STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0014371	A. BUILDING: _____ B. WING _____	R-C 09/23/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
A BETTER LIVING FAMILY SERVICES SITE 3	9104 W CUSTER AVE MILWAUKEE, WI 53225

(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 09/18/2025, with information gathered through 09/23/2025, Surveyor completed 1 complaint investigation and a verification visit at A Better Living Family Services Site 3. As result, 3 of the previous 5 deficiencies were corrected. Two of the previous deficiencies were re-cited with 2 new deficiencies; therefore, 4 total deficiencies identified. One complaint was substantiated. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee will be assessed. Census: 3	{M 000}		
{M 262}	88.05(2)(a) DIFFICULTY WALKING If a resident is not able to walk at all or able to walk only with difficulty, or only with the assistance of crutches, a cane, or walker or is unable to easily negotiate stairs without assistance: 1. The exits from the home shall be ramped to grade with a hard surfaced pathway with handrails. 2. All entrance and exit doors and interior doors serving all common living areas and all bathrooms and bedrooms used by a resident not able to walk at all shall have a clear opening of at least 32 inches. 3. Toilet and bathing facilities used by a resident not able to walk at all shall have enough space to provide a turning radius for the resident's wheelchair and provide accessibility appropriate to the resident's needs.	{M 262}		

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

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{M 262}	Continued From page 1 This Rule is not met as evidenced by: Based on observation, record review, and interview, the provider did not ensure 1 of 2 exits from the home were ramped to grade. The rear exit of the home contained a ¾ inch rise between the interior floor and the threshold of the door. From the threshold of the door to the concrete to the ramp was a 1 ½ inch drop. The exit ramp also contained a twin sized mattress on the exit ramp. This is a repeat deficiency. See Statement of Deficiency (SOD) J78H13, dated 07/30/2024. Findings include: The facility was licensed on 12/20/2012, to serve up to 4 non-ambulatory residents. On 09/18/2025, at approximately 11:00 AM, Surveyor toured the facility and observed the rear exit. The rear exit of the home using a tape measure and observed it contained a ¾ inch rise between the interior floor and the threshold of the door. From the threshold of the door to the concrete to the ramp was a 1 ½ inch drop. Surveyor observed a twin sized mattress laying on the ramp of the exit. Surveyors observed Resident 6 in his/her room. Surveyors observed a wheelchair in Resident 6's room. Resident 6 confirmed s/he used a powered wheelchair for mobility. The posted floor plan identified the rear exit as an emergency exit. 2010 Americans with Disabilities Act (ADA) Standards for Accessible Design states, "303	{M 262}		

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{M 262}	Continued From page 2 Changes in Level. 303.1 General. Where changes in level are permitted din floor or ground surfaces, they shall comply with 303...303.3 Beveled. Changes in level between 1/4 inch high minimum and 1/2 inch high maximum shall be beveled with a slope not steeper than 1:2." (Source: 2010 ADA Standards for Accessible Design website, Chapter 3: Building Blocks, September 15, 2010, 2010 ADA Standards for Accessible Design | ADA.gov (retrieval date - September 18, 2025).) On 09/18/2025, at approximately 1:30 PM, Surveyor interviewed Licensee A. Licensee A reported the mattress was put there by the upstairs neighbors and would be removed on 09/18/2025. Licensee A was unsure how long the mattress resided on the exit ramp. Licensee A indicated s/he had a metal transitional piece on the inside and outside of the door and was unsure of what happened to the metal transition piece.	{M 262}		
{M 276}	88.05(3)(a) Homelike Environment An adult family home shall be safe, clean and well-maintained and shall provide a homelike environment. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure a safe, clean, and well-maintained	{M 276}		

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{M 276}	Continued From page 3 homelike environment for 3 of 3 residents in the home. The kitchen, basement, dining room, resident rooms, and bathroom needed cleaning and maintenance. This is deficiency is being cited for the 3rd time. See Statement of Deficiency (SOD) J78H12, dated 05/09/2023, SOD J78H13, dated 07/30/2024. Findings include: On 09/18/2025 at 11:00 AM, Surveyor toured the facility and observed the following: Kitchen: -Under the kitchen sink, the bottom floor of the cabinet was missing, exposing the floor below the cabinet. The bottom of the cabinet contained shards of wood pieces which resembled broken/ rotted plywood. -The rear exit door on the north side of the home was missing a door trim piece. Dining Room: -The dining room chandelier was missing 3 light bulbs. Basement: - The basement wall behind the washer and dryer were covered in a thick gray substance consistent with dryer lint. Bathroom: -The floor contained a hole where the baseboard register should have been. There was no	{M 276}		

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{M 276}	Continued From page 4 baseboard register in place. Resident 3's bedroom: -The ceiling fan and walls was covered in a thick gray substance which resembled dust. Resident 7s bedroom: -The ceiling fan and walls of the room were covered in a thick gray substance which resembled dust. On 09/18/2025, at approximately 1:30 PM, Surveyor interviewed Licensee A. Licensee A did not have an explanation as to why the condition of the home was not clean and well maintained. Licensee A reported staff are responsible for keeping the home clean.	{M 276}		
M 572	88.10(3)(m) Freedom from Abuse Freedom from abuse. To be free from physical, sexual or mental abuse, neglect, and financial exploitation or misappropriation of property. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 resident (Resident 6) was free from financial exploitation. A former caregiver (Caregiver G) borrowed money from Resident 6 and continued to use Resident 6's bank card without Resident 6's permission. Findings include: On 09/02/2025, the department received a complaint that alleged a former staff member had	M 572		

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M 572	Continued From page 5 misappropriated a resident's funds. On 09/18/2025, at approximately 1:00 PM, Surveyor reviewed Resident 6's record. Resident 6 was admitted to the facility on 07/17/2025. Resident 6 was her/his own person. Resident 6's individual service plan (ISP), dated 07/17/2025, reported Resident 6 manages his/her own finances. On 09/18/2025, at approximately 11:20 AM, Surveyor interviewed Resident 6. Resident 6 reported Caregiver G asked to borrow $50 around the second week of August 2025. Resident 6 agreed to loan Caregiver G $50. Resident 6 reported s/he did not inform House Manager F and Licensee A of when Caregiver G asked to borrow money from him/her. Resident 6 reported s/he was not afraid or scared of Caregiver G, but had believed Caregiver G would return his/her bank card and the $50 borrowed. Resident 6 reported Caregiver G continued to use his/her bank card. Resident 6 reported s/he noticed a total of $458 was debited from his/her account. Resident 6 reported his/her concern to House Manager F, approximately 2 weeks after s/he gave Caregiver G his/her debit card. Resident 6 reported Caregiver G refused to return his/her bank card; therefore, s/he ordered a bank card with a new pin number. Resident 6 reported Licensee A returned $458 to him/her and Caregiver G was no longer employed at the facility. On 09/18/2025, at approximately 12:00 PM, Surveyor interviewed House Manager F. House Manager F reported Resident 6 told him/her about Caregiver G borrowing money from Resident 6 on or around August 15, 2025. House Manager F reported s/he viewed text messages	M 572		

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M 572	Continued From page 6 between Caregiver G and Resident 6 regarding the debits from Resident 6 checking account. House Manager F reported Resident 6's checking account had multiple debits that totaled approximately $458. House Manager F reported s/he reported the incident to Licensee A. On 09/18/2025, at approximately 1:30 PM, Surveyor interviewed Licensee A. Licensee A reported s/he was informed of Resident 6's misappropriation of funds from House Manager F. Licensee A reported s/he conducted an internal investigation which included the suspension of Caregiver G until the investigation was completed. Licensee A reported s/he contacted Adult Protective Services (APS), and APS investigated the complaint of misappropriation of funds. Licensee A confirmed Caregiver G debited $458 from Resident 6's account without permission. Licensee A reported Caregiver G did not have the money to pay Resident 6 back. Licensee A reported Caregiver G was terminated after the internal investigation was completed. Licensee A deducted $458 from Caregiver G's last paycheck and returned the money to Resident 6. On 09/23/2025, at approximately 12:50 PM, Surveyor received documents from Licensee A. Surveyor reviewed documents faxed from Licensee A. Surveyor reviewed the Employee Incident Report dated 08/20/2025. The report indicated the incident took place on 08/11/2025 and Caregiver G was interviewed regarding Resident 6's money. Caregiver G wrote a statement which indicated s/he took money off of Resident 6's card at his/her request and Caregiver G was offered money to complete the task.	M 572		

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M 572	Continued From page 7 Surveyor reviewed a letter of termination, dated 09/02/2025, which indicated Caregiver G was terminated on 09/02/2025 after the completion of the investigation regarding misappropriation Resident 6's funds. Surveyor reviewed the Misconduct Incident Report. The report was signed and dated on 09/18/2025 by Licensee A. The report indicated the alleged incident of financial exploitation occurred on 08/11/2025. The report explained how Caregiver G had possession of Resident 6's debit card and used the card to purchase items not intended for Resident 6. The report indicated Resident 6 asked Caregiver G to purchase items for him/her and the authorization given to Caregiver G to use Resident 6's bank card to borrow money. The report did not provide financial records, and the incident was not reported to the police.	M 572		
M 610	88.11(1) REPORTING OF ABUSE AND NEGLECT A licensee or service provider who knows or has reasonable cause to suspect that a resident has been abused or neglected as defined in s. 46.90 or 940.285, Stats., shall immediately contact the licensing agency. Providing notice under this subsection does not relieve the licensee or other person of the obligation to report an incident to law enforcement authorities. If the licensee has reason to believe a crime has been committed, the incident shall immediately be reported to law enforcement authorities.	M 610		

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M 610	Continued From page 8	M 610		

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure 1 of 1 resident (Resident 6) was free from financial exploitation. A former caregiver (Caregiver G) borrowed money from Resident 6 and continued to use Resident 6's bank card without Resident 6's permission.

Findings include:

On 09/02/2025, the department received a complaint that alleged a former staff member had misappropriated a resident's funds.

On 09/18/2025, at approximately 1:00 PM, Surveyor reviewed Resident 6's record. Resident 6 was admitted to the facility on 07/17/2025. Resident 6 was her/his own person. Resident 6's individual service plan (ISP), dated 07/17/2025, reported Resident 6 manages his/her own finances.

On 09/18/2025, at approximately 11:20 AM, Surveyor interviewed Resident 6. Resident 6 reported Caregiver G asked to borrow $50 around the second week of August 2025. Resident 6 agreed to loan Caregiver G $50. Resident 6 reported s/he did not inform House Manager F and Licensee A of when Caregiver G asked to borrow money from him/her. Resident 6 reported s/he was not afraid or scared of Caregiver G, but had believed Caregiver G would return his/her bank card and the $50 borrowed. Resident 6 reported Caregiver G continued to use

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M 610	Continued From page 9	M 610		

his/her bank card. Resident 6 reported s/he noticed a total of $458 was debited from his/her account. Resident 6 reported his/her concern to House Manager F, approximately 2 weeks after s/he gave Caregiver G his/her debit card. Resident 6 reported Caregiver G refused to return his/her bank card; therefore, s/he ordered a bank card with a new pin number. Resident 6 reported Licensee A returned $458 to him/her and Caregiver G was no longer employed at the facility.

On 09/18/2025, at approximately 12:00 PM, Surveyor interviewed House Manager F. House Manager F reported Resident 6 told him/her about Caregiver G borrowing money from Resident 6 on or around August 15, 2025. House Manager F reported s/he viewed text messages between Caregiver G and Resident 6 regarding the debits from Resident 6 checking account. House Manager F reported Resident 6's checking account had multiple debits that totaled approximately $458. House Manager F reported s/he reported the incident to Licensee A.

On 09/18/2025, at approximately 1:30 PM, Surveyor interviewed Licensee A. Licensee A reported s/he was informed of Resident 6's misappropriation of funds from House Manager F. Licensee A reported s/he conducted an internal investigation which included the suspension of Caregiver G until the investigation was completed. Licensee A reported s/he contacted Adult Protective Services (APS), and APS investigated the complaint of misappropriation of funds. Licensee A confirmed Caregiver G debited $458 from Resident 6's account without permission. Licensee A reported Caregiver G did not have the money to pay Resident 6 back. Licensee A reported Caregiver G was terminated

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M 610	Continued From page 10	M 610		

after the internal investigation was completed. Licensee A deducted $458 from Caregiver G's last paycheck and returned the money to Resident 6.

On 09/23/2025, at approximately 12:50 PM, Surveyor received documents from Licensee A. Surveyor reviewed documents faxed from Licensee A. Surveyor reviewed the Employee Incident Report dated 08/20/2025. The report indicated the incident took place on 08/11/2025 and Caregiver G was interviewed regarding Resident 6's money. Caregiver G wrote a statement which indicated s/he took money off of Resident 6's card at his/her request and Caregiver G was offered money to complete the task.

Surveyor reviewed a letter of termination, dated 09/02/2025, which indicated Caregiver G was terminated on 09/02/2025 after the completion of the investigation regarding misappropriation Resident 6's funds.

Surveyor reviewed the Misconduct Incident Report. The report was signed and dated on 09/18/2025 by Licensee A. The report indicated the alleged incident of financial exploitation occurred on 08/11/2025. The report explained how Caregiver G had possession of Resident 6's debit card and used the card to purchase items not intended for Resident 6. The report indicated Resident 6 asked Caregiver G to purchase items for him/her and the authorization given to Caregiver G to use Resident 6's bank card to borrow money. The report did not provide financial records, and the incident was not reported to the police.