STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0015157	A. BUILDING: _____ B. WING _____	C 09/14/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
INGLEHAVEN	512 ALAN DRIVE MOUNT HOREB, WI 53572

(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
N 000	Initial Comments On 09/14/2023, Surveyor conducted a complaint investigation at Inglehaven, a CBRF in Mount Horeb. Two deficiencies were identified. The complaint was substantiated. Census: 14	N 000		
N 309	83.29(1)(c) 30 day written notice of changes Services and charges. Written notice of any change in services or in charges. The CBRF shall give the resident or the resident ' s legal representative a 30-day written notice of any change in services available or in charges for services that will be in effect for more than 30 days. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure residents or their legal representatives were given a 30-day written notice of a change in charge for services that would be in effect for more than 30 days. The provider changed their charge for services for all residents without issuing a 30-day written notice. Findings include: On 09/14/2023, Surveyor conducted a complaint investigation alleging the provider raised their charge for services without giving residents a 30-day written notice. On 09/14/2023 at approximately 12:10 p.m.,	N 309		

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

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N 309	Continued From page 1 Surveyor interviewed Manager A. Manager A stated every resident had a "level of care" increase effective immediately within the past 90 days. Surveyor requested documentation regarding Resident 1, Resident 2 and Resident 3's change in services or charges. On 09/14/2023 at approximately 12:30 p.m., Surveyor reviewed documentation which included the following: - Resident 1 had a "Level of Care Assessment," dated 06/25/2023 by Manager A, that indicated s/he would be charged $900 for services. The letter was signed by Manager A and Interim Administrator B. - Resident 2 had a "Level of Care Assessment," dated 06/25/2023 by Manager A, that indicated s/he would be charged $750 for services. The letter was signed by Manager A and Interim Administrator B. - Resident 3 had a "Level of Care Assessment," not dated by Manager A, that indicated s/he would be charged $1350 for services. The letter was signed by Manager A and Interim Administrator B. - All 3 residents received a letter, dated 07/05/2023, that stated "Over the past years we have tried our best to keep expenses low, however our operating costs have increased significantly, due to inflated expenses and workforce challenges. After reviewing the finances, we have made the tough decision to increase our Level of Care rates. The level of care assessment tool applies specifically to time in tasks and complexity of the service provided to each specific member. This tool has not had a revision in more than 20 years and the rates previously assessed are simply no longer reasonable. Please call the facility to set up a	N 309		

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N 309	Continued From page 2 time when we can review this for you. The change will be effective August 1, 2023." On 09/14/2023 at approximately 12:45 p.m., Surveyor interviewed Manager A and Interim Administrator B regarding the rate increase. Manager A stated residents didn't previously have a "Level of Care" charge. Manager A stated s/he hand delivered the level of care change to all residents and sent a letter to the financial contacts for residents. Surveyor shared concern that residents were not issued a 30-day notice of the change in charges for services. Interim Administrator B stated the provider already acknowledged their deficient practice with the lack of 30-day notice. Interim Administrator A stated the provider planned to issue a new letter further explaining the change and crediting residents back for 5 days in August. Interim Administrator A stated these actions were in process, but had not been completed yet. On 09/14/2023 at approximately 1:00 p.m., Surveyor interviewed Resident 1. Resident 1 stated s/he was not given 30-day notice of his/her change in charge for services. Resident 1 stated s/he was handed the letter with his/her routine bill. Resident 1 stated s/he attempted to meet with the former administrator regarding the change, but s/he "wouldn't budge." Resident 1, Resident 2 and Resident 3 had a service charge change without a 30-day written notice from the provider.	N 309		
N 491	83.44(2)(c) Interior floors, walls and ceilings. Every interior floor, wall and ceiling shall be clean and in good repair.	N 491		

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N 491	Continued From page 3 This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure every interior floor and ceiling was clean and in good repair. Floors were observed with stains and remnants on them. The ceiling was observed with a water stain. Findings include: On 09/14/2023, Surveyor conducted a complaint investigation alleging the provider lacked housekeeping services. On 09/14/2023 at approximately 11:30 a.m., Surveyor toured the provider's facility. Surveyor observed carpeting with stains throughout the facility's hallway, a water stain in the ceiling in the hallway and floors in resident rooms and bathrooms in need of vacuuming or washing. On 09/14/2023 at 11:50 a.m., Surveyor interviewed Family Member C. Family Member C stated housekeeping was an area that needed work. Family Member C acknowledged that caregivers did what they could and that s/he had no concerns with personal cares, but that s/he often took housekeeping tasks upon him/herself to complete. Family Member C stated s/he vacuumed his/her loved ones room last week and cleaned the bathroom that day. On 09/14/2023 at approximately 12:05 p.m., Surveyor interviewed Caregiver C. Caregiver C stated caregivers were responsible for housekeeping tasks, but the tasks were difficult to complete at times. Caregiver C stated by the time resident cares were completed, meal tasks were completed, medications were passed and	N 491		

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N 491	Continued From page 4 charting was completed, it was difficult to complete cleaning tasks. On 09/14/2023 at approximately 1:00 p.m., Surveyor interviewed Resident 1. Resident 1 stated s/he had no idea when the last time was that staff had cleaned his/her floors. Resident 1, who was observed in a wheelchair, stated s/he cleaned his/her own bathroom floor by using a towel and his/her foot. Surveyor observed bathroom cleaner in Resident 1's room. On 09/14/2023 at approximately 1:20 p.m., Surveyor interviewed Resident 4. Resident 4 stated s/he wasn't sure his/her bedroom carpeting had ever been vacuumed and his/her bathroom was "hardly every cleaned." On 09/14/2023 at approximately 1:45 p.m., Surveyor shared concerns related to housekeeping tasks with Manager A. Manager A stated the water stain Surveyor observed had occurred 2-3 weeks ago from a leak on the floor above and s/he had just followed up with administration in an effort to clean and/or replace the ceiling and carpeting. Manager A stated s/he was surprised to hear resident floors needed attention because cleaning tasks should occur on Sundays when caregivers weren't responsible for showers.	N 491		