

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0017530	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 07/11/2023
NAME OF PROVIDER OR SUPPLIER CORNERSTONE OF OAK CREEK		STREET ADDRESS, CITY, STATE, ZIP CODE 155 W SUNNYVIEW DR OAK CREEK, WI 53154		
(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
U 000	INITIAL COMMENTS On 07/11/2023, Surveyor completed 2 complaint surveys at Cornerstone of Oak Creek. One of 2 complaints was unsubstantiated. One of 2 complaints was substantiated. Two deficiencies were identified. Census: 35	U 000		
U 200	89.28(2)(a)1. RISK AGREEMENT (2) CONTENT. A risk agreement shall identify and state all of the following: (a) Risk to tenants. 1. Any situation or condition which is or should be known to the facility which involves a course of action taken or desired to be taken by the tenant contrary to the practice or advise of the facility and which could put the tenant at risk of harm or injury. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not enter into a risk agreement when a situation or condition which was or should have been known to the facility could put the tenant at risk of harm or injury for 1 (Tenant 1) of 1 tenant reviewed. Tenant 1 did not have a risk agreement for Tenant 1's risk of refusing housekeeping. Findings include: On 05/19/2023, the Department received a	U 200		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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U 200	Continued From page 1 complaint alleging a tenant's apartment was not being cleaned. On 07/06/2023 at approximately 2:50 p.m., Surveyor toured Tenant 1's apartment. Surveyor observed numerous gnats flying in Tenant 1's apartment, on the kitchen counter, the bathroom door, walls, and counter. Surveyor observed debris in Tenant 1's living room, bedroom, and kitchen. Surveyor observed an unknown purple substance spilled on the kitchen floor. Surveyor observed food crumbs on the kitchen and bedroom floor. On 07/06/2023, Surveyor reviewed Tenant 1's record. Tenant 1 was admitted on 10/09/2019. Surveyor reviewed Tenant 1's progress notes from March 2023 to July 6, 2023. The progress report indicated Tenant 1 refused housekeeping 5 times in March 2023, 6 times in April 2023, 9 times in May 2023 and 1 time in July 2023. The records provided to Surveyor from Tenant 1's file did not contain a risk agreement for Tenant 1's continued refusal of housekeeping. On 07/10/2023 at 11:34 a.m. through e-mail correspondence with Executive Director (ED) A, ED A informed Surveyor, "...We have looked everywhere and cannot find the risk agreements ..."	U 200		
U 272	89.35(3) GRIEVANCES Written Summary. (3) The residential care apartment complex shall provide a written summary of the grievance, findings, conclusions and any action taken as a	U 272		

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U 272	Continued From page 2 result of the grievance to the tenant, the tenant's designated representative, if any, and, for tenants whose services are funded under s. 46.277, Stats., the county department or aging unit designated to administer the medical assistance waiver. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure a grievance filed on behalf of 1 of 1 tenant (Tenant 2) was responded to in writing with a summary of the grievance, findings, conclusions, and actions taken. Findings include: On 07/06/2023 at approximately 1:35 p.m., Surveyor completed an onsite tour of Cornerstone Of Oak Creek. During Surveyor's onsite tour, Surveyor completed an interview with Tenant 2. Tenant 2 reported filing a grievance on February 13, 2023. Tenant 2 denied having a knowledge of the steps taken, conclusion or actions that were taken. Tenant 2 denied receiving a written summary of the grievance, findings, conclusions, and actions taken. On 07/11/2023, Surveyor reviewed Tenant 2's record. Tenant 2 was admitted on 08/05/2021. Surveyor reviewed Tenant 2's "Resident/Family Concern/Grievance Form," with a received date of 02/13/2023. The form had a total of 4 sections. The form reported, "...Section 1. Nature of Concern: Safety, intimidation, residents cannot control temper or behavior. Even tho [sic] the assaulted resident tried to de-escalate 7-10 times. 1 staff member heard entire incident (Staff member B) 2nd staff member heard partial amounts (Staff member C)." "Section 2. All	U 272		

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U 272	Continued From page 3 Concerns must be referred to Administrator or North Oak Senior Living Action Taken," "Section 3. Follow up must be made with the resident and/or individual that voiced/wrote the concern," and "Section 4: Additional Review/Follow Up" were blank. Surveyor observed no signatures from the provider and/or Tenant 2 on the form. On 07/11/2023, Surveyor reviewed Cornerstone of Oak Creek's grievance policy. The policy stated, " ...2.e. The Administrator must provide the resident or representative with a written summary of the grievance, investigation, conclusions, and actions taken. The document must be signed by the resident or representative ...and kept on file ..." On 07/06/2023 at approximately 3:00 p.m., Surveyor interviewed Administrator A. Administrator A reporting providing a verbal report of the investigation, conclusion and actions taken to Tenant 2 and Tenant's care team. Administrator A denied providing a written summary of the grievance, findings, conclusions, and actions taken. Administrator A was under the impression that a verbal report was sufficient.	U 272			