STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0019519	A. BUILDING: _____ B. WING _____	03/09/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
UPLIFTINGHOMES LLC	2847 CIMARRON TRAIL MADISON, WI 53719

(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 000	INITIAL COMMENTS On 03/05/2026, with information gathered through 03/09/2026, Surveyor conducted a standard licensure survey. Five deficiencies were identified. Census: 1	M 000		
M 235	88.04(2)(h) COMPLY WITH OSHA The licensee and all service providers involved in the operation of the adult family home shall comply with the universal precautions contained in the U.S. Occupational Safety and Health Administration Standard 29 CFR 1910.1030 for the control of blood-borne pathogens. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure 2 of 2 service providers involved in the operation of the adult family home complied with the universal precautions contained in the U.S. Occupational Safety and Health Administration (OSHA) Standard 29 CFR 1910.1030 for the control of blood-borne pathogens. Director A did not complete annual training in 2025. Resident Aide B did not complete initial training regarding standard precautions Findings include: U.S. OSHA Standard 29 CFR 1910.1030 states, in part: "The employer shall train each employee	M 235		

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

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M 235	Continued From page 1	M 235		

with occupational exposure in accordance with the requirements of this section. Such training must be provided at no cost to the employee and during working hours. The employer shall institute a training program and ensure employee participation in the program. Training shall be provided as follows: At the time of initial assignment to tasks where occupational exposure may take place; At least annually thereafter."

Findings include:

The provider was licensed to provide cares for up to 4 residents in the client groups advanced aged, developmentally disabled and emotionally disturbed/mental illness.

On 03/05/2026, at approximately 9:30 AM, Resident 1 approached Surveyor and stated that s/he had a bad day yesterday and s/he hurt Director A. Resident 1 stated, "I scratched [him/her]." Resident 1 showed me Director A's arm where scratch marks were observed.

On 03/05/2026, at approximately 10:30 AM, Surveyor asked Director A for staff personnel records. Director A stated s/he did not have the files in the home and would need to email them to the Surveyor.

On 03/09/2026, Surveyor reviewed Director A's and Resident Aide B's personnel record.

Director A was hired in 01/2024. His/her file did not include annual training for universal precautions related to the control of blood-borne pathogens in 2025.

Resident Assistant B was hired 11/04/2024.

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M 235	Continued From page 2 His/her file did not contain annual training for universal precautions related to the control of blood-borne pathogens. On 03/09/2026 at 5:48 PM, Surveyor emailed Director A and stated that s/he had not provided documentation showing that s/he had received universal precautions training in 2025 and Resident Aide B did not receive initial universal precautions training. On 03/09/2026 at 9:33 PM, Director A emailed Surveyor and stated s/he and Resident Aide B had completed standard precautions. The attachments included in the email did not provide those training documents.	M 235		
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 1 service providers (Resident Aide B) received 15 hours of initial training related to health, safety and welfare of residents, resident rights and treatment	M 244		

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M 244	Continued From page 3 appropriate to residents served prior to or within 6 months after starting to provide care. Findings include: The provider was licensed to provide cares for up to 4 residents in the client groups advanced aged, developmentally disabled and emotionally disturbed/mental illness. On 03/05/2026, at approximately 10:30 AM, Surveyor asked Director A for a staff listing with hire date. Director A stated there were 3 staff members and Resident Aide B was the newest hire. Surveyor requested Resident Aide B's personnel records and training received within his/her first six months after his/her hire date. Director A stated s/he understood but did not have the files in the home and would need to email them to the Surveyor. On 03/06/2026 at 6:40 AM, Surveyor emailed Director A and identified that s/he had requested to review Resident Aide B's training records since his/her hire. On 03/09/2026 at 5:26 PM, Director A emailed Surveyor Resident Aide B's training records. On 03/09/2026, Surveyor reviewed Resident Aide B's record. Resident Aide B was hired 11/04/2024. Resident Aide B did not have documented training until 11/06/2025.	M 244		
M 380	88.06(2)(a) ADMISSION-HEALTH EXAM Except as provided in subd. 2., the	M 380		

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M 380	Continued From page 4 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, the provider did not have 1 of 1 resident (Resident 1) screened for communicable disease, including tuberculosis (TB), within 90 days prior to the admission to the home or within 7 days after admission. Census: 1. Findings include: On 03/05/2026, at approximately 10:00 AM, Surveyor and Director A reviewed Resident 1's record. Resident 1 moved into the home 05/06/2024. Resident 1's record did not include a communicable disease screen nor a TB test. Director A stated that Resident 1 had previously resided at a mental health facility, and s/he was unsure if a communicable disease screen and TB test had been completed. Director A stated s/he would schedule an appointment for Resident 1 to have these requirements completed.	M 380		

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M 424	Continued From page 5	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 1 resident's (Resident 1) Individual Service Plans (ISP) was reviewed at least once every six months by the licensee, the resident and/or resident's guardian, and the placing agency if applicable. Findings include: On 03/05/2026, at approximately 10:00 AM, Surveyor and Director A reviewed Resident 1's record.	M 424		

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M 424	Continued From page 6 Resident 1 moved into the home, 05/06/2024, with diagnosis including traumatic brain injury. Resident 1 was represented by Guardian C and managed care organization (MCO) Care Manager (CM) D. Resident 1's record contained an MCO Behavior Support Plan (BSP), dated 11/03/2025, which contained no signatures from the resident and/or resident representative, the provider, or the placing agency. Resident 1's record did not contain an ISP or an MCO Member Centered Plan (MCP) that identified cares required and staff guidelines related to activities of daily living (ADLs), referring to essential, routine self-care tasks-bathing, dressing, eating, toileting, transferring (mobility), and continence-used to assess a person's functional independence and need for care. On 03/05/2026, at approximately 10:05 AM, Surveyor asked Director A if the provider had developed an ISP for Resident 1. Director A stated the provider had not developed their own ISP for Resident 1 and stated an ISP would be developed and ensure that all activities of daily living (ADLs) were captured. Director A would ensure that the ISP was developed in coordination with Guardian C and CM D.	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	M 464		

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M 464	Continued From page 7 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 have a written order from the physician who prescribed the medications, 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 for 1 of 1 resident. Census 1. Findings include: On 03/05/2026, at approximately 10:00 AM, Surveyor and Director A reviewed Resident 1's record. Resident 1 moved into the home 05/06/2024. Resident 1's record did not include a written order from the physician who prescribed the medications, 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. Resident 1's February 2026 Medication Administration Record (MAR) documented staff had administered his/her prescribed Atorvastatin (medication to lower cholesterol), Benztropine (medication to assist muscle control), Cetirizine (antihistamine) and Divalproex (medication to treat seizures).	M 464		

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M 464	Continued From page 8 Director A stated that s/he would contact Resident 1's psychiatrist and request a written order stating that staff were administering his/her prescribed medications.	M 464		