

Tony Evers
Governor



Kirsten L. Johnson
Secretary

State of Wisconsin
Department of Health Services

DIVISION OF QUALITY ASSURANCE

BUREAU OF ASSISTED LIVING
MADISON/SOUTHERN REGIONAL OFFICE
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January 31, 2024

ELECTRONIC MAIL

SOD #805Z11

NOTICE and ORDER

NOTICE OF VIOLATION

ORDER TO COMPLY WITH REQUIREMENTS

NOTICE OF SPECIAL ORDERS

Lisa Olson
4033 123rd Street Suite A
Chippewa Falls, WI 54729

C/O Licensee: REM Wisconsin, Inc.

Re: REM Harmony (0013180) AFH, Dane County
5333 Kevins Way
Madison, WI 53714

Dear Lisa Olson:

This letter is a statutory NOTICE of VIOLATION and imposed ORDER on the licensee of REM Harmony, located at 5333 Kevins Way, Madison, WI 53714, and sets forth appeal rights, if any. This regulatory action is taken by the Department of Health Services (Department) pursuant to Wis. Stat § 50.033(2), and Wis. Admin. Code § DHS 88.

NOTICE OF VIOLATION

On 10/27/2023, a standard survey was concluded for REM Harmony by the Division of Quality Assurance, Bureau of Assisted Living, to determine if the above-referenced facility was in substantial compliance with Wis. Stat. ch. 50 or Wis. Admin. Code ch. DHS 88, or both, which set forth requirements for the administration and operation of an adult family home (AFH). The Department is issuing Statement of Deficiency (SOD) #805Z11 for violations of Wis. Stat. ch. 50 or Wis. Admin. Code ch. DHS 88, which establish the grounds for this action. SOD #805Z11 is enclosed.

ORDER TO COMPLY WITH REQUIREMENTS

1. Pursuant to Wis. Admin. Code § DHS 88.03(6)(g)2.b., effective immediately, the licensee shall comply with the requirements specified by Wis. Admin. Code ch. DHS 88 that establishes the standards for the operation of the Adult Family Home in order to protect and promote the health, safety, and welfare of the residents.

AS SOON AS PRACTICABLE AND WITHOUT DELAY, within 45 days of receipt of this notice, the licensee shall achieve and maintain substantial compliance with all requirements. All operational and resident records required as evidence of compliance with applicable rules will be available to department representatives upon request.

The Department may, without notice, conduct an inspection to verify the licensee's corrective action at any time after the date of compliance. Pursuant to Wis. Stat. § 50.033(3), the department may impose a \$200 inspection fee for an on-site inspection to review compliance of violations resulting in enforcement action.

ADDITIONALLY:

WITHIN 10 DAYS of receipt of this notice, the licensee may request an extension for the date of compliance. The request for an extension must be submitted to the Assisted Living Regional Director, Southern Regional Office, at DHSDQABALSRO@dhs.wisconsin.gov. The Regional Director will communicate to the licensee a decision on the date of compliance extension.

SPECIAL ORDERS

Based on the results of the Department's investigation, and pursuant to Wis. Stat. § 50.02(2)(am)2., **EFFECTIVE UPON RECEIPT OF THIS NOTICE and ORDER**, the Department of Health Services **HEREBY ORDERS** that **REM Harmony**:

1. Pursuant to Wis. Admin. Code §§ DHS 88.03(6)(g)2.b. and 2.e., effective immediately, the licensee shall comply with the requirements specified by Wis. Admin. Code § DHS 88.04(2)(f). The licensee will not permit the existence or continuation of any condition which is or may create a substantial risk to the health, safety, or welfare of any resident. The licensee will ensure all current and prospective service providers will have the necessary skills and training to fulfill job duties. Assigned tasks will be limited to the documented qualifications and demonstrated abilities of the service provider. Regardless of date of hire, each service provider will be fully trained before assuming the responsibilities of providing direct care without the supervision of a trained service provider.

WITHIN 45 DAYS of receipt of this notice, the licensee shall review the training records for each service provider and ensure the following:

- Each service provider employed at least 6 months will have completed all initial training as required by Wis. Admin. Code § DHS 88.04(5)(a); and

- Each service provider who may be exposed to blood, body fluids or other moist body substances, including mucous membranes, non-intact skin, secretions, and excretions except sweat, whether or not they contain visible blood shall successfully complete training in standard precautions prior to assuming duties that may expose the service provider to such material, and annually.

ADDITIONALLY,

The licensee and each service provider shall complete 8 hours of training 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.

WITHIN 45 DAYS of receipt of this notice, continuing education requirements must be met for the licensee and all service providers, as appropriate, for calendar year 2023.

Training will be provided by qualified instructors. Training records will include the date/duration of training, an outline of course content and documentation of successful completion of the training requirements.

2. Pursuant to Wis. Admin. Code § DHS 88.03(6)(g)2.e., WITHIN 5 days of receipt of this notice, the licensee shall provide the legal representative and case manager each current resident with a copy of Statement of Deficiency (SOD) 805Z11 and a copy of this Notice and Order letter. The licensee shall retain evidence to verify compliance with Order #2. Acceptable documentation will include signed and dated verification letter or email, or certified mail receipt. Documentation will be made available to department representatives upon request.

* * *

If you have questions about this letter, please contact Hillary Holman, Assisted Living Regional Director, at (608) 266-8339.

Sincerely,

A handwritten signature in black ink, appearing to read "Kenneth Brotheridge", with a stylized flourish at the end.

Kenneth Brotheridge, Assisted Living Director
Bureau of Assisted Living
Division of Quality Assurance

Enclosure
KB/SS