STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0014804	A. BUILDING: _____ B. WING _____	06/30/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CHARTER SENIOR LIVING RCAC- VERONA	1125 N EDGE TRAIL VERONA, WI 53593

(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 06/30/2025, Surveyor conducted a standard survey at Charter Senior Living RCAC Verona, a RCAC in Verona. Three deficiencies were identified. One deficiency was a repeat deficiency - See Statement of Deficiency (SOD) ZQ8D11, dated 01/07/2022 and SOD MX5O11, dated 09/14/2022. Census: 25	U 000		
U 134	89.23(4)(d)1. SERVICES PROVIDER QUALIFICATIONS. Staff training. All facility staff shall have training in safety procedures, including fire safety, first aid, universal precautions and the facility's emergency plan, and in the facility's policies and procedures relating to tenant rights. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 3 caregivers reviewed had training in safety procedures, including first aid and fire safety. Caregiver C had not received training in first aid and did not receive fire safety training until s/he had been working as a caregiver for 5 months. Findings include: On 06/30/2025 at 11:45 a.m., Surveyor reviewed	U 134		

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

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U 134	Continued From page 1 employee records provided by Executive Director A. The record of Caregiver C indicated s/he was hired on 01/02/2025. The record did not include first aid training and documented that s/he received fire safety training on 06/16/2025, greater than 5 months after s/he had been hired. On 06/30/2025 at 12:30 p.m., Surveyor interviewed Executive Director A and asked if s/he had documentation of additional trainings for Caregiver C. Executive Director A stated Caregiver C did not have additional trainings because s/he only worked every other weekend up until 06/01/2025 when s/he went full-time due to being on college break. Executive Director A acknowledged first aid had not been received and fire safety was received late. On 06/30/2025 at approximately 12:45 p.m., Surveyor interviewed Caregiver C, who was working as a caregiver that day. Surveyor asked Caregiver C about his/her orientation and trainings. Caregiver C stated s/he couldn't recall the specifics of his/her trainings received early on, but that the provider was working on getting him/her scheduled for CBRF trainings, including first aid, in the near future. Caregiver C denied having health care related trainings prior to his/her hire with the provider.	U 134		
U 189	89.28(1) Risk Agreement (1) REQUIREMENT As a protection for both the individual tenant and the residential care apartment complex, a residential care apartment complex shall enter into a signed, jointly negotiated risk agreement with each tenant	U 189		

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U 189	Continued From page 2 by the date of occupancy. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 3 tenants reviewed entered into a signed, jointly negotiated risk agreement by the date of occupancy. Tenant 1 did not have signed risk agreements. This is a repeat deficiency. See Statement of Deficiency (SOD) ZQ8D11, dated 01/07/2022 and SOD MX5O11, dated 09/14/2022. Findings include: On 06/30/2025 at approximately 11:30 a.m., Surveyor reviewed Tenant 1's record. Tenant 1 was admitted to the provider's complex on 06/23/2025. Tenant 1's service plan, dated 06/23/2025, indicated s/he was diabetic, had occasional weeping sores to the lower extremities and required catheter cares. Tenant 1's record did not include risk agreements. On 06/30/2025 at approximately 12:30 p.m., Surveyor reviewed concern with Executive Director A and Health and Wellness Director B that Tenant 1's record did not include risk agreements. Health and Wellness Director B confirmed Surveyor's observation and stated the provider had yet to complete risk agreements with Tenant 1.	U 189		
U 211	89.28(6) RISK AGREEMENT UPDATING. The risk agreement shall be updated when the tenant's condition or service needs change in a way that may affect risk, as indicated by a review	U 211		

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U 211	Continued From page 3	U 211		

and update of the comprehensive assessment, by a change in the service agreement or at the request of the tenant or facility.

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure 1 of 2 tenants reviewed had an updated risk agreement. Tenant 2 did not have a risk agreement regarding his/her diabetic non-compliance.

Findings include:

On 06/30/2025 at approximately 11:30 a.m., Surveyor reviewed Tenant 2's record. Tenant 2 was admitted to the provider's complex on 02/28/2024. Tenant 2's service plan, dated 03/25/2025, indicated s/he was non-compliant with a diabetic diet, chose to eat what s/he wanted and required wellness checks 4 times per shift due to uncontrolled diabetes. Tenant 2's record included a risk agreement, dated 02/28/2024, that included the following risks: provider does not provide 1:1 care, provider's unable to guarantee that they can always prevent another tenant from engaging in physical contact with another tenant, falls, skin breakdown, wandering and elopements and inability to guarantee the safety of tenant's personal property.

On 06/30/2025 at approximately 12:30 p.m., Surveyor reviewed concern with Executive Director A and Health and Wellness Director B that Tenant 2's risk agreements did not appear to be individualized and asked if Tenant 2 had a risk agreement that included his/her non-compliance with diabetic management. Executive Director A replied, "No," and explained that risk agreements

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U 211	Continued From page 4 were not individualized. Health and Wellness Director B explained that management was new to the complex and that changes were coming.	U 211		