STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0019051	A. BUILDING: _____ B. WING _____	C 11/12/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ANIYAHS HOUSE	1063 SUMMER ST WEST BEND, WI 53090

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M 000	INITIAL COMMENTS On 11/08/2024, with information gathered through 11/12/2024, Surveyor conducted a standard licensure survey and a complaint investigation. Nine deficiencies were identified. Complaint was unsubstantiated. Census: 2	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, Licensee A did not ensure 2 of 2 caregivers (Caregiver B and Caregiver C) reviewed were screened for illness detrimental to residents, including for tuberculosis (TB) within 90 days before the start of providing care. Findings include: On 11/08/2024, Surveyor reviewed Caregiver B's and Caregiver C's record.	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 B was hired 08/28/2023. Caregiver B's record did not include a communicable disease screen or a tuberculosis test. Caregiver C was hired 07/18/2023. Caregiver C's record did not include a communicable disease screen or a tuberculosis test. On 11/08/2024, at approximately 12:30 PM, Surveyor reviewed concern with Licensee A. Licensee A stated s/he thought Caregiver B and Caregiver C had received their screen for communicable diseases and TB test but was unable to locate the documentation.	M 232		
M 244	88.04(5)(a) TRAINING-15 HOURS WITHIN 6 MONTHS The licensee and each service provider shall complete 15 hours of training approved by the licensing agency related to health, safety and welfare of residents, resident rights and treatment appropriate to residents served prior to or within 6 months after starting to provide care. This training shall include training in fire safety and first aid. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that 1 of 2 service providers (Caregiver B) received resident rights training with his/her 15 hours of initial training. Findings include:	M 244		

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M 244	Continued From page 2 The provider was licensed, 10/11/2022, to serve 3 residents within the client groups developmentally disabled, irreversible dementia/Alzheimer's, terminally ill, advanced aged, correctional clients, traumatic brain injury, and emotionally disturbed/mental illness. On 11/08/2024, Surveyor reviewed Caregiver B's record. Caregiver B was hired 08/28/2023. Caregiver B's record did not include training in resident rights. On 11/08/2024, at approximately 1:00 PM, Surveyor interviewed Licensee A. Licensee A stated s/he would review education requirements with staff.	M 244		
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 the home was a safe environment and that 2 of 2 residents were safeguarded from environmental hazards. Toxic chemicals / cleaning compounds were not	M 278		

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M 278	Continued From page 3 securely stored. Findings include: The provider was licensed, 10/11/2022, to serve 3 residents within the client groups developmentally disabled, irreversible dementia/Alzheimer's, terminally ill, advanced aged, correctional clients, traumatic brain injury, and emotionally disturbed/mental illness. On 11/08/2024, from approximately 10:30 AM to 1:00 PM, Surveyor toured the home and observed the following cleaning compounds unsecured: Kitchen sink cabinet: -Gallon jug of bleach -13 ounce spray can of oven cleaner -32 ounce spray bottle of all purpose cleaner with bleach -Gallon jug of carpet cleaner -Gallon jug of perimeter protection - bug control Resident bathroom: -Quart size spray bottle with all purpose cleaner -32 ounce spray bottle of cleaner with bleach -32 ounce spray bottle of mold & mildew remover -32 ounce spray bottle of disinfectant cleaner -32 ounce spray bottle of foaming bathroom cleaner -32 ounce spray bottle of glass cleaner The chemicals were left unsupervised from approximately 11:30 AM to 12:20 PM while two residents were present in the home. On 11/08/2024, Surveyor reviewed Resident 1's record.	M 278		

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M 278	Continued From page 4 Resident 1 moved into the home in 11/2022 with diagnoses including schizophrenia, drug induced akathisia (inability to remain physically still), and alcohol dependence with other alcohol-induced disorder. Surveyor was unable to review Resident 2's record as his/her individual service plan had not been developed. On 11/08/2024, at approximately 12:45 PM, Surveyor interviewed Licensee A. Licensee A stated s/he would ensure cleaning compounds were secured.	M 278		
M 346	88.05(4)(d)2.b FIRE EVACUATION ANNUAL EVALUATION Each resident shall be evaluated annually for evacuation time, using the departments form. All service providers who work on the premises shall be made aware of each resident having an evacuation time of more than 2 minutes. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 resident was evaluated annually for evacuation time, using the Department's form. Resident 1's evacuation assessment was not completed in 2023. Findings include: On 11/08/2024, Surveyor reviewed Resident 1's	M 346		

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M 346	Continued From page 5 record. Resident 1 moved into the home in 11/2022. Resident 1's Evacuation Assessment was dated 11/17/2022. Resident 1's annual assessment should have been completed in 11/2023. On 11/08/2024, at approximately 1:00 PM, Surveyor interviewed Licensee A. Licensee A stated s/he would update Resident 1's evacuation assessment.	M 346		
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 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 have a service agreement for 2 of 3 residents (Resident 2 and Resident 3) prior to admission. Findings include:	M 384		

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M 384	Continued From page 6 On 11/08/2024, Surveyor reviewed Resident 2's and Resident 3's record. Resident 2 was admitted to the home 11/05/2024. Resident 2's record did not contain a service agreement. Resident 3 was admitted to the home 04/19/2024. Resident 3's record did not contain a service agreement. On 11/08/2024, at approximately 1:00 PM, Surveyor interviewed Licensee A. Licensee A stated Resident 2 had just moved into the home two days ago and s/he was still organizing his/her documentation. Licensee A stated Resident 3's power of attorney took the paperwork and never returned it.	M 384		
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 licensee did not ensure 1 of 1 resident (Resident 3) record reviewed had a written assessment and individual service plan (ISP) completed and developed within 30 days after placement. Findings include:	M 404		

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M 404	Continued From page 7 On 11/08/2024, Surveyor reviewed Resident 3's record. Resident 3 moved into the home 04/19/2024. Resident 3's record did not contain an ISP. On 11/08/2024, at approximately 12:50 PM, Surveyor asked Licensee A if s/he had an ISP for Resident 3. Licensee A looked through Resident 3's folder and was unable to locate his/her ISP. Licensee A stated Resident 3's power of attorney must have kept the ISP and not returned it.	M 404		
M 446	88.07(2)(b)4 RECORD OF MEDICAL VISITS AND REPORTS Keeping a current record of all medical visits, reports and recommendations for a resident. This Rule is not met as evidenced by: Based on record review and interview, Licensee A did not ensure record was kept of all medical visits, reports and recommendations for 1 of 1 resident reviewed. Findings include: On 09/16/2024, the Department received a concern that resident's weights were not being monitored. On 11/08/2024, Surveyor reviewed Resident 1's record. Resident 1 was admitted in 11/2022 with a diagnosis of schizophrenia.	M 446		

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M 446	Continued From page 8 Resident 1's "Individual Service Plan," dated 06/15/2024, documented: "Health Monitoring: Staff will schedule all appointments for [Resident 1]. [Resident 1] will be reminded of appointments and appointments will be marked on the calendar. [Provider] will offer transportation to and from appointments and physically be present if [Resident 1] requests it. [Provider] will monitor the physical and mental health of [Resident 1] and assist [him/her] with any medical and mental health needs. Any changes to physical and mental health status will be reported to [Resident 1's] care manager." Resident 1's record did not contain a health exam. On 11/08/2024, at approximately 1:00 PM, Surveyor interviewed Licensee A. Licensee A stated Resident 1 did not provide that documentation to provider. Licensee A could not explain how the provider monitored Resident 1's health.	M 446		
M 482	88.09(1)(a) RESIDENT RECORDS The licensee shall maintain a record for each resident. Resident records 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, record review and interview, the provider did not maintain records for 2 of 2 residents (Resident 1 and Resident 2) in	M 482		

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M 482	Continued From page 9 a secure location within the home. Findings include: On 11/08/2024, at approximately 10:30 AM, Surveyor arrived at the home and was greeted by Licensee A. Licensee A stated s/he had two caregivers (Caregiver B and Caregiver C) who normally assisted at the home. Surveyor requested Resident 1's and Resident 2's records. Licensee A stated the records were at his/her other home. Surveyor asked how Caregiver B and Caregiver C reviewed Resident 1's and Resident 2's individual service plans to ensure accurate cares were provided. Licensee A did not have a response.	M 482		
M 556	88.10(3)(e) Self-Direction Self-direction. To have opportunities to make decisions relating to care, activities and other aspects of life in the adult family home. No curfew, rule or other restrictions on a resident's freedom of choice shall be imposed unless specifically identified in the home's program statement or the resident's individual service plan. An adult family home shall help any resident who expresses a preference for more independent living to contact any agency needed to arrange it. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure the right to freedom of choice for 2 of 2 residents in the home.	M 556		

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M 556	Continued From page 10 "House Rules" posted in the home stated that residents had a curfew, limits when they could have visitors, kitchen hours and designated smoking times. Findings include: On 11/08/2024, from approximately 10:30 AM to 1:00 PM, Surveyor toured the home and observed the following signs: "House Rules: Kitchen closes at 9 pm (NO EXCEPTIONS); Curfew is 11 pm; Visitors are allowed until 10 pm." "Smoke Schedule: 8AM, 10AM, 12PM, 2PM, 4PM, 6PM, 8PM. There won't be any smoking after 8PM whatsoever. Smoking is to be done outside and all cigarette butts must be put in smoking receptacle NO EXCEPTIONS!!!!!" On 11/08/2024, at approximately 12:08 PM, Surveyor interviewed Resident 2, Resident 1 was not in the home during the survey. Resident 2 stated s/he was not sure what the house rules were since s/he had only lived in the home for 2 days. On 11/08/2024, at approximately 12:30 PM, Surveyor asked Licensee A to explain the signage that placed restrictions on the residents. Licensee A stated the signage was meant for another resident who no longer resided in the home. Licensee A stated s/he did not realize these timeframes could be considered a violation of a resident's rights. On 11/08/2024, Surveyor reviewed Resident 1's record. Resident 1 moved into the home in 11/2022 with	M 556		

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M 556	Continued From page 11 diagnoses including schizophrenia, drug induced akathisia (inability to remain physically still), and alcohol dependence with other alcohol-induced disorder. Resident 1's "Individual Service Plan," dated 11/16/2022, 06/12/2023, 12/30/2023, and 06/15/2024, documented: "Supervision: [Resident 1] is [his/her] own guardian and can be in the home and in the community with or without supervision. [Resident 1] has no restrictive measures in place."	M 556		