STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016746	A. BUILDING: _____ B. WING _____	C 12/13/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PATRIOT PLACE RCAC	609 BROADWAY STREET BERLIN, WI 54923

(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 12/06/2023, Surveyor conducted an unannounced facility visit to investigate 2 complaints. Additional information was received through 12/13/2023. Two (2) of 2 complaints were substantiated and one deficiency identified. Census: 55 apartments	U 000		
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 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 observation, record review and interview, the provider did not ensure the risk agreement was updated when Tenant 1's condition or service needs changed in a way that affected risk. Findings include: The Department received 2 complaints that alleged concerns with fall prevention. On 12/06/2023 at 9:11 AM, Surveyor interviewed Tenant 1. Surveyor observed s/he was wearing a brace on his/her left ankle. Tenant 1 told Surveyor s/he experienced a fall a few months ago, broke his/her ankle and had continued weakness as a result of the fall. Tenant 1 said, "I never fell in my life before that, they didn't know...Now I try to do things on my own. I don't want to be dependant	U 211		

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

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U 211	Continued From page 1	U 211		

on anybody." Tenant 1 said if s/he calls for assistance, "They come and help me to the washroom...Sometimes I try to do it on my own. I feel there's sicker people than me. But sometimes I think I'm not going to make it, I better call."

On 12/06/2023, Surveyor returned to Tenant 1's room at 12:08 PM. Surveyor observed Tenant 1 in his/her recliner with the foot rest up. Tenant 1 said, "I was just about to go to the restroom. I think I can go alone, sometimes I can sneak a little but...I hate bothering them all the time. I feel funny (calling) because they are (busy) helping with lunch." Surveyor observed Tenant 1 struggle to get the foot rest down and suggested twice Tenant 1 use the call pendant. Tenant 1 activated the pendant at 12:10 PM and Caregiver B arrived at 12:12 PM. Caregiver B assisted Tenant 1 with the transfer and stood by while Tenant 1 ambulated to the restroom with his/her walker.

On 12/06/2023 at 1:06 PM, Surveyor interviewed Caregiver C. S/he said Tenant 1 needed staff assistance with transfers and ambulation to prevent falls, but Tenant 1 had a tendency not to call for assistance because s/he didn't want to be a bother.

Surveyor reviewed Tenant 1's facility records (including service plan, assessments, incident reports and observation notes) and noted the following:
Tenant 1 was admitted on 08/01/2023, was elderly and ambulated with a walker.
Fall risk assessment completed 08/01/2023 gave numeric values for risk factors. Tenant 1's score was 8 and anything over 10 indicated high risk for potential falls. The assessment documented 0 falls in the past 3 months.

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U 211	Continued From page 2	U 211		

08/19/2023 - Tenant 1 had an unwitnessed fall in his/her bathroom and sustained a bump on his/her head and a fractured ankle. S/he was admitted to the hospital for surgery and transferred to a skilled nursing facility for rehabilitation.
09/15/2023 - Tenant 1 returned to the facility. The service plan was updated based on assessment to reflect the increased risk for falls and the need for staff assistance for all transfers and mobility. The service plan was silent to Tenant 1's tendency to self-transfer or the services the staff would provide to try to mitigate the risk.
Observation notes between 09/15/2023 and 12/11/2023 (date of discharge) documented episodes of weakness and confusion and times when s/he self-transferred.
10/01/2023 - Tenant 1 had a 2nd unwitnessed fall.
11/12/2023 - Tenant 1 had a 3rd unwitnessed fall while attempting to self-transfer out of his/her wheelchair.

Tenant 1's record did not contain an updated risk agreement after s/he started experiencing falls or demonstrating a tendency to self-transfer instead of calling for staff assistance.

On 12/06/2023 at approximately 2:00 PM, Surveyor interviewed Director A. Director A confirmed Tenant 1 had at least 3 documented falls since admission and continued to be at risk for falls in part because s/he does not consistently call for staff assistance with transfers and ambulation. Director A said their process is to have all tenants sign a risk agreement specific to falls upon admission but s/he could not locate the signed form in Tenant 1's record. Director A showed Surveyor a sample of the admission fall risk agreement and confirmed it is used for all

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U 211	Continued From page 3 tenants, regardless of whether they are a fall risk. Director A did not describe a process of developing risk agreements based on the individualized conditions and needs of tenants that may impact their risk.	U 211		