STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0014805	A. BUILDING: _____ B. WING _____	C 08/02/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CHARTER SENIOR LIVING CBRF-VERONA	143 PRAIRIE OAKS DRIVE 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
N 000	Initial Comments On 08/01/2024, Surveyor conducted a complaint investigation at Charter Senior Living CBRF, a CBRF located in Verona, WI. As a result of the investigation, 3 violations of Chapter DHS 83 were issued. The complaint was unsubstantiated.	N 000		
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.	N 239		

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

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N 239	Continued From page 1 This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that Caregiver B completed training in first aid and choking. There was no documentation in Caregiver B's employee file confirming completion of training in first aid and choking. Findings include: On 07/31/2024 at 10:00 AM, Surveyor requested the employee file for Caregiver B, hired 09/05/2023 to ensure compliance with Department Approved Training. Caregiver B's file did not include evidence that Caregiver B had completed training in first aid and choking. There was no evidence in Caregiver B's file of an exemption that would exempt Caregiver B from training in first aid and choking. On 07/31/2024 at 10:15 AM Surveyor checked the Wisconsin Community Based Care and Treatment Registry and confirmed that Caregiver B was not on the registry for first aid and choking. On 07/31/2024 at 1:15 PM, Surveyor discussed the above concern with Administrator A. Administrator A acknowledged that all employees must complete training in first aid and choking within 90 of hire. Administrator A acknowledged that Caregiver B does not appear on the Wisconsin Community Based Care and Treatment Registry for first aid and choking.	N 239		
N 243	83.21(1)-(3) All employee training. The CBRF shall provide, obtain or otherwise	N 243		

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N 243	Continued From page 2 ensure adequate training for all employees in all of the following: Resident rights. Training shall include general rights of residents including rights as specified under s. DHS 83.32(3). Training shall be provided as applicable under ss. 50.09 and 51.61 and chs. 54, 55, and 304, Stats., and ch. DHS 94, depending on the legal status of the resident or service the resident is receiving. Specific training topics shall include house rules, coercion, retaliation, confidentiality, restraints, self-determination, and the CBRF ' s complaint and grievance procedures. Residents ' rights training shall be completed within 90 days after starting employment. Client Group. Training shall be specific to the client group served and shall include the physical, social and mental health needs of the client group. Specific training topics shall include, as applicable: characteristics of the client group served, activities, safety risks, environmental considerations, disease processes, communication skills, nutritional needs, and vocational abilities. Client group specific training shall be completed within 90 days after starting employment. Client Group. In a CBRF serving more than one client group, employees shall receive training for each client group. Recognizing, preventing, managing, and responding to challenging behaviors. Specific training topics shall include, as applicable: elopement, aggressive behaviors, destruction of property, suicide prevention, self-injurious behavior, resident supervision, and changes in condition. Challenging behaviors training shall be completed within 90 days after starting employment.	N 243		

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N 243	Continued From page 3	N 243		

This Rule is not met as evidenced by:
Based on interview and record review, the provider did not ensure 1 of 3 employees reviewed obtained all training as required within 90 days after starting employment.

Caregiver C did not have training in recognizing, preventing, managing, and responding to challenging behaviors or client groups within 90 days after starting employment.

Findings include:

On 07/31/2024, Surveyor conducted a review of 3 employees to verify compliance with all employee training requirements. Surveyor requested training records from Administrator A for Caregiver C.

Recognizing, Preventing, Managing, and Responding to Challenging Behaviors

The record for Caregiver C, hired on 04/01/2024, did not contain evidence of training or evidence of meeting an exemption for challenging behaviors training.

On 07/31/2024, at approximately 10:45 a.m., Surveyor interviewed Administrator A. Administrator A confirmed the provider did not have evidence that Caregiver C completed or met an exemption for challenging behaviors training.

Client Group

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N 243	Continued From page 4 The facility is licensed to provide care and services to residents within the client groups of Irreversible Dementia/Alzheimer's. The record for Caregiver C, hired on 04/01/2024, did not contain evidence of training or evidence of meeting an exemption for client group training. On 07/31/2024 at approximately 10:45 a.m., Surveyor interviewed Administrator A. Administrator A confirmed the provider did not have evidence that Caregiver C completed or met an exemption for client group training.	N 243		
N 348	83.32(3)(d) Rights of Residents: Free from mistreatment In addition to the rights under s. 50.09, Stats., each resident shall have all of the following rights: Freedom from mistreatment. Be free from physical, sexual and mental abuse and neglect, and from financial exploitation and misappropriation of property. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that Resident 1 was free from mistreatment. On or around 07/09/2024, Resident 1 was subject to physical and verbal mistreatment by Former Caregiver D. Findings include: On 07/27/2024, the Department received a complaint alleging possible staff abuse towards a	N 348		

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N 348	Continued From page 5 resident on or around 07/09/2024. On 07/31/2024 at 9:00 AM, Surveyor reviewed Resident 1's medical record. Resident 1 was admitted 04/30/2024 with primary diagnoses that include but are not limited to: senile nuclear sclerosis, mixed Alzheimer's and vascular dementia. Resident 1's Individual Service Plan (ISP) dated 05/21/2024 identified Resident 1 as a fall risk and needing 1 staff assist with: dressing, hygiene, bathing, transfers and toileting. Staff were directed to perform safety checks 4 times or more per shift. An assessment dated 05/21/2024 indicated that Resident 1 was in need of total physical assistance with activities of daily living (ADL) including toileting and hygiene. On 07/31/2024 at 9:30 AM, Surveyor requested documentation regarding the incident on 07/09/2024. A written statement dated 07/12/2024 by Caregiver B documented they had witnessed abuse of Resident 1 by Former Caregiver D. Former Caregiver D was witnessed, "slamming Resident 1 in the bed and then called Resident 1 a [explicative] several times." Caregiver B also noted that the day before witnessing this, Resident 1 reported that someone had punched him/her in the head. A written statement dated 07/12/2024 by Caregiver C documented they had witnessed abuse of Resident 1 by Former Caregiver D. Former Caregiver D was witnessed calling Resident 1 a [explicative] because Resident 1 took too long using the bathroom. Caregiver C noted that Former Caregiver D was often very physically rough with Resident 1 and, "literally pushed Resident 1's legs in the bed."	N 348		

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N 348	Continued From page 6 On 07/31/2024 at 9:45 AM, Surveyor attempted to interview Resident 1. Resident 1 was unable to respond to questions due to his/her medical condition. On 07/31/2024 at 10:00 AM, Surveyor interviewed Administrator A who stated that an assessment was done after the alleged abuse occurred, but no significant injuries were found and through interviewing Caregiver B and Caregiver C, both of whom are credible, it was deemed likely that the abuse occurred. Administrator A made 2 attempts to interview and get a written statement from Former Caregiver D but Former Caregiver D refused. Former Caregiver D stated that s/he does not always know his/her own strength and apologized. Administrator A stated that Former Caregiver D quit verbally over the phone and his/her employment was officially terminated as of 07/18/2024.	N 348		