STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	310022	A. BUILDING: _____ B. WING _____	07/27/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PARSONS HOUSE	2930 N 25TH ST MILWAUKEE, WI 53206

(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 07/27/2023, Surveyor concluded a standard survey at Parsons House. As a result, 3 deficient practices were identified. Census: 35	N 000		
N 200	83.14(2)(e) Notify within 7 days of administrator change The licensee shall notify the department within 7 days after there is a change in the administrator. This Rule is not met as evidenced by: Based on interview and record review, the provider did not notify the Department of a change in Administrator. Administrator D reported s/he became employed as administrator of the facility in April 2023. Findings include: On 07/27/2023, at 3:00 PM, Surveyor interviewed Administrator D. Administrator D reported s/he was employed with the provider prior to becoming the administrator. Administrator D reported s/he began transitioning into the administrator role in April 2023 after Former Administrator E left employment with the provider on March 31, 2023. Surveyor inquired if notification was made to the Department regarding the change in administrator. Administrator D stated, "No, probably not. [Former Administrator E] left me a list of things to do, that was not on my list. I will get a letter sent over." On 07/26/2023, Surveyor reviewed Department records and found no evidence the provider submitted notification to the Department of the change in administrator.	N 200		

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

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N 239	83.20(2)(a)-(d) Department-approved training courses. Standard Precautions. All employees who may be occupationally exposed to blood, body fluids or other moist body substances, including mucous membranes, non-intact skin, secretions, and excretions except sweat, whether or not they contain visible blood shall successfully complete training in standard precautions before the employee assumes any responsibilities that may expose the employee to such material. Fire safety. Within 90 days after starting employment, all employees shall successfully complete training in fire safety. First aid and choking. Within 90 days after starting employment, all employees shall successfully complete training in first aid and procedures to alleviate choking. Medication administration and management. Any employee who manages, administers or assists residents with prescribed or over-the-counter medications shall complete training in medication administration and management prior to assuming these job duties. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 employees obtained all department approved training as required. Resident Monitor B did not receive training in first aid and choking within 90 days after starting employment. Resident Monitor C did not receive training in fire safety within 90 days after starting employment.	N 239		

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N 239	Continued From page 2 Findings include: On 07/18/2023, at 3:00 PM, Surveyor reviewed employee records and identified the following: Resident Monitor B was hired 10/16/2019. Resident Monitor B's record did not contain evidence of training or evidence of meeting an exemption for first aid and choking. Resident Monitor C was hired 11/10/2022. Resident Monitor C's record did not contain evidence of training or evidence of meeting an exemption for fire safety. On 07/18/2023, at 4:00 PM, Surveyor verified Resident Monitor B was not on the Community-Based Care and Treatment training registry for first aid and choking. Surveyor verified Resident Monitor C was not on the Community-Based Care and Treatment training registry for fire safety. On 07/26/2023, at 1:00 PM, Surveyor interviewed Director A. Director A confirmed staff needed to complete trainings but was unaware the trainings needed to be completed within 90 days. Director A reported trainings were conducted in the facility during orientation. Director A was unaware Resident Monitor B and Resident Monitor C were not on the Community-Based Care and Treatment training registry.	N 239		
N 277	83.25 Continuing education The administrator and resident care staff shall receive at least 15 hours per calendar year of continuing education beginning with the first full calendar year of employment. Continuing	N 277		

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N 277	Continued From page 3 education shall be relevant to the job responsibilities and shall include, at a minimum, all of the following: (1) Standard precautions; (2) Client group related training; (3) Medications; (4) Resident rights; (5) Prevention and reporting of abuse, neglect and misappropriation; (6) Fire safety and emergency procedures, including first aid. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 employee completed at least 15 hours of continuing education in 2021 and 2022. Resident Monitor B received 6.75 hours of continuing education training in 2021 and 6 hours of continuing education training in 2022. Findings include: On 07/18/2023, at 3:00 PM, Surveyor reviewed Resident Monitor B's record. Resident Monitor B was hired 10/16/2019. Resident Monitor B received the following trainings in 2021: Supervising Offenders Verbal Communication Skills, Health Insurance Portability and Accountability Act (HIPAA) and Behavioral Health, Offender Rights Part 2 Conditions of Confinement, Fire Safety, Cardiopulmonary Resuscitation (CPR) Refresher, and Blood-Borne Pathogens. Resident Monitor B received a total of 6.75 continuing education hours in 2021. Resident Monitor B received the following trainings in 2022: Prison Rope Elimination Act (PREA) Dynamics of Sexual Abuse in Correctional Systems, Preventing and	N 277		

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N 277	Continued From page 4 Responding to Emergencies in Correctional Facilities, First Aid, Cultural Awareness in Corrections, and Blood-Borne Pathogens. Resident Monitor B received a total of 6 continuing education hours in 2022. On 07/26/2023, at 1:00 PM, Surveyor interviewed Director A. Director A reported s/he was unaware of the 15 hours of annual continuing education training staff needed to complete annually.	N 277		