STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018154	A. BUILDING: _____ B. WING _____	C 11/07/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EMINENT QUALITY CARE LLC	**4827 N 71ST ST MILWAUKEE, WI 53218**

(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 11-07-2024, surveyor conducted a standard survey and 1 complaint investigation. Three deficiencies were identified. One complaint was unsubstantiated. Census: 04	M 000		
M 298	88.05(3)(g) WINDOWS AND VENTILATION The home shall have ventilation for health and comfort. There shall be at least one window which is capable of being opened to the outside in each resident sleeping room and each common room used by residents. Windows used for ventilation shall be screened during appropriate seasons of the year. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure 1 of 3 residents' bedrooms had at least 1 screened window which was capable of being opened to the outside. Room 1 did not have screens. Findings include: On 11/07/2024, at approximately 10:00 AM, Surveyor conducted an onsite tour and observed the following: -The first-floor bedroom identified as #1 had 2 north facing windows which did not have screens. On 11/072024, at approximately 11:50 AM, Surveyor interviewed House Manager A who reported s/he was not aware of the missing screens but would have them installed.	M 298		

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

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M 334	88.05(4)(b)1 FIRE SAFETY-SMOKE DETECTORS Every adult family home shall be equipped with one or more single station battery operated, electrically interconnected or radio signal emitting smoke detectors on each floor level. Required smoke detectors shall be located in each habitable room except the kitchen and bathroom and specifically in the following locations: at the head of each open stairway, at the door leading to every enclosed stairway, on the ceiling of the living room or family room, on the ceiling of each sleeping room and in the basement. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure functioning smoke detectors were in 2 of 5 required locations. The smoke detector on the basement stairway was not working. There was no smoke detector installed on the ceiling of the basement. Findings include: On 11/07/2024, at approximately 10:00 AM, Surveyor toured the facility with Caregiver B. The following was observed: - The smoke detector on the basement stairway was not working. - There was no smoke detector installed on the ceiling of the basement.	M 334		

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M 334	Continued From page 2 On 11/07/2024 at approximately 11:50 AM, Surveyor interviewed House Manager A who confirmed the smoke detectors were not working. House Manager A was unsure how long the stairway smoke detector had needed a new battery but stated it would be replaced and a new smoke detector would be installed in the basement.	M 334		
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 ensure a safe physical environment for 4 of 4 residents. The hot water was not kept at a safe temperature and measured 133° Fahrenheit (F) at 2 of 2 faucets tested. Findings include: On 11/07/2024 at approximately 10:00 AM, Surveyor observed the hot water temperature from the bathroom and kitchen faucets measured 133° F. Caregiver B confirmed the water	M 570		

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M 570	Continued From page 3 temperature was 133° F at both locations. On 11/07/2024 at approximately 11:50 AM, Surveyor interviewed House Manager A about the hot water temperature. They expressed surprise it measured too high and stated they would turn the hot water temperature down and begin monitoring it monthly to ensure it was not too hot. "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 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." (DQA Publication-01942, Hot Water Temperatures in Adult Family Homes, August 2017.)	M 570		