

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0012417	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 03/26/2024
NAME OF PROVIDER OR SUPPLIER PINE VIEW I		STREET ADDRESS, CITY, STATE, ZIP CODE 4525 N 76TH ST MILWAUKEE, WI 53218		
(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
M 000	INITIAL COMMENTS On 03/20/2024, with information gathered through 03/26/2024, Surveyors conducted a standard survey and 1 complaint investigation at Pine View I. One complaint was unsubstantiated. One deficient practice was identified. One of 1 deficient practice was a repeat deficiency. See Statement of Deficiency 6XDK11, dated 02/04/2022. Census: 3	M 000		
M 514	88.09(2)(a) SERVICE PROVIDER RECORD Service provider record. The licensee shall maintain and keep up to date a separate personnel record for each service provider. The licensee shall ensure that all service provider records are adequately safeguarded against destruction, loss or unauthorized use. A service provider record shall include all of the following: This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure service provider records contained documentation of successful completion of training requirements under DHS 88.04(5)(b) for 2 of 2 caregivers (Caregivers B and C). Caregiver B and Caregiver C's records did not include evidence of 8 hours of annual training approved by the licensing agency related to the health, safety, welfare, rights, and treatment of residents for 2022 and 2023.	M 514		

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

TITLE

(X6) DATE

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M 514	Continued From page 1 Wis. Admin Code § DHS 88.04(5)(b) states, "Training...(b) Except as provided in pars. (c) and (d), the licensee and each service provider shall complete 8 hours of training approved by the licensing agency related to the health, safety, welfare, rights and treatment of residents every year beginning with the calendar year after the year in which the initial training is received." This is a repeat deficiency. See SOD 6XDK11 dated 02/04/2022. Findings include: On 03/20/2024, Surveyors reviewed staff records and identified the following: Caregiver B's record did not include 8 hours of annual training for 2022 or 2023. Caregiver C's record did not include 8 hours of annual training for 2022 or 2023. On 03/20/2024, at 1:10 p.m., Surveyors interviewed Administrator A. Administrator A confirmed the records at the facility did not include training documentation. Administrator A stated, "I will find the records and send them to you." Administrator A confirmed training was conducted for Caregivers B and C. On 03/21/2024, at 11:35 a.m., Surveyor received an email from Administrator A which read, "I will have that information sent soon." As of 03/26/2024 at 8:30 a.m., no records had been received.	M 514		