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M 000	INITIAL COMMENTS On 08/28/2024, with information gathered through 09/04/2024, Surveyor conducted a standard licensure survey at Good Hand Care AFH. Ten deficiencies were identified. Census: 4	M 000		
M 134	88.03(5)(e)1 SIGNIFICANT CHANGE TO THE RESIDENT Within 24 hours, a significant change in resident status, such as but not limited to an accident requiring hospitalization, missing from the home or a reportable death. A death shall be reported if there is reasonable cause to believe the death was related to use of a physical restraint or psychotropic medications, was a suicide or was accidental. This Rule is not met as evidenced by: Based on record review and interview, the provider did not report to the Department within 24 hours a significant change when Resident 2 fell and fractured bones. Findings include: On 08/28/2024, surveyor reviewed Resident 2's record. Resident 2 moved into the home on 11/04/2015. Resident 2's "Incident Report," dated 03/08/2023, documented: "At 8:00 AM, [Resident 2] reported pain on left	M 134		

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

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M 134	Continued From page 1 U.Q. (upper quarter) of abdomen, felt that [s/he] couldn't move. [S/he] reported that sometime at night [s/he] got up and fell sideways on the end of bed but didn't feel hurt or thought needed help, so [s/he] went back to sleep. Next day when woken up by caregiver [s/he] reported the event. 911 was phoned and was taken to ER (emergency room) at 8:15 AM. AFH (adult family home) followed up with hospital and received instructions for care; two fractured ribs." Resident 2's "Incident Report," dated 11/16/2023, documented: "At 7:30 AM, [Resident 2] went to the bathroom without [his/her] walker, felt dizzy coming up from toilet and fell. [S/he] reported feeling pain on [his/her] left ankle. [Resident 2] was taken to urgent care, x-rays were taken and showed a fractur on the tibia, a boot was given to [Resident 2] to wear until app (appointment with orthopedics). Contact orthopedics, [s/he] will need a cast." On 08/28/2024, at approximately 12:30 PM, Surveyor interviewed Co-Owner B. Co-Owner B stated s/he was not aware that a written report needed to be filed with the Department. On 08/28/2024, Surveyor reviewed the provider's self-reporting file held by the Department. Surveyor found no written report(s) had been submitted to the Department for Resident 2's change in status.	M 134		
M 246	88.04(5)(b) TRAINING-8 HOURS ANNUALLY Except as provided in pars. (c) and (d), the licensee and each service provider shall complete 8 hours of	M 246		

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M 246	Continued From page 2	M 246		

training approved by the licensing agency 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.

This Rule is not met as evidenced by:
Based on interview and record review, the provider did not ensure 2 of 2 staff members (Licensee A and Co-Owner B) received at least 8 hours, per calendar year, of continuing education training related to the health, safety, welfare, rights, and treatment of residents every year, during the calendar year 2022 and 2023.

Findings include:

The provider was licensed on 04/01/2020 to care for up to 4 residents in the client groups physically disabled, advanced aged, emotionally disturbed/mental illness, irreversible dementia/Alzheimer's, and developmentally disabled.

On 08/28/2024, Surveyor reviewed Licensee A's and Co-Owner B's training records.

Licensee A's 2022 continuing education contained 9 hours of training but did not contain training related to medication administration, standard precautions, resident rights, first aid, and fire safety.
Licensee A's 2023 continuing education contained 8.5 hours of training but did not contain training related to medication administration, standard precautions, resident rights, first aid,

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M 246	Continued From page 3 and fire safety. Co-Owner B's, who is a registered nurse, 2022 continuing education contained 12.25 hours of training but did not contain training related to resident rights. Co-Owner B's 2023 continuing education contained 10.5 hours of training but did not contain training related to resident rights and fire safety. On 08/28/2024, at approximately 1:00 PM, Surveyor interviewed Licensee A. Licensee A stated s/he would review the requirements for continuing education.	M 246		
M 278	88.05(3)(b) FREE OF HAZARDS The home shall be free from hazards and kept uncluttered and free of dangerous substances, insects and rodents. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure that the home was a safe environment and that residents were safeguarded from environmental hazards. Toxic chemicals were not securely stored. Findings include: The provider was licensed on 04/01/2020 to care	M 278		

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M 278	Continued From page 4 for up to 4 residents in the client groups physically disabled, advanced aged, emotionally disturbed/mental illness, irreversible dementia/Alzheimer's, and developmentally disabled. The home's current census was 4 residents who were able to ambulate through the home in their wheelchair. The home also had 2 young family members who were able to ambulate throughout the home. On 08/28/2024, at approximately 12:15 PM, Surveyor toured the facility and observed the following in unsecured cabinets: -32 ounce bottle of multi-purpose cleaner -10 ounce spray can of air sanitizer -25 ounce spray bottle of multisurface cleaner -80 fluid ounce jug of max strength drain cleaner -28 fluid ounce jug of calcium, lime, rust dissolver -Gallon jug of bleach -(2) 24 fluid ounce bottle of toilet bowl cleaner On 08/28/2024, at approximately 1:30 PM, Surveyor interviewed Licensee A. Licensee A stated s/he would ensure cleaning compounds were secured in the home.	M 278		
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 service coordinator, if any, the licensee, the resident and the resident's guardian, if any and designated representative, if any,	M 406		

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M 406	Continued From page 5	M 406		

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 2 out of 4 records (Resident 2 and Resident 3) reviewed were developed together with the placing agency, the guardian, and the provider.

Findings include:

On 08/28/2024, Surveyor reviewed Resident 2's and Resident 4's record.

Resident 2 moved into the home on 11/04/2015 and was represented by Guardian D and had a member care organization (MCO) Care Manager. Resident 2's record contained an ISP, dated 7/24/2024, which was not signed and dated by Guardian D or the provider.

Resident 3 moved into the home on 11/11/2022 and was represented by a power of attorney for healthcare and had a MCO Care Manager. Resident 3's record contained an ISP, dated 05/05/2024, which was not signed and dated by the power of attorney or the MCO Care Manager.

On 08/28/2024, at approximately 12:30 PM. Surveyor interviewed Co-Owner B. Co-Owner B understood that resident ISPs were to be reviewed every 6 months and s/he would ensure the resident representatives also signed them.

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M 424	Continued From page 6	M 424		
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 3 resident's (Resident 1) Individual Service Plan (ISP) was reviewed at least every 6 months. This is a repeat deficiency. See Statement of Deficiency (SOD) C7R411, dated 06/18/2018. Findings include: On 08/28/2024, Surveyor reviewed Resident 1's record. Resident 1 moved into the home on 04/08/2022. Resident 1 was represented by managed care organization (MCO) Care Manager (CM) C.	M 424		

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M 424	Continued From page 7 Resident 1's ISP was dated 11/03/2023 and was not signed by CM C. Resident 1's ISP should have been reviewed by his/her care team in 05/2024. On 08/28/2024, at approximately 12:30 PM. Surveyor interviewed Co-Owner B. Co-Owner B understood that resident ISPs were to be reviewed every 6 months and s/he would ensure the MCO care managers also signed them.	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 monitor 1 of 1 resident's (Resident 1) health by administering his/her as-needed (PRN) acetaminophen, cyclobenzaprine, diphenhydramine, and meclizine as a scheduled medication. Findings include: On 08/28/2024, Surveyor reviewed Resident 1's record. Resident 1 was admitted to the home, 04/08/2022, with diagnosis including fibromyalgia (chronic condition that causes widespread pain and tenderness), Resident 1's August 2024 Medication	M 448		

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M 448	Continued From page 8 Administration Record (MAR) documented: Acetaminophen (pain medication) - Take 2 tablets (1000 MG [milligram]) by mouth every 6 hours as needed. The MAR had handwritten notes stating administration was scheduled for 8:00 AM, 2:00 PM, 8:00 PM, The MAR documented the medication had been administered all days and times in August. Cyclobenzaprine - Take 1 tablet by mouth 1 to 2 times daily as needed for muscle spasm. The MAR had handwritten notes stating administration was scheduled for 8:00 AM, 8:00 PM, The MAR documented the medication had been administered all days and times in August. Diphenhydramine - Take 2 capsules (50 MG) by mouth every 6 hours as needed for migraine. The MAR had handwritten notes stating administration was scheduled for 8:00 AM, 8:00 PM, The MAR documented the medication had been administered all days and times in August. Meclizine - Take 1 tablet by mouth every 6 hours as needed for dizziness. The MAR had handwritten notes stating administration was scheduled for 8:00 AM, 2:00 PM, 8:00 PM, The MAR documented the medication had been administered all days and times in August. On 09/02/2024 at 10:49 AM, Surveyor emailed Co-Owner B asking for clarification on why Resident 1's PRN medication was being administered as a scheduled. As of 9:00 AM on 09/04/2024, Surveyor did not receive a response.	M 448		
M 458	88.07(3)(a) PRESCRIPTION MEDICATIONS	M 458		

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M 458	Continued From page 9 Every prescription medication shall be securely stored, shall remain in its original container as received from the pharmacy and be stored as specified by the pharmacist. This Rule is not met as evidenced by: Based on observation and interview, the provider did not securely store medications or store medications as specified by the pharmacist for 2 of 2 residents. Resident 1's dispensed medications were dispensed in a pill cup and sitting on the counter with several residents and family members walking through the home. Resident 1 had expired PRN (as needed) medications stored with his/her current medications. Resident 2 had expired an expired PRN medication stored with his/her current medications. Findings include: Example 1: Resident 1 On 08/28/2024, at approximately 12:48 PM, Surveyor observed a pill cup with a lid that had [Resident 1's] name on it, sitting on the kitchen counter with two red tablets in it. Next to the pill	M 458		

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M 458	Continued From page 10	M 458		

cup was an opened individual pill package that read "[Resident 1] 2 tablet Ferrous Sulf (sulfate) 325 MG (milligram), 12:00 PM."
At approximately 12:50 PM, Surveyor and Co-Owner B removed Resident 1's medication bin from the med cabinet, which was above the kitchen counter. Inside the medication bin were:
Ondansetron - Take 1 tablet as needed for nausea. Start Date 10/15/2022. Expired Date: 10/14/2023.
Ondansetron - Take 1 tablet by mouth every 8 hours as needed for nausea. Start Date: 12/27/2022. Expired Date: 12/26/2023.
Furosemide - Take 1 tablet by mouth every 24 hours as needed for edema weight gain >3 (greater than) lbs (pounds)/24 hours. Start Date: 04/09/2022. Expired Date: 04/08/2023.
Melatonin - Take 1 capsule by mouth once daily at bedtime. Start Date: 05/06/2022. Expired Date: 05/05/2023.
Co-Owner B stated s/he would remove the expired medications and return them to the pharmacy.
Surveyor noted that while Surveyor and Co-Owner B reviewed the resident medications in the med cabinet, Resident 1's dispensed meds remained on the kitchen counter.

Example 2: Resident 2

On 08/28/2024, at approximately 1:00 PM, Surveyor and Co-Owner B reviewed Resident 2's medications in the medication closet and observed the following inhaler:
Albuterol Sulfate, Dispensed Date: 10/12/2020. Inhale 2 puffs by mouth. Remaining doses 204 (Full).

Co-Owner B stated s/he would remove the expired medications and return them to the

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M 458	Continued From page 11 pharmacy.	M 458		
M 462	88.07(3)(c) MEDICATION ASSISTANCE If the licensee or service provider assists a resident with prescription medication, the licensee or service provider shall help the resident securely store the medication, take the correct dosage at the correct time and communicate effectively with his or her physician. This Rule is not met as evidenced by: Based on observation, record review, and interview, the provider did not ensure 1 of 1 resident received medication in the proper dosage and the medications were labeled with resident name and prescription. Resident 2's Fluticasone Propionate and Salmeterol (inhaler for the prevention of an asthma attack) was not labeled with Resident 2's name and prescription and was not administered as prescribed by his/her physician. Findings include: On 08/28/2024, at approximately 12:50 PM, Surveyor and Co-Owner B reviewed Resident 2's medications in the medication closet and observed the following inhaler: Fluticasone Propionate and Salmeterol, 60 blisters, which did not contain a label with Resident 2's name and prescription. Date	M 462		

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Opened: 07/18/2024. Zero remaining actuations (puffs/doses).

Resident 2's August 2024 Medication Administration Record (MAR) documented: Fluticasone - Salmeterol -Inhale 1 puff by mouth twice daily. Scheduled at 8:00 AM and 5:00 PM. Surveyor noted the inhaler had a 30-day supply which would have run out on 08/18/2024, if dispensed according to the physician order.

On 08/28/2024, at approximately 1:15 PM, Surveyor interviewed Co-Owner B. Co-Owner B stated Resident 2 did not always dispense his/her inhaler doses correctly. Co-Owner B stated, "[Resident 2] would continue to hold down the dispenser, causing more doses to be administered." Co-Owner B stated s/he had used all his/her doses and would have to utilize his/her Combivent Respimat inhaler or his/her albuterol sulfate inhaler (rescue inhaler that can help ease asthma symptoms or stop an asthma attack) until the Fluticasone could be refilled in September. Surveyor asked how Co-Owner B knew which inhaler Resident 2 should utilize. Co-Owner B stated Resident 2 was currently using the Combivent Respimat.

Surveyor noted the Fluticasone Propionate and Salmeterol inhaler was a scheduled medication, administered twice a day. The Combivent Respimat inhaler and the Albuterol inhaler were PRN (as needed) inhalers. Surveyor observed Resident 2's Albuterol inhaler had a dispensed date of 10/12/2020. Surveyor observed Resident 2's Combivent Respimat inhaler which had approximately 50 doses left.

On 09/02/2024 at 10:49 AM, Surveyor emailed Co-Owner B asking for clarification on why

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Resident 2's inhaler was not reordered on a 30-day cycle.

As of 9:00 AM on 09/04/2024, Surveyor did not receive a response.

"Combivent Respimat is a short-acting, daily COPD medicine. Short-acting means the medicine only stays in your body for a short time. In the case of Combivent Respimat, that time is 4-6 hours. That's why you can use Combivent Respimat 4 times a day to help keep your airways open. Do not exceed 6 inhalations in 24 hours. Follow directions from your doctor. Do not use Combivent Respimat more often than your doctor has directed. Deaths have been reported with similar inhaled medicines in asthma patients who use the medicine too much. Seek immediate medical attention if your treatment with Combivent Respimat becomes less effective for symptomatic relief, your symptoms become worse, and/or you need to use the product more frequently than usual. Combivent Respimat is not a long-acting medicine or a rescue inhaler." (Source: Boehriner Ingelheim website, Combivent Respimat (ipratropium bromide and albuterol) inhalation spray, 2024, https://patient.boehringer-ingelheim.com/us/ (retrieval date - August 31, 2024).)

"You may see the quantity "60" mentioned in printouts about your prescription, but your inhaler provides 30 doses. The "60" refers to the number of blisters inside the inhaler, and not the number of doses." (Source: Trelegy website, Using your Trelegy Ellipta inhaler, May 2024, https://www.trelegy.com/using-trelegy/how-to-use-trelegy (retrieval date - August 31, 2024).)

"Fluticasone and salmeterol inhalation controls

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOOD HAND CARE AFH	2921 WIMBLEDON WAY MADISON, WI 53716

(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 462	Continued From page 14 the symptoms of certain lung diseases but does not cure these conditions. It may take a week or longer before you feel the full benefit of fluticasone and salmeterol. Continue to use fluticasone and salmeterol even if you feel well. Do not stop using fluticasone and salmeterol without talking to your doctor. If you stop using fluticasone and salmeterol inhalation, your symptoms may return." (Source: Medline Plus website, Fluticasone and Salmeterol Oral Inhalation, April 15, 2019, https://medlineplus.gov/druginfo/meds/a699063.html (retrieval date - August 31, 2024).) Cross Reference: M0458 DHS 88.07(3)(a) Prescription Medication Cross Reference: M0466 DHS 88.07(3)(e)1. Medication - Record Keeping	M 462		
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 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 obtain a written order from the	M 464		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017820	A. BUILDING: _____ B. WING _____	09/04/2024

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M 464	Continued From page 15	M 464		

physician who prescribed the medications, specifying who by name or position was permitted to administer the medication for 1 of 1 resident.

Resident 3 self-administered albuterol (inhaler), Cromolyn (nasal spray), and Epinastine (eye drops) and the provider did not have a written order from his/her physician stating that s/he could self-administer the medications.

Findings include:

On 08/28/2024, Surveyor reviewed Resident 3's record.

Resident 3 was admitted to the facility, 11/02/2022, with diagnoses including traumatic brain injury, depression, and seizures.

Resident 3's August 2024 Medication Administration Record (MAR) documented:
"Albuterol - Inhale 2 puffs by mouth every 6 hours as needed for shortness of breath. Start Date: 03/04/2024."
"Cromolyn - Instill 1 spray into each nostril every 4 hours as needed for flares of nasal congestion, runny nose, post nasal drainage, sneezing. Start Date: 05/23/2024."
"Epinastine - Instill 1 drop in each eye twice daily as needed for eye allergy. Start Date: 03/11/2024."
The MAR did not document that these medications had been administered.

On 08/28/2028, at approximately 1:00 PM, Surveyor interviewed Co-Owner B. Co-Owner B stated Resident 3 kept the medications in his/her room and self-administered. Co-Owner B stated s/he did not know s/he needed a physician order approving this process and would contact

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M 464	Continued From page 16 Resident 3's physician.	M 464		
M 466	88.07(3)(e)1 MEDICATION- RECORD KEEPING The licensee shall keep a record of all prescription medications controlled, dispensed or administered by the licensee which show the name of the resident, the name of the particular medication, the date and time the resident took the medication and errors and omissions. The medication controlled by the licensee shall be kept in a locked place. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure accurate records were kept of all prescription medications administered for 2 of 2 residents. Resident 2's August 2024 Medication Administration Record (MAR) was missing documentation of medication administration of his/her Fluticasone Propionate and Salmeterol (inhaler) and Combivent Respimat (inhaler). Resident 3's August 2024 MAR was missing documentation of medication administration of his/her sodium chloride. Findings include: Example 1: Resident 2 On 08/28/2024, at approximately 12:50 PM, Surveyor observed Resident 2's medications in	M 466		

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M 466	Continued From page 17	M 466		

the med closet. Surveyor observed Resident 2's Fluticasone Propionate and Salmeterol (inhaler) and Combivent Respimat (inhaler). The Fluticasone Propionate and Salmeterol had an opened date of 07/18/2024 and had no dosages left. The Combivent Respimat did not have an opened date and had approximately 50 dosages left.

On 08/28/2024, Surveyor reviewed Resident 2's record.

Resident 2 moved into the home on 11/04/2015.

Resident 2's August 2024 MAR, dated 08/01/2024 to 08/28/2024, documented:
Fluticasone-Salmeterol - Inhale 1 puff by mouth twice daily. Scheduled at 8:00 AM and 5:00 PM.
Combivent Respimat Inhaler - Inhale 1 puff by mouth every 4-6 hours as needed for shortness of breath/wheezing.
The MAR did not document that these medications had been administered in August.

On 08/28/2024, at approximately 1:15 PM, Surveyor interviewed Co-Owner B. Co-Owner B stated Resident 2 did not always dispense his/her inhaler doses correctly. Co-Owner B stated, "[Resident 2] would continue to hold down the dispenser, causing more doses to be administered." Co-Owner B stated s/he had used all his/her doses and would have to utilize his/her Combivent Respimat inhaler or his/her albuterol sulfate inhaler (rescue inhaler that can help ease asthma symptoms or stop an asthma attack) until the Fluticasone could be refilled in September. Surveyor asked how Co-Owner B knew which inhaler Resident 2 should utilize. Co-Owner B stated Resident 2 was currently using the Combivent Respimat.

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M 466	Continued From page 18 On 09/02/2024 at 10:49 AM, Surveyor emailed Co-Owner B asking for clarification on why the dates and times for Resident 2's inhaler administrations were not documented. As of 9:00 AM on 09/04/2024, Surveyor did not receive a response. Example 2: Resident 3 On 08/28/2024, at approximately 12:50 PM, Surveyor observed Resident 3's medications in the med closet. Surveyor observed Resident 3's 12:00 PM dose of sodium chloride had not been administered. On 08/28/2024, Surveyor reviewed Resident 3's record. Resident 3 moved into the home on 11/02/2022. Resident 3's August 2024 MAR, dated 08/01/2024 to 08/28/2024, documented: "Sod (sodium) Chloride - take one tablet by mouth three times daily. Scheduled at 8:00 AM, 12:00 PM, 8:00 PM." Start Date: 02/27/2024. The MAR did not document that the medication had been administered in August. On 09/02/2024 at 10:49 AM, Surveyor emailed Co-Owner B asking for clarification on why the dates and times for Resident 3's medication administration were not documented. As of 9:00 AM on 09/04/2024, Surveyor did not receive a response.	M 466		