STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0019671	A. BUILDING: _____ B. WING _____	R-C 07/02/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ELLENS HOME OF PORT WASHINGTON	1800 GRANITE LANE PORT WASHINGTON, WI 53074

(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 06/20/2024, with information gathered through 07/02/2024, Surveyors investigated 3 complaints and conducted, a verification visit at Ellens Home of Port Washington. Three out of 3 complaints were substantiated and resulted in 3 new deficiencies. Six of 7 previous deficiencies were corrected. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 38	{N 000}		
N 164	83.12(4)(b) Reporting when law enforcement is called. A CBRF shall send a written report to the department within 3 working days after any of the following occurs: Any time law enforcement personnel are called to the CBRF as a result of an incident that jeopardizes the health, safety, or welfare of residents or employees. The CBRF ' s report to the department shall provide a description of the circumstances requiring the law enforcement intervention. This reporting requirement does not apply to residents under the jurisdiction of government correctional agencies. This Rule is not met as evidenced by: Based on record review and interview, the provider did not report to the department within 3 working days after law enforcement personnel were called to the facility. Findings include: On 04/22/2024, 05/23/2024, and 06/17/2024, the department received complaints alleging incidents occurred for which law enforcement	N 164		

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

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N 164	Continued From page 1 responded. On 06/20/2024, at approximately 1:06 PM, Surveyors interviewed Executive Director (ED A). ED A acknowledged awareness of an argument between Caregiver B and Caregiver C. ED A confirmed Caregiver B called the police department requesting law enforcement assistance. ED A acknowledged police personnel were at the facility and confirmed s/he did not submit a self-report to the Department because s/he didn't think the police came into the building to investigate. On 06/25/2024, at approximately 5:10 PM, Surveyors reviewed Officer F's Port Washington Police Department Incident Report, dated, 02/29/2024. The incident report noted Officer E and Lieutenant F investigated concerns and interviewed Caregiver B, Caregiver C, and Caregiver D, which resulted in Caregiver C being issued a disorderly conduct citation. On 07/02/2024, Surveyors reviewed department records and verified no self report was received regarding the law enforcement visit on 02/29/2024.	N 164		
{N 310}	83.29(2) Admission agreement include services, charges The admission agreement shall be given in writing and explained orally in the language of the prospective resident or legal representative. Admission is contingent on a person or that person ' s legal representative signing and dating an admission agreement. The admission agreement shall include all of the following: (a) An accurate description of the basic services	{N 310}		

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{N 310}	Continued From page 2	{N 310}		

provided, the rate charged for those services and the method of payment; (b) Information about all additional services offered, but not included in the basic services. The CBRF shall provide a written statement of the fees charged for each of these services; (c) The method for notifying residents of a change in charges for services; (d) Terms for resident notification to the CBRF of voluntary discharge. This paragraph does not apply to a resident in the custody of a government correctional agency; (e) Terms for refunding charges for services paid in advance, entrance fees, or security deposits in the case of transfer, death or voluntary or involuntary discharge; (f) A statement that the amount of the security deposit may not exceed one month ' s fees for services, if security deposit is collected; (g) Terms for holding and charging for a resident ' s room during a resident ' s temporary absence. This paragraph does not apply to a resident in the custody of a government correctional agency; (h) Reasons and notice requirements for involuntary discharge or transfer, including transfers within the CBRF. This paragraph does not apply to a resident in the custody of a government correctional agency.

This Rule is not met as evidenced by:
Based on interview and record review, the provider did not ensure the legal representative signed and dated the admission agreement at the time of admission for Resident 1.

This requirement is being cited for a second time. See Statements of Deficiency (SOD) R6OQ11, dated 03/13/2024.

Findings Include:

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{N 310}	Continued From page 3 On 06/18/2024, the department received a complaint alleging concerns with admission practices. On 06/20/2024, at 11:14AM, Surveyor interviewed Family Member E. Family Member E reported at the time of admission, s/he signed a document, but was unsure exactly what the document was. On 07/02/2024 at approximately 10:30AM, Surveyor reviewed Resident 1's admission agreement dated 02/26/2024. Family Member E printed and signed the document on the line designated for the healthcare power of attorney. On 06/28/2024 at 8:03AM, Surveyor reviewed the facesheet from Resident 1's record. The facesheet identified Resident 1 was admitted on 02/26/2024. The facesheet also identified Power of Attorney F (POA-F) was Resident 1's activated power of attorney. On 06/28/2024 at 9:11AM, Surveyor reviewed Resident 1's Power of Attorney For Health Care document, dated 02/23/2024. The document specified POA-F was designated Resident 1's power of attorney of healthcare and Family Member E was designated as the alternate. On 07/01/2024, Family Member E confirmed POA-F was Resident 1's activated power of attorney. On 07/01/2024 at 10:55AM, Surveyor interviewed Executive Director A (ED-A). ED-A expressed understanding the admission agreement needed to be signed by the activated power of attorney and not the alternate.	{N 310}		

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{N 310}	Continued From page 4 Cross Reference N0389 DHS 83.35(3)(d) Service Plans Updated Annually or on Changes	{N 310}		
N 389	83.35(3)(d) Service plans updated annually or on changes Individual service plan review. Annually or when there is a change in a resident ' s needs, abilities or physical or mental condition, the individual service plan shall be reviewed and revised based on the assessment under sub. (1). All reviews of the individual service plan shall include input from the resident or legal representative, case manager, resident care staff, and other service providers as appropriate. The resident or resident ' s legal representative shall sign the individual service plan, acknowledging their involvement in, understanding of and agreement with the individual service plan. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure the resident's legal representative signed the individual support plan (ISP), acknowledging their involvement in, understanding of, and agreement with the ISP for Resident 1. Resident 1's power of attorney did not sign the ISP. Findings Include: On 06/18/2024, the department received a complaint alleging Resident 1 did not have an ISP.	N 389		

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N 389	Continued From page 5 On 06/27/2024 at 9:00AM, Surveyor reviewed Resident 1's ISP dated 03/26/2024. The ISP was signed by Executive Director A on 03/26/2024. There were no other signatures on the ISP. On 06/28/2024 at 9:11AM, Surveyor reviewed Resident 1's Power of Attorney For Health Care document, dated 02/23/2024. The document specified POA-F was designated as Resident 1's power of attorney. On 06/28/2024 at 8:03AM, Surveyor reviewed the facesheet from Resident 1's record. The facesheet identified Power of Attorney F (POA-F) was Resident 1's activated power of attorney. On 07/01/2024, at 10:55AM, Surveyor interviewed Executive Director A (ED-A). ED-A explained s/he intended to have the ISP signed and will ensure signatures are obtained more timely in the future. Cross Reference N0389 DHS 83.29(2) Admission Agreement Include Service Charges	N 389		
N 415	83.37(2)(d) Documentation of medication administration. Documentation of medication administration. As required under s. DHS 83.42(1)(o), at the time of medication administration, the person administering the medication or treatment shall document in the resident record the name, dosage, date and time of medication taken or treatments performed and initial the medication administration record. Any side effects observed by the employee or symptoms reported by the resident shall be documented. The need for any PRN medication and the resident ' s response	N 415		

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N 415	Continued From page 6 shall be documented. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure, at the time of medication administration, the person administering the medication initialed the medication record. Findings Include: On 06/18/2024, the department received a complaint alleging a resident was not administered medications. On 07/01/2024, Surveyor reviewed Resident 1's February, May and June 2024 medication administration records. Surveyor noted there were dates where medications were not initialed by the person administering. The dates and medications were as follows: Melatonin 3mg - Take 2 tabs by mouth once daily at bedtime: 02/26/2024 and 06/03/2024 Memantine 10mg - Take 1 tab by mouth twice daily: AM Dose: 06/15/2024 and 06/03/2024 Mirtazapine 45mg - Take 1 tab by mouth once daily at bedtime: 02/26/2024 Acetaminophen 500mg - take 2 tabs by mouth twice daily for pain/fever: AM Dose: 05/03/2024, 05/04/2024, and 05/05/2024 PM Dose: 05/04/2024, 05/05/2024, and	N 415		

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N 415	Continued From page 7 06/03/2024 On 06/28/2024 at 8:00AM, Surveyors interviewed Executive Director A (ED-A) regarding missing initials on the MARs. ED-A acknowledged the findings and reported s/he met with medication passers and discussed the importance of documentation.	N 415		