STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016388	A. BUILDING: _____ B. WING _____	C 10/15/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OPEN ARMS 20 LLC TAYLOR	3200 TAYLOR RACINE, WI 53405

(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 10/15/2025, Surveyors completed 2 complaint investigations at Open Arms 20 Taylor LLC. As a result, 2 deficiencies were identified, 1 complaint was substantiated, and 1 complaint was unsubstantiated. Census: 3	M 000		
M 424	88.06(3)(f) REVIEW OF ISP The individual service plan shall be reviewed at least once every 6 months by the licensee, the resident or the resident's guardian, the service coordinator, if any, the designated representative, if any, the placing agency with the resident participating in a manner appropriate for the resident's level of understanding and method of communication. This review is to determine continued appropriateness of the plan and to update the plan as necessary. A plan shall be updated, in writing, whenever the resident's needs or preferences change substantially or when requested by the resident or the resident's guardian. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 resident's (Resident 1) individual service plan (ISP) was reviewed updated with changes. Resident 1 exhibited aggressive behaviors which were not included in their ISP.	M 424		

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

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M 424	Continued From page 1 Findings include: Record Review On 10/15/2025, at 9:50 AM, Surveyors reviewed Resident 1's record. Resident 1 was admitted on 06/03/2024, with diagnoses including congestive heart failure (CHF), hemiplegia, and stroke. Resident 1's current ISP dated, 08/15/2025, indicated the following: - Mental & Emotional Health "... Interaction with Household (Roommates/Staff) - Positive Comments: Staff will make sure [Resident 1] is not displaying any communication negativly [sic] with the other members in the house..." - Behavioral Patterns Aggressive Behavior - Non-Applicable Combative Behavior - Non- Applicable Choking w/ Meals - Non- Applicable Self-Destructive Behavior - Non- Applicable Wandering - Non- Applicable Elopement - Non- Applicable Suicidal Attempts - Non- Applicable Incident Reports - 06/17/2025 - Resident 1 was accusatory towards staff, swore at staff, and was "threatening other residents [s/he] was going to beat them up" - 09/25/2025 - Resident 1 was using the bathroom and became verbally aggressive, got in staff members face, and pushed staff. - 09/27/2025 - Resident 1 was smoking a metal pipe outside of the adult family home and staff informed her/him it was not allowed. House	M 424		

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M 424	Continued From page 2	M 424		

manager was contacted.
- 09/29/2025 - Resident 1 became upset with staff and threw her/his meds at a caregiver.
- 10/10/2025 - Resident 1 had verbal aggressions toward staff.
- 10/11/2025 - Resident 1 had verbal aggressions toward staff and threatened to beat up a caregiver.

Interviews
On 10/15/2025, at 9:15 AM, Surveyors interviewed Caregiver C. Caregiver C reported Resident 1 cursed at Caregiver C, called her/him names, and had physically shoved her/him. Caregiver C reported Resident 1 bullied Resident 2 and Resident 3. Caregiver C reported Resident 2 had witnessed multiple incidents which involved Resident 1 being verbally aggressive towards staff and other residents. Caregiver C reported Resident 2 would stay in her/his room to avoid Resident 1. Caregiver C reported Resident 1 smokes marijuana and drinks alcohol. Caregiver C reported management was notified of Resident 1's behaviors multiple times and nothing had been done.

On 10/15/2025, at approximately 9:50 AM, Surveyors interviewed Resident 2. Resident 2 reported s/he had "been harassed by [Resident 1]." Resident 2 reported s/he had witnessed Resident 1 harassing other residents and Caregiver C. Resident 2 reported s/he stayed in her/his room more because of Resident 1's behaviors. Resident 2 reported Resident 1's behaviors were ongoing for approximately 6 months. Resident 2 reported Resident 1's behaviors were "getting worse" and s/he "feels less safe" in the facility. Resident 2 reported s/he had notified the prior house manager, the current house manager, and Administrator B of her/his

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M 424	Continued From page 3 concerns and "nothing has been done." On 10/15/2025, at 11:35 AM, Surveyors interviewed Executive Director (ED) A and Administrator B. Administrator B reported s/he was responsible for updating residents' ISPs. Surveyors inquired why Resident 1's behaviors were not updated in her/his ISP. Administrator B and ED A reported the only behaviors Resident 1 had at admission were related to smoking in her/his room. Administrator B and ED A reported they were unaware of Resident 1's current behavior issues. Surveyors inquired who was responsible for reviewing incident reports for residents. Administrator B reported it was the house managers responsibility to send the incident reports to management and s/he would review the incident reports. Surveyors relayed concerns of Resident 1's increased behaviors based on incident reports. ED A and Administrator B acknowledged Surveyors concerns. ED A reported an investigation of Resident 1's behaviors would be conducted. ED A and Administrator reported Resident 1 would be moved to a sister facility on November 1, 2025.	M 424		
M 548	88.10(3)(a) Fair Treatment Fair treatment. To be treated with courtesy, respect and full recognition of the resident's dignity and individuality. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure each resident was treated with courtesy, respect, and full recognition of the resident's dignity for 1 of 1 resident (Resident 2)	M 548		

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M 548	Continued From page 4 in the home. Resident 2 stayed in her/his to avoid being harassed by Resident 1. Findings include: On 10/15/2025 the Department received a complaint with concerns regarding resident behavior. Interview On 10/15/2025, at approximately 9:50 AM, Surveyors interviewed Resident 2. Resident 2 reported s/he had "been harassed by [Resident 1]." Resident 2 reported s/he had witnessed Resident 1 harassing other residents and Caregiver C. Resident 2 reported s/he stayed in her/his room more because of Resident 1's behaviors. Resident 2 reported Resident 1's behaviors were ongoing for approximately 6 months. Resident 2 reported Resident 1's behaviors were "getting worse" and s/he "feels less safe" in the facility. Resident 2 reported s/he had notified the prior house manager, the current house manager, and Administrator B of her/his concerns and "nothing has been done." On 10/15/2025, at 11:35 AM, Surveyors interviewed Executive Director (ED) A and Administrator B. Administrator B and ED A reported they were unaware of Resident 1's current behavior issues. Surveyors inquired who was responsible for reviewing incident reports. Administrator B reported it was the house managers responsibility to send the incident reports to management and s/he reviewed incident reports. Surveyors relayed concerns of Resident 1's increased behaviors based on incident reports. ED A and Administrator B acknowledged Surveyors concerns. ED A	M 548		

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M 548	Continued From page 5	M 548		

reported an investigation of Resident 1's behaviors would be conducted. ED A reported Resident 2's managed care organization (MCO) and guardian would be notified of the plan. ED A and Administrator B reported Resident 1 would be moved to a sister facility on November 1, 2025.

Record Review

On 10/15/2025, at 10:00AM, Surveyors reviewed Resident 1's record and identified the following:

Resident 1 was admitted on 06/03/2024, with diagnoses including congestive heart failure (CHF), hemiplegia, and stroke. Resident 1's record contained an initial Individualized Service Plan (ISP), dated 07/03/2024. Resident 1's ISP was reviewed 11/03/2024, and 08/15/2025; 3 months after it was due

Resident 1's current ISP, dated 08/15/2025, indicated the following:

- Mental & Emotional Health
"... Interaction with Household (Roommates/ Staff) - Positive
Comments: Staff will make sure [Resident 1] is not displaying any communication negatively [sic] with the other members in the house.."

- Behavioral Patterns
Aggressive Behavior - Non-Applicable
Combative Behavior - Non- Applicable
Choking w/ Meals - Non- Applicable
Self-Destructive Behavior - Non- Applicable
Wandering - Non- Applicable
Elopement - Non- Applicable
Suicidal Attempts - Non- Applicable

Incident Reports:

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M 548	Continued From page 6 - 06/17/2025 - Resident 1 was accusatory towards staff, swore at staff, and was "threatening other residents [s/he] was going to beat them up" - 09/25/2025 - Resident 1 was using the bathroom and became verbally aggressive, got in staff members face, and pushed staff. - 09/27/2025 - Resident 1 was smoking a metal pipe outside of adult family home and staff informed her/him it was not allowed. House manager was contacted. - 09/29/2025 - Resident 1 became upset with staff and threw her/his meds at a caregiver. - 10/10/2025 - Resident 1 had verbal aggressions toward staff. - 10/11/2025 - Resident 1 had verbal aggressions toward staff and threatened to beat up a caregiver.	M 548		