updated to include guidance for staff in the event the alarms engage. The policy included, "I understand that when a door alarm sounds in the building, this indicates a resident may be exit seeking or attempting to elope from the building ...I will conduct an out of the building check to ensure residents are not out of the building."	{N 426}		

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{N 426}	Continued From page 6 The provider did not ensure staff followed procedures when the front door alarms engaged, resulting in Resident 1 eloping from the building.	{N 426}		