STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017720	A. BUILDING: _____ B. WING _____	C 07/03/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COREYS PLACE 2	4051 N 69TH ST MILWAUKEE, WI 53216

(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 From 06/20/2025 to 07/03/2025, Surveyor conducted a complaint investigation at Corey's Place #2, an AFH in Milwaukee. Two deficiencies were identified. Complaint was substantiated. Census: 3	M 000		
M 436	88.07(2)(a) SERVICES The licensee shall provide or arrange for the provision of individualized services specified in a resident's individual service plan that are the licensee's responsibility. This Rule is not met as evidenced by: Based on record review and interview, Licensee A did not ensure services specified in a resident individual service plan (ISP) was provided. Licensee A did not ensure supervision was provided as indicated in 1 of 2 resident ISPs. Findings include: On 01/31/2025 the department received a complaint involving supervision concerns. On 06/20/2025 at approximately 9:50 a.m., Surveyor entered the home for a complaint investigation. On 06/20/2025 at approximately 10:00 a.m.,	M 436		

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

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M 436	Continued From page 1 Surveyor interviewed Licensee B. Licensee B stated, "back in January 2025 there was a big mix up with Resident 1." Licensee B said Resident 1 was sent home from a hospital visit in an uber and ended up at the wrong place. Licensee B stated Resident 1 walked to his/her family home about 6 or so blocks away. Licensee B stated, "the facility had worked things out with the family and Resident 1 was still living at the facility and doing good." On 06/20/2025 at approximately 10:15 a.m., Surveyor reviewed resident records, provided by Licensee A. Surveyor noted that Resident 1 did not have an ISP in his/her record. Licensee A stated that s/he had the ISP in his/her email and would send it over. Surveyor requested that the ISP be sent over by 06/23/2025 by 1:00 p.m. On 06/20/2025 at approximately 10:30 a.m., Surveyor interviewed Licensee A regarding the supervision needs of Resident 1. Licensee A confirmed Resident 1 required supervision in the community. Licensee A stated Resident 1 did not go out into the community without staff or family assistance. Licensee A stated that the facility transported Resident 1 to medical appointments and left him/her at dialysis. Licensee A stated that on 01/18/2025 the dialysis center sent Resident 1 to the hospital. Licensee A stated that "the hospital usually brings him/her home in an ambulance, however that night the hospital sent him/her home in an uber." Licensee A stated facility staff called him/her and reported Resident 1 had not shown up to the home. Licensee A called the hospital and was told that the Uber driver dropped Resident 1 off at the wrong address. Licensee A stated s/he received a call from a family member of Resident 1 about an hour after Resident 1 was supposed to have	M 436		

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M 436	Continued From page 2 arrived at the facility. The family member reported that Resident 1 was with them. Licensee A stated that Resident 1 was returned to the facility. On 07/02/2025 at 11:01 a.m., Surveyor received records of Resident 1's ISP. Resident 1 was admitted to the provider on 05/15/2024 with diagnosis including cognitive impairments, diabetes, and kidney disease. Resident 1's Individual Service Plan (ISP), dated 10/01/2024, indicated s/he required supervision and assistance with transportation during medical appointments. On 07/03/2025 at approximately 12:00 p.m., Surveyor reviewed supervision concern with Licensee A. Licensee A stated that Resident 1 had a lot of doctor appointments due to dialysis. Licensee A did acknowledge Resident 1 attended dialysis appointments on his/her own, but the facility was arranging transportation. Licensee A stated that s/he will make sure that the ISP is updated.	M 436		
M 504	88.09(1)(d)8 RESIDENT RECORD-ISP The individual service plan required under s. HSS 88.06(3). This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure the resident record contained an individual service plan (ISP). Resident 1's ISP was not included in Resident 1's record at the facility. Findings include:	M 504		

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M 504	Continued From page 3 On 06/20/2025, at approximately 10:15 a.m., Surveyor reviewed Resident 1's record. S/he was admitted 05/14/2025. Resident 1 did not have any record of an ISP in the facility. On 06/20/202 at approximately 10:30 a.m., Surveyor interviewed Licensee A who stated that s/he had the ISP's. Licensee A said that the facility uses the case manager care plan. Licensee A stated that the case manager emails the ISP to the facility. Licensee A stated, "I am bad about printing the ISP's off." Licensee A stated that s/he would email the ISP to Surveyor. Surveyor asked that ISP be emailed by 06/23/2025 at 1:00 p.m. As of 06/23/2025 at 1:00 p.m., Surveyor had not received documentation of ISP. On 06/25/2025 at 1:31 p.m., Surveyor received an ISP dated for 04/01/2025 and a service agreement from Licensee A. Surveyor requested Licensee A send the previous ISP, dated 10/01/2024, to Surveyor by 06/26/2025 at 1:00 p.m. On 07/02/2025 at 11:02 a.m., Surveyor received an ISP from Case Manager C dated for 10/01/2024. Case Manager C acknowledged that s/he does send the plans to the facility via email.	M 504		