STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0014440	A. BUILDING: _____ B. WING _____	07/12/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ROCK VALLEY COMM PROG INC CRISIS UNIT	203 W SUNNY LANE RD JANESVILLE, WI 53546

(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 07/12/2024, Surveyor conducted a standard licensure survey at Rock Valley Community Programs Inc Crisis Unit. Three deficiencies were identified. Census: 13	N 000		
N 302	83.28(4)(a) Resident health screening and documentation Resident health screening. 1. Within 90 days before or 7 days after admission, a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse shall screen each person admitted to the CBRF for clinically apparent communicable disease, including tuberculosis, and document the results of the screening. 2. Screening for tuberculosis and all immunizations shall be conducted using centers for disease control and prevention standards. 3. The CBRF shall maintain the screening documentation in each resident ' s record. This Rule is not met as evidenced by: Based on record review and interview, the provider did not have documentation for 1 of 1 resident record reviewed (Resident 1 and Resident 2) for health screening for clinically apparent communicable disease, including tuberculosis (TB) within 90 days before or 7 days after admission from a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse.	N 302		

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

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N 302	Continued From page 1 Findings include: On 07/12/2024, Surveyor reviewed Resident 1's and Resident 2's record. Resident 1 was admitted to the facility on 04/29/2024. Resident 1's record did not contain a communicable disease screen, including TB. Resident 2 was admitted to the facility on 05/02/2024. Resident 2's record did not contain a communicable disease screen, including TB. On 07/12/2024, at approximately 2:30 PM, Surveyor interviewed Clinical Director A. Clinical Director A stated s/he would review the program to determine why TB tests and communicable disease screens were no longer being completed.	N 302		
N 310	83.29(2) Admission agreement include services, charges The admission agreement shall be given in writing and explained orally in the language of the prospective resident or legal representative. Admission is contingent on a person or that person ' s legal representative signing and dating an admission agreement. The admission agreement shall include all of the following: (a) An accurate description of the basic services provided, the rate charged for those services and the method of payment; (b) Information about all additional services offered, but not included in the basic services. The CBRF shall provide a written statement of the fees charged for each of these services; (c) The method for notifying residents of a change in charges for services; (d) Terms for resident notification to the CBRF of voluntary discharge. This paragraph does not apply to a	N 310		

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N 310	Continued From page 2	N 310		

resident in the custody of a government correctional agency; (e) Terms for refunding charges for services paid in advance, entrance fees, or security deposits in the case of transfer, death or voluntary or involuntary discharge; (f) A statement that the amount of the security deposit may not exceed one month ' s fees for services, if security deposit is collected; (g) Terms for holding and charging for a resident ' s room during a resident ' s temporary absence. This paragraph does not apply to a resident in the custody of a government correctional agency; (h) Reasons and notice requirements for involuntary discharge or transfer, including transfers within the CBRF. This paragraph does not apply to a resident in the custody of a government correctional agency.

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure an admission agreement was signed and dated before or at the time of admission for 1 of 2 residents reviewed (Resident 2).

Findings include:

On 07/12/2024, Surveyor reviewed Resident 2's record.

Resident 2 was admitted to the facility on 05/02/2024 and is his/her own person.
Resident 2's admission agreement was signed on 05/14/2024.

On 07/12/2024, at approximately 2:30 PM, Surveyor interviewed Clinical Director A. Clinical Director A stated s/he would review the process

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N 310	Continued From page 3 with staff that all documentation is completed upon admission.	N 310		
N 393	83.35(5)(a) Initial evaluation of evacuation limitations. Initial evaluation. The CBRF shall evaluate each resident within 3 days of the resident ' s admission to determine whether the resident is able to evacuate the CBRF within 2 minutes in an unsprinklered CBRF and 4 minutes in a sprinklered CBRF without any help or verbal or physical prompting, and what type of limitations that resident may have that prevent the resident from evacuating the CBRF within the applicable period of time. A form provided by the department shall be used for the evaluation. The resident ' s evaluation shall be retained in the resident ' s record. This Rule is not met as evidenced by: Based on record review and interview, the provider did not complete an initial evacuation assessment within 3 days of admission for 1 of 2 residents reviewed. Findings include: On 07/12/2024, Surveyor reviewed Resident 2's record. Resident 2 was admitted to the facility on 05/02/2024. Resident 2's evacuation assessment was completed on 05/17/2024, 15 days after admission. On 07/12/2024, at approximately 2:30 PM,	N 393		

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N 393	Continued From page 4 Surveyor interviewed Clinical Director A. Clinical Director A stated s/he would review the process with staff that all documentation is completed upon admission.	N 393		