STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018456	A. BUILDING: _____ B. WING _____	07/26/2023

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BK ASCENT HOMES	6805 VILLAGE PARK DRIVE MADISON, WI 53718

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M 000	INITIAL COMMENTS On 07/26/2023, Surveyor conducted a standard survey at BK Ascent Homes, an AFH in Madison. Nine deficiencies were identified. 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 documentation that Caregiver B had been screened for illness detrimental to residents, including for tuberculosis, was accessible to the department. Findings include: On 07/26/2023 at approximately 7:30 a.m., Surveyor reviewed Caregiver B's record with Caregiver B. Caregiver B was hired by the provider on 01/23/2022. The record provided to Surveyor did not include a communicable disease screen, including a tuberculosis test.	M 232		

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

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M 232	Continued From page 1 On 07/26/2023 at approximately 10:00 a.m., Surveyor followed up with Licensee A to request Caregiver B's communicable disease screen, including a tuberculosis test. Licensee A was given until 07/27/2023 to provide documentation of Caregiver B's communicable disease screen. Licensee A stated s/he would be unable to provide documentation because s/he was out of the country and records were not accessible to him/her or any other involved party.	M 232		
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 the evacuation time of 2 of 2 residents reviewed was evaluated annually. Resident 1 and Resident 2's evacuation assessments were dated greater than 1 year ago. Findings include: On 07/26/2023 at approximately 7:30 a.m., Surveyor reviewed resident records and noted the following: - Resident 1 was admitted to the provider's home on 09/17/2021. Resident 1's evacuation	M 346		

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M 346	Continued From page 2 assessment was dated 09/21/2021. - Resident 2 was admitted to the provider's home on 11/20/2021. Resident 2's evacuation assessment was dated 11/22/2021. On 07/26/2023 at approximately 10:00 a.m., Surveyor followed up with Licensee A to request updated evacuation assessments for Resident 1 and Resident 2. Licensee A was given until 07/27/2023 to provide documentation. Licensee A stated s/he would be unable to provide documentation because s/he was out of the country and records were not accessible to him/her or any other involved party.	M 346		
M 348	88.05(4)(d)2.c SEMI-ANNUAL FIRE DRILLS The licensee shall conduct semi-annual fire drills with all household members with written documentation of the date and the evacuation time for each drill maintained by the home. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure written documentation of semi-annually fire drills was maintained. Findings include: On 07/26/2023 at approximately 8:00 a.m., Surveyor reviewed facility records. Surveyor did not locate record of fire drills. Surveyor asked Caregiver B if the home conducted fire drills. Caregiver B instructed Surveyor to follow up with Licensee A regarding fire drills. On 07/26/2023 at approximately 10:00 a.m., Surveyor followed up with Licensee A to request	M 348		

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M 348	Continued From page 3 documentation of semi-annual fire drills. Licensee A was given until 07/27/2023 to provide documentation. Licensee A stated s/he would be unable to provide documentation because s/he was out of the country and records were not accessible to him/her or any other involved party.	M 348		
M 380	88.06(2)(a) ADMISSION-HEALTH EXAM Except as provided in subd. 2., the licensee shall ensure that a new resident of an adult family home receives a health examination by a physician to identify health problems and is screened for communicable disease, including tuberculosis. Screening for communicable disease may be provided by a physician, a registered nurse or a physician assistant. The health examination and screening shall take place within 90 days prior to admission to the home or within 7 days after admission. This Rule is not met as evidenced by: Based on record review and interview, Licensee A did not ensure that 1 of 2 residents reviewed were screened for communicable disease, including a tuberculosis test, within 90 days prior to admission or 7 days after admission. Resident 2's tuberculosis test was greater than 90 days prior to admission. Findings include: On 07/26/2023 at approximately 7:30 a.m., Surveyor reviewed Resident 2's record. Resident 2 was admitted to the provider's home on 11/20/2021. Resident 2's record included a letter	M 380		

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M 380	Continued From page 4 from the physician that referenced a tuberculosis test in July 2020, greater than 90 days prior to Resident 2's admission. On 07/26/2023 at approximately 10:00 a.m., Surveyor followed up with Licensee A and asked if Resident 2 had a tuberculosis test was completed within 90 days prior to Resident 2's admission. Licensee A did not answer Surveyor's question. Licensee A was given until 07/27/2023 to provide follow up documentation. No documentation was received.	M 380		
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, Licensee A did not ensure that 1 of 2 residents had a service agreement completed prior to admission. Resident 1's service agreement was dated 11/05/2021, greater than 30 days after admission. Findings include:	M 384		

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M 384	Continued From page 5 On 07/26/2023 at approximately 7:30 a.m., Surveyor reviewed Resident 1's record. Resident 1 was admitted to the provider's home on 09/17/2021. Resident 1's service agreement was dated 11/05/2021. On 07/26/2023 at approximately 10:00 a.m., Surveyor followed up with Licensee A and asked if there was a different service agreement signed prior to or at the time of Resident 1's admission. Licensee A stated s/he would clarify. Licensee A was given until 07/27/2023 to provide documentation. No response or documentation related to Resident 1's service agreement was received.	M 384		
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.	M 424		

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M 424	Continued From page 6 This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure the individual service plan (ISP) was reviewed at least once every 6 months. Resident 1 and Resident 2's ISPs were not reviewed in the past 6 months. Findings include: On 07/26/2023 at approximately 7:30 a.m., Surveyor reviewed resident records and noted the following: - Resident 1 was admitted to the provider's home on 09/17/2021. Resident 1's ISP was dated 11/05/2021. - Resident 2 was admitted to the provider's home on 11/20/2021. Resident 2's ISP was dated 11/2021. On 07/26/2023 at approximately 10:00 a.m., Surveyor followed up with Licensee A to request updated ISPs for Resident 1 and Resident 2. Licensee A was given until 07/27/2023 to provide documentation. Licensee A stated s/he would be unable to provide documentation because s/he was out of the country and records were not accessible to him/her or any other involved party.	M 424		
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	M 464		

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M 464	Continued From page 7	M 464		

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 ensure a written order from the physician to administer medications was kept in 2 of 2 resident files. Resident 1 and Resident 2 did not have physician orders to administer medications in their records.

Findings include:

On 07/26/2023 at approximately 7:30 a.m., Surveyor reviewed resident records and noted the following:

- Resident 1 was admitted to the provider's home on 09/17/2021. Caregiver B confirmed the facility administered Resident 1's medications. Resident 1's record did not include a physician order to administer medications.
- Resident 2 was admitted to the provider's home on 11/20/2021. Caregiver B confirmed the facility administered Resident 2's medications. Resident 2's record did not include a physician order to administer medications.

On 07/26/2023 at approximately 10:00 a.m., Surveyor followed up with Licensee A to request physician orders to administer medications. Licensee A stated s/he had orders, but they were not located in the resident records. Licensee A was given until 07/27/2023 to provide documentation. Licensee A stated s/he would be unable to provide documentation because s/he was out of the country and records were not

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M 464	Continued From page 8 accessible to him/her or any other involved party.	M 464		
M 540	88.09(2)(c) Location and Retention Period Location and retention period. Service provider and licensee records shall be available at the adult family home for review by the licensing agency. A service provider's record shall be available while the service provider is employed by the home and for at least 3 years after ending employment. This Rule is not met as evidenced by: Based on record review and interview, Licensee A did not ensure Caregiver B's record was available at the home for review by the department. Caregiver B's background checks were not available for Surveyor to review. Findings include: On 07/26/2023 at approximately 7:30 a.m., Surveyor reviewed Caregiver B's record with Caregiver B. Caregiver B was hired by the provider on 01/23/2022. The record provided to Surveyor did not include documentation of background checks. On 07/26/2023 at approximately 10:00 a.m., Surveyor followed up with Licensee A to request Caregiver B's background checks. Licensee A was given until 07/27/2023 to provide documentation. Licensee A stated s/he would be unable to provide documentation because s/he was out of the country and records were not accessible to him/her or any other involved party.	M 540		

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M 570	88.10(3)(l) Safe Physical Environment Individuals, except for correctional residents, have basic rights which they do not lose when they enter an adult family home. A resident shall have a safe environment in which to live. The adult family home shall safeguard residents who cannot fully guard themselves from environmental hazards to which they are likely to be exposed, including conditions which would be hazardous to anyone and conditions which would be or are hazardous to a particular resident because of the resident's condition or disability. This Rule is not met as evidenced by: Based on observation and interview, the provider did not safeguard residents from environmental hazards. The provider's water temperature exceeded 120° F in 2 of 2 bathrooms. Findings include: The provider is licensed to serve residents with diagnoses of advanced age and developmental disability. On 07/26/2023 at approximately 8:00 a.m., Surveyor toured the provider's home and tested the water temperature in 2 bathrooms. The water in the upstairs bathroom reached 132.4° F and the water in the bathroom in the lower level reached 132.2° F. Visible steam was coming from both faucets. "Exposure to hot water is a potential environmental danger for residents. Elderly residents and residents with mental and physical disabilities may have neurological conditions that	M 570		

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M 570	Continued From page 10 prevent instant recoil from hot water. Because these individuals do not instantly react to dangerous temperature levels, they are at particular risk for injury. Hot water can cause scalding; e.g., second and third degree burns in which the skin blisters and swells. In such instances, skin does not return to normal and forms scar tissue upon healing. These burns may lead to permanent disability." (Source: Publication DHS P-01942 - 08/2017). On 07/26/2023 at approximately 9:45 a.m., Surveyor reviewed concern with Licensee A that the provider's water temperature exceeded 120° F. Licensee A stated s/he would address the concern.	M 570		