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	0019012	A. BUILDING: _____ B. WING _____	C 09/19/2024

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A DIFFERENT LIVING AFH LLC	617 JAMES COURT WEST BEND, WI 53095

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M 000	INITIAL COMMENTS On 09/19/2024, Surveyor conducted a standard survey and complaint investigation at A Different Living AFH LLC, an AFH in West Bend. Seven deficiencies were identified. The complaint was unsubstantiated. Census: 4	M 000		
M 232	88.04(2)(g)1 HEALTH SCREENING FOR STAFF The licensee shall obtain documentation from a physician, a registered nurse or a physician's assistant indicating that the licensee and any service provider has been screened for illness detrimental to residents, including for tuberculosis. The documentation is to be completed within 90 days before the start of providing service. The documentation shall be kept confidential except that the licensing agency shall have access to the documentation for verification. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 3 of 3 employees reviewed had documentation from a physician, registered nurse or physician's assistant indicating they had been screened for illness detrimental to residents, including for tuberculosis, within 90 days before the start of providing service. Licensee A did not have documentation of a tuberculosis test within 90 days prior to employment for Caregiver B,	M 232		

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

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M 232	Continued From page 1 Caregiver C or Caregiver D. Findings include: On 09/19/2024 at approximately 9:15 a.m., Surveyor reviewed employee records provided by Licensee A. Records documented the following: - Caregiver B was hired on 03/13/2023. Caregiver B's record included a physician statement, dated 12/15/2021, stating Caregiver B did not appear to have communicable disease. The statement did not include a test. Caregiver B's record included a tuberculosis test, dated 01/06/2024, nearly 10 months after his/her start of employment. - Caregiver C was hired on 10/17/2023. Caregiver C's record included a tuberculosis test, dated 01/30/2023, greater than 90 days prior to his/her start of employment. - Caregiver D was hired on 06/21/2024. Caregiver D's record included a tuberculosis test dated 08/15/2024, nearly 2 months after his/her start of employment. On 09/19/2024 at approximately 9:30 a.m., Surveyor interviewed Licensee A regarding employee tuberculosis tests. Licensee A stated s/he was aware tuberculosis tests needed to be completed prior to admission but knew that some employees had tests completed with other employees and Licensee A didn't believe s/he could use those tests for documentation.	M 232		
M 384	88.06(2)(b) SERVICE AGREEMENT EXCEPT RESPITE An adult family home shall have a service agreement with each person to be admitted to the home except a	M 384		

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M 384	Continued From page 2	M 384		

person being admitted for respite care. The service agreement shall be completed prior to admission and revised at least 30 days prior to any change. The service agreement shall be dated and signed by the licensee and the person being admitted or the persons guardian or designated representative. Copies shall be provided to all parties and to the placing agency, if any.
This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure a service agreement was completed prior to admission for 1 of 2 residents reviewed. The provider did not have a signed service agreement for Resident 2.

Findings include:

On 09/19/2024 at approximately 8:50 a.m., Surveyor reviewed Resident 2's record. Resident 2 was admitted to the provider's facility on 02/08/2023 with diagnoses including obsessive compulsive disorder and schizoaffective disorder. Resident 2's record indicated s/he had a legal guardian. Resident 2's record did not include a signed service agreement.

On 09/19/2024 at approximately 9:00 a.m., Surveyor interviewed Licensee A and asked if s/he had a signed service agreement for Resident 2. Licensee A reviewed Resident 2's record and confirmed the service agreement was not signed. Licensee A explained that at times "county admissions" were pushed for admission so quickly with little information provided to Licensee A.

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M 404	Continued From page 3	M 404		
M 404	88.06(3)(a) INDIVIDUAL SERVICE PLAN & ASSESSMENT The licensee shall ensure that a written assessment and individual service plan is completed and developed for each resident within 30 days after placement. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure an individual service plan (ISP) was completed and developed within 30 days after placement for 1 of 2 residents reviewed. Resident 1, who admitted to the facility on 07/23/2024, did not have an ISP. Findings include: On 09/19/2024 at approximately 8:50 a.m., Surveyor reviewed Resident 1's record. Resident 1 was admitted to the provider's facility on 07/23/2024 with diagnoses including paranoid schizophrenia and substance use disorder. Resident 1's record did not include an ISP. On 09/19/2024 at approximately 9:00 a.m., Surveyor interviewed Licensee A and asked if Resident 1 had an ISP. Licensee A replied, "I'm going to be honest. I haven't done it."	M 404		
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	M 424		

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M 424	Continued From page 4	M 424		

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 the individual service plan (ISP) for 1 of 1 residents reviewed that resided at the provider's home for greater than 6 months was reviewed at least once every 6 months with the licensee, resident or resident's guardian and the placing agency. Resident 2's ISP had not been reviewed in greater than 1 year.

Findings include:

On 09/19/2024 at approximately 8:50 a.m., Surveyor reviewed Resident 2's record. Resident 2 was admitted to the provider's facility on 02/08/2023 with diagnoses including obsessive compulsive disorder and schizoaffective disorder. Resident 2's record indicated s/he had a legal guardian. Resident 2's record included an ISP, dated 02/08/2023.

On 09/19/2024 at approximately 9:00 a.m., Surveyor interviewed Licensee A and asked if

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M 424	Continued From page 5 s/he had an updated ISP for Resident 2. Licensee A replied, "No," and stated Resident 2 discharged on 07/20/2024 due to behaviors, including threats and verbal aggression. Surveyor reviewed concern that Resident 2's ISP on file was not updated during the 17 months Resident 2 resided at the home and the ISP did not include any behavioral concerns. Licensee A acknowledged Surveyor's observation and stated s/he needed to get his/her ISPs updated and organized.	M 424		
M 448	88.07(2)(b)5 MONITORING HEALTH Monitoring resident health by observing and documenting changes in each resident's health and referring a resident to health care providers when necessary. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure changes in 1 of 2 residents reviewed was documented in his/her record. Resident 2's behaviors, which resulted in discharge, were not documented in his/her record. Findings include: On 09/19/2024 at approximately 8:15 a.m., Surveyor interviewed Caregiver C. Caregiver C stated Resident 2 had recently discharged because s/he was having aggressive behaviors and "pulled a knife on staff." Caregiver C stated Resident 2 was arrested. On 09/19/2024 at approximately 8:50 a.m., Surveyor reviewed Resident 2's record. Resident	M 448		

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M 448	Continued From page 6 2 was admitted to the provider's facility on 02/08/2023 with diagnoses including obsessive compulsive disorder and schizoaffective disorder. Resident 2's record indicated s/he had a legal guardian. Resident 2's record, including his/her ISP, did not include documentation of any behavioral concerns. On 09/19/2024 at approximately 9:00 a.m., Surveyor interviewed Licensee A and asked why Resident 2 was no longer residing at the home. Licensee A stated Resident 2 was discharged on 07/20/2024 due to behaviors. Licensee A stated Resident 2 would often become verbal aggressive towards the provider's staff and other residents, but that s/he was ultimately discharged after threatening staff with a knife. Licensee A explained that on 07/20/2024, Resident 2 had called the provider's home from the local park and threatened staff, returned to the home and become verbally aggressive with staff and then grabbed a knife and threated to kill staff. Licensee A stated law enforcement was called, Resident 2 was arrested, and was not returning to the home. Surveyor asked Licensee A if s/he had any documentation of Resident 2's behavioral concerns in the record. Licensee A replied, "No. Just verbal updates to [his/her] care team and maybe emails."	M 448		
M 464	88.07(3)(d) MEDICATION- WRITTEN ORDER Before the licensee or service provider dispenses or administers a prescription medication to a resident, the licensee shall obtain a written order from the physician who prescribed the medication specifying who by name or position is permitted	M 464		

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M 464	Continued From page 7 to administer the medication, under what circumstances and in what dosage the medication is to be administered. The licensee shall keep the written order in the resident's file. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure a written order from the resident's physician permitting the provider's staff to administer medications was received before administering medications for 1 of 2 residents reviewed. The provider did not have a written order to administer medications to Resident 1. Findings include: On 09/19/2024 at approximately 8:50 a.m., Surveyor reviewed Resident 1's record. Resident 1 was admitted to the provider's facility on 07/23/2024 with diagnoses including paranoid schizophrenia and substance use disorder. Resident 1's record indicated the provider's staff administered Resident 1's medications. The record did not include a written physician order permitting staff to administer medications. On 09/19/2024 at approximately 9:00 a.m., Surveyor interviewed Licensee A and asked if s/he had obtained an order from Resident 1's physician to administer medications. Licensee A replied, "I don't have one."	M 464		
M 570	88.10(3)(l) Safe Physical Environment Individuals, except for correctional residents,	M 570		

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M 570	Continued From page 8 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 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 safeguard residents from environmental hazards. The provider's water temperature exceeded 120° F. Findings include: The provider is licensed to serve clients with diagnoses of alcohol/drug dependent, advanced age, emotionally disturbed/mental illness, traumatic brain injury, irreversible dementia/Alzheimer's, developmentally disabled and physically disabled. On 09/19/2024 at approximately 8:30 a.m., Surveyor toured the provider's home and tested the water temperature in the main floor bathroom, used by 4 of 4 residents. The water temperature reached 131.3° F. Surveyor shared concern regarding the temperature of the water with Licensee A, who stated s/he would have the landlord turn the water temperature down. "Exposure to hot water is a potential environmental danger for residents. Elderly residents and residents with mental and physical	M 570		

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M 570	Continued From page 9 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." (Source: Publication DHS P-01942 - 08/2017).	M 570		