STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018211	A. BUILDING: _____ B. WING _____	C 02/29/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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M 000	INITIAL COMMENTS On 02/07/2024, with information gathered through 02/29/2024, Surveyor conducted a complaint investigation at BMK Adult Living LLC. Ten deficiencies were identified. Complaint was substantiated. Census: 4	M 000		
M 114	88.03(3)(b) CRIMINAL RECORDS CHECK Criminal records check. Prior to an initial license the licensing agency shall ask the Wisconsin department of justice to conduct a criminal records check on the license applicant and on any other adult household member. The licensee shall arrange for a criminal records check of all service providers. At least every second year following issuance of an initial license the licensing agency shall request a criminal records check on the licensee and all other adult household members and the licensee shall arrange for a criminal records check on any service provider. In addition, during the period of the licensure, the licensee shall arrange for a criminal records check on any new service provider. If any of these persons has a conviction record or a pending criminal charge which substantially relates to the care of a dependent population, the funds or property of adults or minors or activities of the adult family home, the licensing agency may deny, revoke, refuse to renew or suspend a license,	M 114		

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

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M 114	Continued From page 1 initiate other enforcement action provided in this chapter or in ch. 50, Stats., or place conditions on the license. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 3 of 4 personnel file reviewed included a complete background check as required. Findings include: On 02/14/2024, Surveyor reviewed Caregiver B's record. Caregiver B was hired on 08/01/2019 and his/her employee file included the following background information: BID form, not include in his/her record DOJ report, dated 02/14/2024 IBIS letter, dated 02/14/2024 On 02/16/2024 at 3:50 PM, Surveyor emailed Licensee A and Manager C and commented that Caregiver B's background check had not been completed as required. On 02/16/2024 at 4:16 PM, Licensee A and Manager C emailed and stated, "I misplaced [his/her] Background Check, thus the new one. The Background Check expires every 4 years, so I needed to get a new one."	M 114		

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M 386	Continued From page 2	M 386		
M 386	88.06(2)(c) SERVICE AGREEMENT REQUIREMENTS A service agreement shall specify all of the following: This Rule is not met as evidenced by: Based on record review and interview, the provider's service agreement for 1 of 1 resident (Resident 2) did not include the necessary elements required within the service agreement. Findings include: On 02/14/2024, Surveyor reviewed Resident 2's record. Resident 2 was admitted on 03/07/2023. Resident 2's signed service agreement did not include charges for room and board and services and security deposit, frequency and amount of payment, policy on refunds, condition for transfer or discharge and the assistance the licensee would provide in relocating resident, and a statement indicating that the resident rights and grievance procedures have been explained and copies provided to the resident and the resident's guardian or designated representative, if any. The provider did not sign the service agreement. On 02/26/2024, Surveyor reviewed the provider's service agreement located in the Department records. The service agreement signed by Resident 2's resident representative was not the	M 386		

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M 386	Continued From page 3 agreement provided during the licensing process. On 02/26/2024 at 6:03 PM, Surveyor emailed Licensee A and stated there were concerns with Resident 2's admission/service agreement. It does not define the requirements that are outlined in DHS Chapter 88 of what needs to be in a service agreement. On 02/27/2024 at 5:30 PM, Surveyor emailed Licensee A and stated there were concerns with Resident 2's admission/service agreement. It does not define the requirements that are outlined in DHS Chapter 88 of what needs to be in a service agreement. Surveyor asked Licensee A if s/he had a response. As of 02/29/2024 at 1:00 PM, no additional documentation or explanation was provided.	M 386		
M 400	88.06(2)(c)7 CONDITIONS OF TRANSFER OR DISCHARGE Conditions for transfer or discharge and the assistance a licensee will provide in relocating a resident. This Rule is not met as evidenced by: Based on record review and interview, information in the service agreement concerning conditions for transfer or discharge of a resident did not specify the assistance a licensee will provide in relocating 1 of 1 resident reviewed. A 30-day written notice of involuntary discharge was issued to Resident 1, dated 01/22/2024. The written service agreement did not specify the assistance the licensee would provide in	M 400		

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M 400	Continued From page 4 relocating Resident 1. Findings include: The Department received a complaint alleging a resident had been discharged without cause and had not been provided adequate assistance in the relocation process. On 02/14/2024, Surveyor reviewed Resident 1's record. Resident 1 was admitted to the facility, 12/12/2022, with diagnosis including chronic obstructive pulmonary disease (COPD), anxiety disorder and acute transverse myelitis in demyelinating disease of central nervous system. Resident 1's record contained a document that stated: "This is a formal written 30-day notice to find new placement of residency (with the help of [LLC Company] and your [managed care organization] Case Manager) due to continued inappropriate verbal and physical behaviors. It is in all parties' best interest that you [Resident 1], no longer residents at [Facility Name and address] as of January 22, 2024." The notice was signed by House Manager D and Licensee A. It was documented that Resident 1 refused to sign the notice. The notice did not describe assistance the licensee would provide in relocating Resident 1, the name, address, and phone number of the advocacy agency or the name, address, and phone number of the Division of Quality Assurance. Surveyor noted the provider listed the name of an LLC Company that would help with finding a new placement of resident; this LLC Company is not	M 400		

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M 400	Continued From page 5 registered as the licensee with the Department. Resident 1's "Admission/Service Agreement," dated 12/15/2022, did not document conditions for discharges or transfers nor outlined that either party (licensee or resident/resident representative) may terminate the resident's occupancy with a thirty (30) day written notice to the other party. The service agreement did not specify the assistance the licensee would provide in relocating Resident 1 in the event of discharge or transfer. On 02/26/2024 at 6:03 PM, Surveyor emailed Licensee A and stated there were concerns with Resident 1's admission/service agreement. It does not define the requirements that are outlined in DHS 88 of what needs to be in a service agreement and what needs to be defined in a 30-day discharge. On 02/27/2024 at 5:30 PM, Surveyor emailed Licensee A and stated there were concerns with Resident 1's admission/service agreement. It does not define the requirements that are outlined in DHS 88 of what needs to be in a service agreement and what needs to be defined in a 30-day discharge. Surveyor asked Licensee A if s/he had a response. As of 02/29/2024 at 1:00 PM, no additional documentation or explanation was provided.	M 400		
M 406	88.06(3)(b) PERSONS INVOLVED WITH ISP & ASSESSMENT The individual service plan and written assessment shall be developed by the placing agency, if any, the	M 406		

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M 406	Continued From page 6 service coordinator, if any, the licensee, the resident and the resident's guardian, if any and designated representative, if any, with the resident participating in a manner appropriate for the resident's level of understanding and method of communication. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure the Individual Service Plan (ISP) for 4 out of 4 records (Resident 1, Resident 2, Resident 3, and Resident 4) reviewed were developed together with the placing agency, the guardian, and the provider. Findings include: On 02/14/2024, Surveyor reviewed Resident 1, Resident 2, Resident 3, and Resident 4's record. Resident 1 moved into the home on 12/12/2022, was his/her own person, and had member care organization (MCO) Care Manager (CM) G. Resident 1's record contained an ISP, dated 06/15/2023, which was not signed and dated by the resident. Resident 1's ISP, dated 12/15/2023, was not signed and dated by the resident, nor CM G. Resident 2 moved into the home on 03/07/2023 and had Guardian J and had CM I. Resident 2's record contained an ISP, dated 03/10/2023, which was not signed and dated by Guardian J nor CM I. Resident 2's ISP, dated 10/18/2023, was not signed and dated by Guardian J.	M 406		

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M 406	Continued From page 7 Resident 3 moved into the home on 04/18/2022 and had Power of Attorney (POA) K and had CM L. Resident 3's record contained an ISP, dated 05/02/2023, which was not signed and dated by POA K. Resident 3's ISP, dated 11/02/2023, was not signed and dated by POA K. Resident 4 moved into the home on 03/03/2021 and was his/her own person and had CM M. Resident 4's record contained an ISP, dated 02/03/2023, which was not signed and dated by the resident or CM M. Resident 4's ISP, dated 10/18/2023, was not signed and dated by the resident. On 02/26/2024 at 6:03 PM, Surveyor emailed Licensee A and stated there were concerns with the resident ISPs being signed by the resident and their resident representative. On 02/27/2024 at 5:30 PM, Surveyor emailed Licensee A and stated there were concerns with the resident ISPs being signed by the resident and their resident representative. Surveyor asked Licensee A if s/he had a response. As of 02/29/2024 at 1:00 PM, no additional documentation or explanation was provided.	M 406		
M 410	88.06(3)(d) INDIVIDUAL SERVICE PLAN The individual service plan shall contain at least the following: This Rule is not met as evidenced by:	M 410		

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M 410	Continued From page 8 Based on record review and interview, the provider did not ensure the Individual Service Plan (ISP) for 1 of 1 resident accurately identified current needs and abilities. Resident 2's ISP did not address his/her verbal and physical behaviors. Findings include: The provider was licensed to provide cares for up to 4 residents in the client groups developmentally disabled, physically disabled, and emotionally disturbed/mental illness. On 02/07/2024, at approximately 4:30 PM, Surveyor interviewed Resident 1 and Family Member (FM) H. FM H assisted with translation as English was not Resident 1's primary language. Resident 1 stated, "[Resident 2] is always touching staff inappropriately, so then [s/he] is always grounded." On 02/10/2024, at approximately 5:45 PM, Surveyor interviewed Caregiver E. Caregiver E stated Resident 2 had physically attacked staff and residents. Resident 2 had been known to harass other residents in the home due to their disabilities. On 02/13/2024, at approximately 11:00 AM, Surveyor interviewed Resident 2's managed care organization (MCO) Care Manager (CM) I. CM I stated, "[Resident 2] is verbally aggressive, says sexual things, and is difficult to redirect." On 02/22/2024, at approximately 7:30 PM, Surveyor interviewed Caregiver F. Caregiver F stated Resident 2 had severe behavioral issues and had tried to physically attack him/her twice.	M 410		

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Resident 2 had spoken to Caregiver F by using profanity.

On 02/26/2024, Surveyor reviewed Resident 2's record.

Resident 2 was admitted to the facility, 03/07/2023, with diagnoses including bipolar disorder, multiple sclerosis, and schizophrenia.

Resident 2's "Incident Reports" documented:
"09/08/2023 - Resident told other resident to move out [his/her] way, staff asked [him/her] to ask [him/her] nicely ... resident ran [his/her] wheelchair into the other residents wheelchair on purpose."
"09/29/2023 - Resident called the police out to the house."
"11/01/2023 - ... Trying to light a cigarette in [his/her] room ..."
"11/15/2023 - Caught [Resident 2] taking two oranges after refusing dinner and refusing any offering of food I gave. [S/he] immediately started calling me a [expletive words]. I sent [him/her] to [his/her] room where [s/he] is now yelling those same names from [his/her] room."
"11/16/2023 - Because [s/he] was asked to wait a minute to be given a cigarette, [s/he] called [staff name] [expletive word]."
"11/29/2023 - [Resident 2] was scheduled for two appointments today. One virtual at 11am with [his/her] psychiatrist and one at 2pm with [his/her] neurologist in person. [Resident 2] had refused to get dressed and shower for [his/her] first appointment. Then [s/he] had refused to shower and get dressed for [his/her] second appointment and refused to go to it."
"12/03/2023 - [Resident 2] was caught with sodas and fruit in [his/her] room that [s/he] didn't ask for. When [Caregiver F] took them out of [his/her]

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room [s/he] called [him/her] a [expletive word] numerous times and tried to push [his/her] wheelchair into [her/him] ...After a few minutes [s/he] came out to ask for a cigarette, and I told [him/her] we weren't going to reward [his/her] bad behavior with a cigarette. [S/he] got upset again and started yelling and I ask [him/her] to return to [his/her] room, [s/he] chose to continue yelling curse words ... As [Caregiver F] walked over to talk to [him/her] [s/he] again started screaming that she isa [expletive word] and then charged at [him/her] in [his/her] chair and reared [his/her] closed fist up to [him/her] as if [s/he] was going to punch [him/her] ..."
"12/05/2023 - ... I said well okay I don't feel comfortable giving you a cigarette on an empty stomach u (you) haven't been eating lately it's not good for you. [S/he] then proceeded to say [expletive words] ..."
"12/10/2023 - Resident came out of [his/her] bedroom and asked for a cigarette and [his/her] vape. I then told [him/her] I had to take [his/her] vape back after [s/he] smokes it res (resident) began swear at me n (and) saying it is [his/her] and [S/he] can do wt (what) [s/he] wants its [expletive word] ... [S/he] then began to tell staff that it's [expletive word] it's [his/her] and [s/he] can't have and staff is a [expletive word] and had flipped me off I then told res that [s/he] needed to stop yelling cause there is other res around that don't like loud noises. Resident then began getting louder and calling staff names and told staff [s/he] would push them in their face and that staff was a stupid [expletive word] res did have [his/her] fist up and was moving towards staff ..."
"12/13/2023 - Throughout the day, [s/he] kept trying to pat me and rub my back when I was by [him/her] and I told [him/her [s/he] had to ask for permission before touching someone ..."
"12/16/2023 - Resident came out the bathroom

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and asked staff to come here. ... Resident then asked staff to wipe [his/her] butt. Staff then asked res why [s/he] couldn't since [s/he] always been able to do it [him/herself] and has never asked ... I then told [him/her] that I didn't feel comfortable with doing that knowing that [s/he] is able to do it [him/herself] ...Res responded saying wow n laughing ..."
"01/03/2024 - I left [him/her] shower and I come back 5 minutes later and asked [him/her] if [s/he] was done, [s/he] said "no you have scrub me" I was thrown off and I said "Oh I'm sorry I didn't know I was supposed to scrub you" ... I was scrubbing [his/her] body ... and starts telling me that [s/he] hasn't used [his/her] private part for sex yet but [s/he] will. I was so uncomfortable ..."
"01/15/2024 - [S/he] was laying in bed and [s/he] mentioned [his/her] back was hurting and [s/he] kept lifting [his/her] shirt and telling me to give [him/her] a back rub. [S/he] did that about 3 to 4 times and I kept telling [him/her] no."
"01/23/2024 - ... [s/he] rolled back to [his/her] room and called [him/her] a [expletive word]. I then entered [his/her] room and told [him/her] not to cuss at us and [s/he] said [expletive words]. [S/he] proceeded to call both of us names, flipped us off, told us to "get rid of him then," as well as, said [expletive word] I'm going to slap you, with his hand raised."
"01/25/2024 - ... [S/he] told me [s/he] didn't want dinner. I told [him/her] to eat dinner so that way [s/he] could get a cigarette [s/he] told me no ... Five minutes later I told [him/her] if [s/he] was ready to eat and [s/he] said no [s/he] just wanted a cigarette. I asked [him/her] to eat first [s/he] denied and got upset. [S/he] was going back to [his/her] room and said [expletive word] and started cussing [Resident 1 and Resident 3] are also in the kitchen table eating."
"01/28/2024 - [S/he] got upset because [s/he]

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didn't get a cigarette when I was busy walking another resident. [S/he] then started going through drawers and closing them hard, mad. I asked [him/her] to go to [his/her] room and I would come get [him/her] to give [him/her] [his/her] cigarettes when I would be done but [s/he] cut me off and screamed well give me a [expletive word] cigarette. ... I was in another resident room and [s/he] lunged down the hallway towards me and said [expletive words]."
"02/23/2024 - ... I took [his/her] pen to [him/her] and [s/he] grabbed it and as I sat next to [him/her] I told [him/her] [s/he] will only get it for 10 seconds. ... [s/he] got mad ... and [s/he] aggressively placed [his/her] pen on my hand and doing so [s/he] scratched my palm and made me bleed ... I heard banging coming from [his/her] room and as I walked in and asked if [s/he] was okay [s/he] yelled at me and told me to leave [him/her] alone."

Resident 2's ISP, dated 10/18/2023, documented:
"Cognitive Function: Forgetful - kindly remind [him/her] of answers to questions."
"Behavioral Needs: Anxiety, antisocial - encourage [him/her] to sit at table for meals"
"Bathing: At least 2x/week, independent - set up shower, stand in bathroom for any assistance, can wash [him/herself]."
"Dressing: Assist - encourage changing clothes on shower/non shower days"
"Mobility/Transfers: Uses w/c (wheelchair), independent - keep an eye on [him/her]"
"Toilet Use: Independent - keep an eye on [him/her]"
"Eating: Poor appetite, but self feed - encourage smaller meals/snacks, water"
Resident 2's ISP did not identify and provide guidelines for his/her behaviors related to verbal and physical aggression, sexually inappropriate

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M 410	Continued From page 13 behaviors, smoking guidelines, On 02/27/2024 at 5:30 PM, Surveyor emailed Licensee A and stated there were concerns with the resident ISPs identifying behaviors and providing guidelines for care staff. As of 02/29/2024 at 1:00 PM, Surveyor did not receive a response.	M 410		
M 414	88.06(3)(d)2 LEVEL OF SUPERVISION Identification of the level of supervision required in the home and community. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 4 of 4 (Resident 1, Resident 2, Resident 3, and Resident 4) individual service plans (ISP) reviewed contained the level of supervision required in the home and community. Findings include: On 02/07/2024, at approximately 4:30 PM, Surveyor interviewed Resident 1. Resident 1 explained to Surveyor that there is sleep staff in the downstairs apartment. "They aren't really a caregiver, just there in case of an emergency." On 02/14/2024, Surveyor reviewed Resident 1's, Resident 2's, Resident 3's and Resident 4's record. Example 1: Resident 1	M 414		

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Resident 1 was admitted to the facility, 12/12/2022, with diagnoses including chronic obstructive pulmonary disease (COPD), anxiety disorder, diabetes, and acute transverse myelitis in demyelinating disease of central nervous system.

Resident 1's ISP, dated 12/15/2023, documented:
"Cognitive Function: Alert, some forgetfulness"
"Behavioral Needs: Depression"
"Fall Risk: Yes"
Resident 1's ISP did not identify level of supervision required in the home and community.

Example 2: Resident 2

Resident 2 was admitted to the facility, 03/07/2023, with diagnoses including bipolar disorder, multiple sclerosis, and schizophrenia.

Resident 2's ISP, dated 10/18/2023, documented:
"Cognitive Function: Forgetful"
"Behavioral Needs: Anxiety, antisocial"
"Fall Risk: Yes"
Resident 2's ISP did not identify level of supervision required in the home and community.

Example 3: Resident 3

Resident 3 was admitted to the facility, 04/18/2022, with diagnoses including pain, anxiety, and seizure disorder.

Resident 3's ISP, dated 11/02/2023, documented:
"Behavioral Needs: Can get agitated if something doesn't go [his/her] way, changes, out of routine, cannot understand [him/her]."
"Fall Risk: Yes"
Resident 3's ISP did not identify level of supervision required in the home and community.

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M 414	Continued From page 15 Example 4: Resident 4 Resident 4 was admitted to the facility, 03/03/2021, with diagnoses including cerebral palsy, anxiety, and depression. Resident 4's ISP, dated 10/18/2023, documented: "Cognitive Function: altered mental status, developmental delay, major depressive disorder with psychotic features." "Behavioral Needs: Depression, Anxiety. Monitor mood changes." "Mobility/Transfers: Dependent, Transfers Hoyer lift" On 02/27/2024 at 5:30 PM, Surveyor emailed Licensee A and requested an explanation as to why the resident's ISPs did not identify the supervision levels they required. As of 02/29/2024 at 1:00 PM, no additional documentation or explanation was provided.	M 414		
M 434	88.07(1)(e) OVERNIGHT SUPERVISION The licensee shall arrange for a service provider to be present in the home when the licensee is gone overnight or when the licensee's absence prevents the resident from receiving the services, training or supervision specified in the resident's individual service plan under s. HSS 88.06(3). This Rule is not met as evidenced by: Based on record review and interview, the	M 434		

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M 434	Continued From page 16 licensee did not arrange for a service provider to be present in the home when a resident requires services or supervision. The licensee scheduled sleep staff between approximately 9:00 PM and 6:00 AM. Sleep staff did not have access to the medication closet and were not always able to hear a resident who required assistance. Findings include: DHS 88.02(9) defines "Continuous care" as the need for supervision, intervention, or services on a 24-hour basis to prevent, control and ameliorate a constant or intermittent mental or physical condition which may break out or become critical during any time of the day or night. On 02/07/2024, at approximately 4:30 PM, Surveyor interviewed Resident 1 and Family Member (FM) H. FM H assisted with translation as English was not Resident 1's primary language. Resident 1 stated, "There is no staff in our home during the night shift. There is a person [Caregiver B] who lives in the apartment downstairs that is here in case of an emergency. [S/he] can't always help. [Resident 2] will be yelling out in pain and [Caregiver B] will tell [him/her] that s/he will have to wait for morning staff to help [him/her], [s/he] doesn't have keys to the med closet." On 02/10/2024, at approximately 5:45 PM, Surveyor interviewed Caregiver E. Caregiver E stated Caregiver B lived downstairs in the apartment and was not considered a qualified caregiver; therefore, did not have access to the med closet. Caregiver E stated, "There is no 3rd shift technically." Caregiver E stated Resident 1 was given a commode after 9:00 PM.	M 434		

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M 434	Continued From page 17 On 02/12/2024, at approximately 10:00 AM, Surveyor interviewed Resident 1's managed care organization (MCO) Care Manager (CM) G. CM G stated s/he was aware that the provider had sleep staff during third shift but assumed they could provide cares if needed. On 02/13/2024, at approximately 11:00 AM, Surveyor interviewed Resident 2's MCO CM I. CM I stated s/he was aware that there was sleep staff but assumed that individual would be able to assist Resident 2 during sleep hours, if needed. CM I explained there were concerns a few months back that [s/he] was getting up to make food, so now they make sure [s/he] has proper snacks. Surveyor explained that residents had voiced concerns that perhaps Resident 2 needs assistance with medications during sleep hours and Caregiver B is unable to assist, due to having no access to the med closet. CM I stated Resident 2 cannot self-administer medications. CM I stated Resident 2 had increased his physical therapy lately which could have created additional pain. CM I stated s/he would need to follow up with the provider to address this concern. On 02/14/2024, Surveyor reviewed Resident 2's record. Resident 2 was admitted to the facility, 03/07/2023, with diagnoses including bipolar disorder, multiple sclerosis, and schizophrenia. Resident 2's January and February 2024 medication administration records documented: "PRN (as needed) medications: Acetaminophen 325 MG (milligrams) - 2 oral tablets QID - Four Times Daily - Take 2 tablet (total of 650 MG) QID - Four Times Daily Oral. For: Pain."	M 434		

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M 434	Continued From page 18 Resident 2's "Incident Reports" documented: 02/07/2024 - [Caregiver B], the nonresident live in, called me at 5:30. Explained that [Resident 2] was pounding on the wall around 12am, [Resident 2] had to go the bathroom and [his/her] legs were crossed and couldn't stand up straight. Ended staying in bed. [Caregiver B] came back up stairs around 5am due to hearing rustling and [Resident 2] was on the bathroom floor. [Caregiver B] called me (Manager C) and I was on my way to work. 02/09/2024 - I (Caregiver N) had come in at 8 like usual to give [him/her] [his/her] meds and snack for the night aas [sic: ask] in any pain so I could give [him/her] some Tylenol. [S/he] refused the Tylenol ... [s/he] rang [his/her] bell. ... asked [him/her] if [s/he] was okay [s/he] said "can I have Tylenol now" ..." On 02/26/2024 at 6:03 PM, Surveyor emailed Licensee A and stated there were concerns with sleep staff not having access to medications and being able to respond to resident needs. On 02/27/2024 at 5:30 PM, Surveyor emailed Licensee A and stated there were concerns with sleep staff not having access to medications and being able to respond to resident needs. Surveyor asked Licensee A if s/he had a response. As of 02/29/2024 at 1:00 PM, no additional documentation or explanation was provided.	M 434		
M 480	88.08 TERMINATION OF PLACEMENT TERMINATION OF PLACEMENT. A licensee	M 480		

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may terminate a resident's placement only after giving the resident, the resident's guardian, if any, the resident's service coordinator, the placing agency, if any and the designated representative, if any, 30 days written notice. The termination of a placement shall be consistent with the service agreement under s. HSS 88.06(2)(c)7. The 30 day notice is not required for an emergency termination necessary to prevent harm to the resident or the other household members.

This Rule is not met as evidenced by:
Based on record review and interview, the provider initiated a 30-day termination of placement for reasons that would not cause harm to the resident or other household members for 1 of 1 resident.

Resident 1 was discharged due to continued inappropriate verbal and physical behaviors. Resident 1's record did not show a pattern of these behaviors.

Findings include:

The provider was licensed to provide cares for up to 4 residents in the client groups developmentally disabled, physically disabled, and emotionally disturbed/mental illness.

On 01/24/2024, the department received a complaint related to facility initiated resident termination.

On 02/07/2024, Surveyor reviewed a copy of Resident 1's discharge notice that was saved in

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the Department file which documented:
"This is a formal written 30-day notice to find new placement of residency (with the help of [LLC Company] and your [managed care organization] Case Manager) due to continued inappropriate verbal and physical behaviors. It is in all parties' best interest that you [Resident 1], no longer residents at [Facility Name and address] as of January 22, 2024."
The notice was signed by House Manager D and Licensee A. It was documented that Resident 1 refused to sign the notice.

On 02/07/2024, at approximately 4:30 PM, Surveyor interviewed Resident 1 and Family Member (FM) H. FM H assisted with translation as English was not Resident 1's primary language. Resident 1 stated, "I feel that I was given my notice because the [House Manager D] does not like me, [s/he] doesn't like [ethnicity] people. [S/he] used to be a caregiver and [him/her] and I did not always get along. I talked with [Licensee A] and [Manager C] about it. Then they promoted [him/her]. They did not even listen to me. As soon as [s/he] became the house manager, I was issued a 30-day notice. [Resident 3] hates new people; will scream at them. If [Resident 3] doesn't want other residents in living room - we all must go to our room; we do not want to upset [Resident 3]. [Resident 2] is always touching staff inappropriately, so then [s/he] is always grounded. If staff aren't yelling at me, they are yelling at the other residents or each other. Staff are always making fun of the residents because of their disabilities. I sometimes struggle explaining myself, because I cannot speak English fast, I cannot always think of the words. I ask for a translator, and they just walk away. I am issued a 30-day notice, but the other residents can do whatever." FM H stated

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that s/he visited Resident 1 often and there was always yelling of some sort going on; Staff, including Manager C and Licensee A, yelling at Resident 2 or Resident 3. FM H stated, "Staff have informed me that [Licensee A] and [House Manager D] have screamed at [Resident 1]. Then [Resident 1] becomes flustered and struggles to respond and they just laugh. I have tried to discuss this with [Manager C] and [s/he] doesn't want to get involved, [s/he] absolutely will avoid conflict at all costs."

On 02/10/2024, at approximately 5:45 PM, Surveyor interviewed Caregiver E. Caregiver E stated Resident 1 understands basic English but speaks better in [his/her] native language. Resident 1 could use a translator at times. Caregiver E explained that Resident 2 had physically attacked staff/residents and will make fun of residents for their diagnoses. Caregiver E stated s/he was not aware of any other 30-day notices, except for Resident 1. Caregiver E stated s/he had no concerns regarding Resident 1.

On 02/12/2024, at approximately 10:00 AM, Surveyor interviewed Resident 1's managed care organization (MCO) Care Manager (CM) G. CM G stated Resident 1 did deal with anger issues. CM G stated, "My impression is that [House Manager D] expects respect and if [s/he] feels that [Resident 1] is disrespecting [him/her], there will be an argument. This could partly be due to cultural differences." CM G stated the other residents in the home have developmental disabilities, so their outbursts are looked at differently by staff.

On 02/13/2024, at approximately 11:00 AM, Surveyor interviewed Resident 2's MCO CM I.

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CM I stated Resident 2 is verbally aggressive, says sexual things and is difficult to redirect. CM I stated, "At one time, the provider was thinking about requesting that [Resident 2] move, but then said another resident was moving, so [Resident 2] did not need to."

On 02/14/2024, Surveyor reviewed Resident 1's record.

Resident 1 was admitted to the facility, 12/12/2022, with diagnoses including chronic obstructive pulmonary disease (COPD), anxiety disorder, diabetes, and acute transverse myelitis in demyelinating disease of central nervous system.

Resident 1's "Notes," dated 10/01/2023 to 02/06/2024, did not document any verbal or physical behaviors.

Resident 1's "Incident Report" documented:
"12/11/2023 - ...When staff went into the room to say good morning and said I didn't know u (you) were up, you didn't hit your call light resident got loud and said why did [s/he] need to hit the call light staff should be in [his/her] room rit [sic: right] away. Staff tried explaining to res (resident) that they always have hit the call light for anything and the morning to get ready. Resident started saying that res was lazy and to get out an [s/he] shouldn't have to do anything. ..."
"01/20/2024 - ...Staff was sweeping and started to mop resident came out to the dining room table and began to clip [his/her] fingernails. Staff asked resident not to make a mess and [s/he] told me to sweep it up again. ... [S/he] continued to cut [his/her] nails and put them on the floor. [S/he] also stated earlier that "its easy money and for you guys, cause you guys don't do anything."

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M 480	Continued From page 23 ... As [s/he] finished cutting [his/her] nails [s/he] left and mentioned [s/he] was going to do another project, so I gave [him/her] the space to do so, ... I feed them and [s/he] went straight to [his/her] room and slammed the door. ... 6pm gets there and I walk in [his/her] room and [s/he] is in bed with [his/her] brace off, taking a nap. I tried asking [him/her] If [s/he] was okay and [s/he] kept ignoring me. I managed to get some movement out of [him/her] because I was ready to call 911. ..." "01/22/2024 - At 5:52pm [Resident 1] got in the shower at the same time I took [Resident 3] to brush [his/her] teeth since [s/he] kept asking me to. Before that I set [Resident 1] shower to make it easy on [him/her] like I normally do, [s/he] is very much self-sufficient to take a shower except part where I have to go in and wash the left side of [his/her] body, and that is usually the last thing done And then I help [him/her] get out of the shower to make sure [s/he] is okay, that is what I normally do. This time around As I brushed [Resident 3]'s teeth I heard thumping on the walls and it sounded like it was [Resident 2], so I go and make sure [s/he] is okay and I ask [him/her] to stop. On my way back I stop and check on [Resident 1] and [s/he] was just scrubbing [him/herself] so I go ahead and close the door and give [him/her] more time, back to [Resident 3] and I heard it again, I go tell [Resident 2] to please stop, on my way back I check on [Resident 1] and [s/he] is rinsing [him/herself]. So I thought [s/he] was going to shave inside the shower so I gave [him/her] time since I was almost done with [Resident 3], I heard it one more time and I had finished with [Resident 3], I wheel [Resident 3] back and I go directly to [Resident 1], as I walk in [s/he] is getting out the shower, [s/he] is still not in [his/her] wheel chair, I got startled because I didn't want [him/her] to fall so I ask	M 480		

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[him/her] to please sit down in the shower. [S/He] said not but I could barely hear what [s/he] was saying over [his/her] very loud music. So [s/he] sat down on [his/her] chair as I assisted [him/her] sit so [s/he] didn't fall. I ask [him/her] to lower [his/her] music and [s/he] did and [s/he] started to give me a hard time telling me that I need to know that [s/he] kept punching the wall to get my attention, and [s/he] showed me [his/her] hand to tell me [s/he] had punch the bathroom walls, and I told [him/her] I could not hear [him/her] but I was still checking up on [him/her] and [s/he] was fine. By then it was already 6:03pm I told [him/her] id [s/he] could go back in the shower so I can properly shower [his/her] left side, [s/he] said no and kept saying [s/he] was going to talk to the state because [s/he] could of fallen on [his/her] way out of the shower, and I kept trying to explain to [him/her] that I was helping another resident but I still kept checking on [him/her] and [s/he] seem fine scrubbing and rinsing [him/herself]. [S/He] was agitated and told me to get out of [his/her] way and I did and [s/he] kept telling me how [s/he] punched the wall and I told [him/her] I didn't hear [him/her] because this whole time I thought it was [Resident 2], then [s/he] said how could you not hear this and proceeded to punched the wall next to [his/her] room and I told [him/her] to please not punch wall and by then [s/he] was yelling at me, so I went ahead and called [Manager C] at 6:06pm and explained what was happening, [s/he] asked to get pictures on [his/her] hand and I asked [Resident 1] if I can and [s/he] said no and was telling me how I messed up and I am going to get in trouble because I wasn't there with [him/her] and [s/he] could of fallen and if anything happens to [him/her] for getting [him/her] mad it's going to be on me because [s/he] is sick and should not be mad. I apologize to [him/her] and I told [him/her]

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(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 480	Continued From page 25	M 480		

that I tried helping [him/her] but [s/he] did not let me and [s/he] was to understand that I have other residents to take care of, no one asked [him/her] to get up. I was going to go in there but I made sure to check up on [him/her] and [s/he] seemed fine and [s/he] was in the shower for no more than 10min. 8pm ish came around and I had his meds ready and gloves on because I had to put on [his/her] feet ointment, I knock on [his/her] door and proceeded to walk in. As soon as I walk in I explain I had [his/her] med ready. [S/He] started telling me to put them in the table and I told him okay but I have to see [him/her] take them. [S/He] kept saying to just put them down and [s/he] will take them when [s/he] takes them, I told [him/her] it was already late and [s/he] said [s/he] was on the phone with someone so [s/he] started to tell me to leave [his/her] room, I told [him/her] I would come back to [his/her] room in 5 min so [s/he] had time to talk to the person on the phone, I walk out and stood by the door to know when [s/he] is done talking on the phone, I didn't hear anything anymore so I proceeded to knock on the door and walk in, I told [him/her] if [s/he] was done talking on the phone and [s/he] said if the 5 min where [sic: were] up and I told [him/her] I had to give [him/her] [his/her] med because it was already late and [s/he] proceeded to accuse me of me being the reason why the people on the phone hung up on [him/her]. [S/He] also said that [s/he] already told me earlier today what happens to [him/her] when [s/he] gets mad and if I wanted that commitment of knowing what's going to happen to me. Earlier [s/he] told me that if [s/he] hits one of us when mad [s/he] would be in the wrong that it's never us in the wrong, so back to what [s/he] said if I wanted that commitment of knowing, I told him [s/he] was threatening me and [s/he] proceeded to change the subject back to the meds. And said [s/he] would not take the

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018211	A. BUILDING: _____ B. WING _____	C 02/29/2024

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BMK ADULT LIVING LLC	W4753 POTTER RD ELKHORN, WI 53121

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M 480	Continued From page 26 meds, told me to get out and called me names, at that point I just wanted a verbal confirmation of [him/her] refusing [his/her] med. after not getting a verbal confirmation I had to walk out for my safety because the look in [his/her] face scared me and [s/he] kept standing up and grabbing stuff and I feared [s/he] would throw something at me of pull out something to hurt me." On 02/22/2024, at approximately 7:30 PM, Surveyor interviewed Caregiver F. Caregiver F stated House Manager D was promoted in 10/2023. Caregiver F stated s/he did not have any concerns with Resident 1. Caregiver F stated there are other residents in the home that have more significant behaviors than Resident 1. Caregiver F is not aware of any other residents being issued a 30-day notice. On 02/26/2024 at 6:03 PM, Surveyor emailed Licensee A and stated there were concerns with Resident 1's rationale for his/her 30-day discharge. On 02/27/2024 at 5:30 PM, Surveyor emailed Licensee A and stated there were concerns with Resident 1's rationale for his/her 30-day discharge. Surveyor asked Licensee A if s/he had a response and if there was a rationale why the 30-day discharge was issued when there was a change in management. As of 02/29/2024 at 1:00 PM, no additional documentation or explanation was provided.	M 480		
M 482	88.09(1)(a) RESIDENT RECORDS The licensee shall maintain a record for each resident. Resident records	M 482		

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M 482	Continued From page 27 shall be maintained in a secure location within the home to prevent unauthorized access. This Rule is not met as evidenced by: Based on observation and interview, Licensee A did not maintain the records for 4 of 4 residents (Resident 1, Resident 2, Resident 3, and Resident 4) in a secure location within the home. Findings include: On 02/07/2024, at approximately 4:15 PM, Surveyor arrived to conduct an onsite complaint investigation. Surveyor asked Caregiver N if s/he had access to the resident records for review. S/he stated s/he would contact management. Licensee A arrived onsite and stated Surveyor could send an email and all requested documents would be provided.	M 482		
M 550	88.10(3)(b) Privacy Privacy. To have physical and emotional privacy in treatment, living arrangements and in caring for personal needs, including toileting, bathing and dressing. The resident, the resident's room, any other area in which the resident has reasonable expectation of privacy, and the personal belongings of a resident shall not be searched without the resident's permission or permission of the resident's guardian except when there is reasonable cause to believe	M 550		

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M 550	Continued From page 28	M 550		

that the resident possesses contraband. The resident shall be present for the search.

This Rule is not met as evidenced by:
Based on observation and interview, the provider did not ensure 4 of 4 residents were provided privacy. Residents were not provided keys to their bedrooms.

Findings include:

On 02/07/2024, at approximately 4:30 PM, Surveyor interviewed Resident 1. Resident 1 stated, "I think caregivers come into my room and look through my things when I am not in the home." Surveyor asked if s/he had a key to his/her room, so that s/he could lock the door when s/he was not in the room. Resident 1 stated, "We are not allowed to hold the key to our room."

On 02/10/2024, at approximately 5:45 PM, Surveyor interviewed Caregiver E. Caregiver E stated residents did not have personal keys to their room.

On 02/12/2024, at approximately 10:00 AM, Surveyor interviewed Resident 1's managed care organization (MCO) Care Manager (CM) G. CM G stated s/he was not aware that Resident 1 had not been given a key to his/her room upon admission.

On 02/22/2024, at approximately 7:30 PM, Surveyor interviewed Caregiver F. Caregiver F stated s/he was not aware of any residents having keys to their room.

On 02/26/2024 at 6:03 PM, Surveyor emailed

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M 550	Continued From page 29 Licensee A and stated there were concerns with the resident's not having personal keys to their bedroom doors to ensure privacy. On 02/27/2024 at 5:30 PM, Surveyor emailed Licensee A and stated there were concerns with the resident's not having personal keys to their bedroom doors to ensure privacy. Surveyor asked Licensee A if s/he had a response. As of 02/29/2024 at 1:00 PM, no additional documentation or explanation was provided.	M 550		