STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017664	A. BUILDING: _____ B. WING _____	07/19/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PLANE VIEW	7715 AIRPORT RD SIREN, WI 54872

(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 07/19/2023, Surveyor conducted a standard survey at Plane View. Two deficiencies were identified. Census: 2	M 000		
M 466	88.07(3)(e)1 MEDICATION- RECORD KEEPING The licensee shall keep a record of all prescription medications controlled, dispensed or administered by the licensee which show the name of the resident, the name of the particular medication, the date and time the resident took the medication and errors and omissions. The medication controlled by the licensee shall be kept in a locked place. This Rule is not met as evidenced by: Based on record review and interview, the provider did not maintain a record of all medication administered to Resident 1. Findings include: On 07/19/2023, Surveyor reviewed Resident 1's record. Resident 1 was admitted to the facility on 07/19/2021. His/her record indicated s/he was prescribed 10 scheduled medications and 13 as-needed medications, which staff administered. Resident 1's July medication administration record (MAR) was not complete. There were blanks on the MAR between 07/07/2023 and 07/18/2023. There was no record that Resident	M 466		

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

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M 466	Continued From page 1 1's medications were administered at the following times: - 07/07/2023 at 8:00 PM; medications scheduled at this time included hydroxyzine, topiramate, and risperidone - 07/09/2023 at 8:00 AM; Zovia was scheduled at this time - 07/09/2023 at 5:00 PM; famotidine was scheduled at this time - 07/14/2023 at 8:00 AM; Zovia was scheduled at this time A controlled substance count sheet indicated medication was removed from Resident 1's lorazepam supply on 07/09/2023, 07/10/2023, and 07/14/2023, but Resident 1's July MAR did not indicate medication was administered on these dates. At approximately 3:10 PM, Surveyor interviewed Licensee A. Licensee A reviewed Resident 1's MAR and medications and indicated Resident 1's medications were given per orders on all of the dates listed above, but staff failed to document the administrations.	M 466		
M 570	88.10(3)(l) Safe Physical Environment Individuals, except for correctional residents, have basic rights which they do not lose when they enter an adult family home. A resident shall have a safe environment in which to live. The adult family home shall safeguard residents who cannot fully guard themselves from environmental hazards to which they are likely to be exposed, including conditions which would be hazardous to anyone and conditions which would be or are hazardous to a particular resident	M 570		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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M 570	Continued From page 2 because of the resident's condition or disability. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure a safe environment for residents. Water temperature at the bathroom faucet was hot enough to cause injury. Findings include: Exposure to hot water is a potential environmental danger for clients. Elderly clients and clients with mental and physical disabilities may have neurological conditions that prevent instant recoil from hot water. Because these individuals do not instantly react to dangerous temperature levels, they are at particular risk for injury. Hot water can cause scalding, e.g., second and third degree burns in which the skin blisters and swells. In such instances, skin does not return to normal and forms scar tissue upon healing. These burns may lead to permanent disability. (DQA publication P-01942, Hot Water Temperatures in Adult Family Homes, 08/2017). The provider is licensed to care for 4 adults with developmental and/or mental health disabilities. On 07/19/2023 at approximately 3:15 PM, Surveyor measured the water temperature at the bathroom sink to be 122.5 degrees Fahrenheit. Surveyor asked Licensee A if they monitored water temperatures. Licensee A stated they checked temperatures twice a year to ensure they were below 120 degrees.	M 570		