

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0016374	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 12/21/2023
NAME OF PROVIDER OR SUPPLIER LAKE SHORE CEDAR LODGE		STREET ADDRESS, CITY, STATE, ZIP CODE 12440 WARPATH LN MINOCQUA, WI 54548		
(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
U 000	INITIAL COMMENTS On 11/21/2023, Surveyor conducted a standard licensing survey and complaint investigation (x 4). Data collection continued through 12/21/2023. Five deficiencies were identified. One of the 5 deficiencies was a repeat violation (cited for the 3rd time). See Statement of Deficiency (SOD) UDHG13, dated 10/18/2019, and SOD C4MC11, dated 09/27/2017. One of the 4 complaints was substantiated. Census: 11	U 000		
U 116	89.23(2)(a)2.a SERVICES SUFFICIENT SERVICES. Minimum required services. A residential care apartment complex shall have the capacity to provide all of the following services to all tenants, either directly or under contract: a. Supportive services: meals, housekeeping in tenants' apartments, laundry service and arranging access to medical services. In this subparagraph, "access" means arranging for medical services and transportation to medical services. This Rule is not met as evidenced by: Based on interview and record review, the	U 116		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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U 116	Continued From page 1 provider did not ensure tenants received transportation to medical services. Findings include: The provider is licensed to care for 21 tenants. On 11/08/2023, 11/14/2023, and 11/21/2023, the Department received complaints with multiple allegations, including administration was not providing oversight of the facility. On 12/06/2023 at 10:45 AM, Surveyor interviewed Tenant 2. Tenant 2 stated, "I had an eye appointment scheduled today (12/06/2023) and I was supposed to leave at 10:45 AM; my appointment was scheduled for months. I have to cancel it now because there was no van driver to take me." On 12/06/2023 at 11:45 AM, Surveyor interviewed Tenant 4. Tenant 4 reported, "The transportation is not that good here...I needed the van a few times for medical appointments and it wasn't available. It was a long time ago." On 12/06/2023 at 1:00 PM, Surveyor interviewed Tenant 5. Tenant 5 indicated that s/he had a scheduled an appointment to go shopping (today) and the facility van was not available because other tenants needed the van for medical appointments. On 12/06/2023 at 1:45 PM, Surveyor interviewed Former Assistant Administrator (FAA) A. Surveyor requested the facility's transportation policy and procedure. FAA A reported the facility did not have a transportation policy and procedure. Surveyor asked FAA A for staff transportation training records and Surveyor asked FAA A about	U 116			

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U 116	Continued From page 2 staff training as it pertains to transporting tenants. FAA A informed Surveyor that s/he provided staff with verbal training before staff drove the van. FAA A reported there were no staff transportation training records and the facility used an electronic transportation application (app) for scheduling facility rides for tenants. Surveyor asked FAA A if the facility had a transportation log. FAA A reported, "There should be a binder in the van and [Transport Staff (TS) F] would know where to find it." On 12/06/2023 at 2:00 PM, Surveyor interviewed TS F. TS F confirmed receiving "verbal training" from FAA A before transporting tenants in the van. TS F provided surveyor with a binder from the van ("LSAL [Lake Shore Assisted Living] Van Mileage Log"). The van log's first entry was dated: 11/30/2022 and the last entry was dated 12/08/2022. The log was not updated past 12/08/2022. The log tracked mileage for medical appointments, shopping, outings, etc. TS F admitted s/he had called in sick at times and van rides got cancelled because staff were not available to drive. TS F reported that s/he missed work for several days in November 2023 due to having surgery. TS F reported s/he was not aware of any issues when Maintenance Staff (MS) G or other staff drove in his/her absence. On 12/06/2023 at 2:20 PM, Surveyor interviewed Administrative Assistant (AA) E. AA E verified Tenant 2's eye appointment was cancelled today (12/06/2023) because a driver was not available to drive Tenant 2. AA E indicated TS F was one of the van drivers and sometimes MS G drove the van when TS F was not available. AA E informed Surveyor that tenant medical appointments get cancelled sometimes due to drivers not being available.	U 116		

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U 116	Continued From page 3 On 12/18/2023 at 10:10 AM, Family Member H contacted Surveyor. Family Member H reported, "[Tenant 1] had a follow up doctor's appointment today (12/18/2023) after being in the hospital last week." Family Member H indicated that Tenant 1 was in the emergency room for a urinary tract infection (UTI) on 12/12/2023. Family Member H stated, "[Tenant 1] had transportation set up with the facility (today) and it was cancelled because the 'transportation guy' didn't show up." Family Member H reported that this was the second time Tenant 1 missed a medical appointment in December 2023 because facility staff were not available to drive the van. On 12/18/2023 at 11:34 AM, Surveyor asked FAA A via email about the process and procedure when transportation is canceled for tenants. On 12/19/2023 at 8:25 AM, FAA A responded via email, "When and if we need to cancel an apt [sic] for transportation we contact family, tenant and the doctor's office or wherever to re-schedule."	U 116		
U 128	89.23(4)(a)1. SERVICES PROVIDER QUALIFICATIONS. Service providers. 1. Residential care apartment complex services shall be provided by staff who are trained in the services that they provide and are capable of doing their assigned work. Any service provider employed by or under contract to a residential care apartment complex shall meet applicable federal	U 128		

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U 128	Continued From page 4 or state standards for that service or profession. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure Maintenance Staff (MS) G was trained in the services provided and MS G did not meet applicable federal or state standards for providing transportation services. Findings include: The provider is licensed to care for 21 tenants. On 11/08/2023, 11/14/2023, and 11/21/2023, the Department received complaints with multiple allegations, including administration was not providing oversight of the facility and concerns with transportation services. On 12/05/2023 at 10:30 AM, Surveyor interviewed Tenant 1. Surveyor asked Tenant 1 how s/he was doing and if s/he had any concerns. Tenant 1 expressed a concern with transportation to and from a medical appointment in November 2023. Tenant 1 reported, "I had to go to the doctor on 11/06/2023. I had a 3:30 PM appointment. I checked with [Administrative Assistant (AA) E]. [AA E] told me [Transport Staff (TS) F] was out sick and [Maintenance Staff (MS) G] would be driving me to my appointment." Tenant 1 noted that MS G was the maintenance person. Tenant 1 reported that s/he felt "rushed" into the van and felt MS G drove "rather fast" to the medical appointment (approximately 9 miles away from the facility).	U 128		

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U 128	Continued From page 5 Tenant 1 stated that after his/her medical appointment, MS G picked him/her up and drove to Walmart (approximately 2 miles away from the medical center). Tenant 1 reported that s/he "was not secured in the van" after leaving his/her medical appointment. Tenant 1 stated, "I didn't have a strap around me to keep me from falling out of my wheelchair. Twice I told [MS G] to secure me and both times s/he didn't listen." Tenant 1 noted, "My wheelchair was strapped in and because of how the van seats were positioned, I had nothing to hold onto and I didn't have a seatbelt on to keep me from falling out of my wheelchair." Tenant 1 stated that MS G drove Tenant 1 to Walmart to pick up two other tenants. Tenant 1 noted that s/he remained in the van for over a half hour while MS G assisted Tenant 2 and Tenant 3 in the store. Tenant 1 informed Surveyor that after MS G returned to the van with Tenant 2 and Tenant 3, "I was leaning against [Tenant 2's] seat and because of how the seats were positioned in the van, I was sitting on an angle in my wheelchair; I had nothing to hold on to. My wheelchair was strapped down, but I was not strapped in with a seatbelt or harness." Tenant 1 noted that s/he felt "scared" and "unsafe" returning to the facility. Surveyor asked Tenant 1 if s/he reported his/her concern to management. Tenant 1 indicated s/he reported his/her concern to AA E a few weeks ago. On 12/05/2023 at 3:25 PM, Surveyor interviewed Tenant 2. Tenant 2 indicated that sometime in November 2023, s/he was transported in the van with Tenant 1 and Tenant 3. Tenant 2 reported that s/he was at Walmart shopping with Tenant 3 and MS G picked them up after shopping. Tenant 2 noted that Tenant 1 had been waiting in the van while Tenant 2 and Tenant 3 shopped. Tenant 2 indicated, "I was shopping with [Tenant 3] and	U 128		

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U 128	Continued From page 6 [MS G] picked us up at Walmart. Tenant 3 was in the front seat and I was in the 'jump' seat in the back. [MS G] used the van to haul garbage and the van was dirty. [Tenant 1] was in the back of the van...[Tenant 1] was very upset driving back to the facility." Tenant 2 commented, "[MS G] was not trained to drive the van; that's the problem. They don't have staff that are trained." On 12/05/2023, Surveyor reviewed MS G's file. MS G was hired on 06/26/2023. MS G was terminated on 11/20/2023. MS G's file did not contain documentation to indicate s/he completed van training and/or was exempt from the following required training: safety procedures, including first aid; facility's emergency plan, or policies and procedures relating to tenant rights. On 12/06/2023, Surveyor reviewed the provider's transportation records. The records indicated Tenant 1 had a medical appointment on 11/06/2023 at 3:30 PM and Tenant 2 and Tenant 3 were scheduled for shopping at 2:00 PM on 11/06/2023. On 12/06/2023 at 10:25 AM, Tenant 2 approached Surveyor and reported, "[Tenant 1] was visually upset in the van several weeks ago (11/06/2023). [Tenant 1] waited in the van for over 20 minutes while we shopped at Walmart. [Tenant 1] was pushed up against the back of the passenger seat in the van and s/he did not have a lot of leg room." Tenant 2 indicated that s/he could not tell if Tenant 1 had a seatbelt on during the van ride. Tenant 2 noted the van was full of groceries and garbage and there was not a lot of room in the van during the ride back to the facility. On 12/06/2023 at 1:45 PM, Surveyor interviewed Former Assistant Administrator (FAA) A. Surveyor	U 128		

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U 128	Continued From page 7 requested FAA A provide the transportation policy/procedure and explain the procedure for transporting tenants in wheelchairs. FAA A reported the facility did not have a van policy and that s/he conducted a verbal training with staff that drove the van. FAA A explained that tenants who use wheelchairs get seat belted in and the wheelchair gets belted and secured separately. Surveyor asked FAA A if MS G transported tenants and if MS G received training to drive the van and transport tenants. FAA A stated, "To my knowledge, [MS G] did not transport tenants. [MS G] was not allowed to use the van...[MS G] was not trained and s/he did not have a valid driver's license." FAA A noted that MS G was fired for using the company truck recently. FAA A denied hearing about issues or having concerns with transportation at the facility. On 12/06/2023 at 2:00 PM, Surveyor interviewed TS F. TS F reported that s/he transported tenants in the van to medical appointments, shopping and outings. TS F indicated s/he received a verbal training on how to drive and transport tenants from FAA A. TS F reported that s/he had a valid driver's license and was insured to drive the van. TS F stated, "[MS G] transported tenants when I was not available." TS F reported that MS G was no longer working at the facility. TS F did not know whether or not MS G received training to drive the van and/or whether or not MS G had a valid driver's license. TS F noted that tenants in wheelchairs get seat belted in and their wheelchairs get secured/belted down for transports. TS F stated that MS G covered transports for TS F in November 2023 because TS F was off work for several days in November 2023. On 12/06/2023 at 2:20 PM, Surveyor interviewed	U 128		

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U 128	Continued From page 8 AA E. AA E reported, "[MS G] transported tenants sometimes when [TS F] was unavailable." AA E stated, "In November (2023), [TS F] had a surgery and s/he was gone for a while." AA E noted that MS G transported tenants in November 2023. Surveyor asked AA E if there were any transportation complaints from staff or tenants in the past few months. AA E reported that on 11/07/2023, Tenant 1 reported a concern with a transport and MS G was the driver. Surveyor asked AA E if the concern was reported to management. AA E stated that s/he let FAA A know that Tenant 1 reported a concern with not being buckled in during a transport in November 2023.	U 128		
U 134	89.23(4)(d)1. SERVICES PROVIDER QUALIFICATIONS. Staff training. All facility staff shall have training in safety procedures, including fire safety, first aid, universal precautions and the facility's emergency plan, and in the facility's policies and procedures relating to tenant rights. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 3 of 3 staff reviewed completed training in safety procedures (including fire safety, first aid, universal precautions and facility's emergency plan) or in the provider's policies and procedures related to tenant rights.	U 134		

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U 134	Continued From page 9 This is a repeat deficiency (cited for the 3rd time). See Statement of Deficiency (SOD) UDHG13, dated 10/18/2019 and SOD C4MC11, dated 09/27/2017. Findings include: The provider is licensed to care for 21 tenants. On 11/08/2023, 11/14/2023 and 11/21/2023, the Department received complaints with multiple allegations, including administration was not providing oversight of the facility. On 12/05/2023, Surveyor reviewed Caregiver B's file. Caregiver B was hired on 06/06/2023. Caregiver B's file did not contain documentation to indicate s/he completed the following required training: safety procedures, including first aid, facility's emergency plan, and policies and procedures relating to tenant rights. Caregiver B completed standard precautions and fire safety training on 06/15/2023 and 07/06/2023 respectively. On 12/05/2023, Surveyor reviewed Caregiver C's file. Caregiver C was hired on 11/01/2023. Caregiver C's file did not contain documentation to indicate s/he completed the following required training: safety procedures, including fire safety, first aid, universal precautions and facility's emergency plan, and policies and procedures relating to tenant rights. On 12/05/2023, Surveyor reviewed Maintenance Staff (MS) G's file. MS G was hired on 06/26/2023. MS G was terminated on 11/20/2023. MS G's file did not contain documentation to indicate s/he completed the following required	U 134		

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U 134	Continued From page 10 training: safety procedures, including fire safety, first aid, universal precautions, emergency plan, or policies and procedures relating to tenant rights. According to staff schedules (June 2023 - November 2023), Caregiver B, Caregiver C and MS G worked multiple shifts since being hired. On 12/13/2023 at 3:03 PM, Surveyor requested training records for Caregiver B, Caregiver C and MS G. On 12/14/2023 at 1:24 PM, Former Assistant Administrator (FAA) A verified the following information regarding staff training: Caregiver B did not complete training other than standard precautions and fire safety; Caregiver C had only completed Medication Management training (in December 2023) and MS G did not complete any training and was no longer employed at the facility. On 12/20/2023 at 2:55 PM, Surveyor interviewed Administrator D. Administrator D stated, "If staff files don't contain training records, the training was most likely never completed."	U 134			
U 189	89.28(1) Risk Agreement (1) REQUIREMENT As a protection for both the individual tenant and the residential care apartment complex, a residential care apartment complex shall enter into a signed, jointly negotiated risk agreement with each tenant by the date of occupancy. This Rule is not met as evidenced by: Based on record review and interview, the	U 189			

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U 189	Continued From page 11 provider did not have a negotiated risk agreement for 1 of 2 Tenants reviewed. Findings include: The provider is licensed to care for 21 tenants. On 12/05/2023, Surveyor reviewed Tenant 1's file. Tenant 1 was admitted on 09/14/2018. Tenant 1's file did not contain a negotiated risk agreement. On 12/18/2023 at 11:50 a.m., Surveyor requested Tenant 1's risk agreement. On 12/21/2023 at 8:42 AM, Former Assistant Administrator (FAA) A indicated, "[Tenant 1] does not have a risk agreement in place but we are getting one together for all RCAC (residential care apartment complex) tenants to sign."	U 189			
Z 010	50.065(2)(bb) DETERMINE FINAL DISPOSITION OF CHARGE If information obtained under par. (am) or (b) indicates a charge of a serious crime, but does not completely and clearly indicate the disposition of the charge or the conviction, the department or entity shall make every reasonable effort to contact the clerk of courts to determine the final disposition of the charge. If a background information form under sub. (6) (a) or (am) indicates a charge or a conviction of a serious crime, but information obtained under 011 par. (am) or (b) does not indicate such a charge, the department or entity shall make every reasonable effort to contact the clerk of courts to obtain a copy of the criminal complaint and the final disposition of the complaint.	Z 010			

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Z 010	Continued From page 12 If information obtained under par. (am) or (b), a background information form under sub, (6) (a) or (am) or any other information indicates a conviction of a violation of s. 940.19 (1), 940.195, 940.20, 941.30, 942.08, 947.01, or 947.013 obtained not more than 5 years before the date on which that information was obtained, the department or the entity shall make every reasonable effort to contact the clerk of courts to obtain a copy of the criminal complaint and judgement of conviction relating to that violation. This Rule is not met as evidenced by: Based on record review and interview, the provider did not obtain a copy of the criminal complaint and judgement of conviction for 2 of 4 caregivers reviewed who had disorderly conduct convictions (Wis. Stat. 947.01) within the past 5 years of date of hire. Findings include: The provider is licensed to care for 21 tenants. On 11/08/2023, 11/14/2023 and 11/21/2023, the Department received complaints with multiple allegations including, administration was not completing caregiver background checks. On 12/05/2023, Surveyor reviewed Caregiver B's file. Caregiver B was hired on 06/06/2023. A caregiver background check was conducted on 06/05/2023. The Department of Justice (DOJ) response indicated that within the past 5 years, Caregiver B was convicted of Disorderly Conduct, Wis. Stat. 947.01. Caregiver B's file did not	Z 010		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0016374	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED C 12/21/2023
NAME OF PROVIDER OR SUPPLIER LAKE SHORE CEDAR LODGE			STREET ADDRESS, CITY, STATE, ZIP CODE 12440 WARPATH LN MINOCQUA, WI 54548		
(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	
Z 010	Continued From page 13 contain the judgment of conviction and criminal complaint from the county where s/he was convicted of disorderly conduct. On 12/05/2023, Surveyor reviewed Caregiver C's file. Caregiver C was hired on 11/01/2023. A caregiver background check was conducted on 10/31/2023. The DOJ response indicated that within the past 5 years, Caregiver C was convicted of Disorderly Conduct, Wis. Stat. 947.01. Caregiver C's file did not contain the judgment of conviction and criminal complaint from the county where s/he was convicted of disorderly conduct. On 12/07/2023 at 10:14 AM, Surveyor provided Former Administrator Assistant (FAA) A publication P-00274, Wisconsin Caregiver Program: Offenses Affecting Caregiver Eligibility for Chapter 50 Programs via electronic mail (e-mail). Surveyor asked FAA A if any employees had convictions listed that required them to undergo rehabilitation review or required the provider to obtain the judgement of conviction and criminal complaint. On 12/13/2023 at 9:33 AM, FAA A responded via e-mail: "Staff that require rehabilitation review [sic] they have been contacted and are getting us the documentation required."	Z 010			