STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016073	A. BUILDING: _____ B. WING _____	06/19/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VONDRA'S COUNTRY LIVING	2452 CONDRY RD PLATTEVILLE, WI 53818

(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 06/19/2024, Surveyor conducted a standard licensure survey at Vondra's Country Living. Two deficiencies were identified. Census: 4	M 000		
M 246	88.04(5)(b) TRAINING-8 HOURS ANNUALLY Except as provided in pars. (c) and (d), the licensee and each service provider shall complete 8 hours of training approved by the licensing agency related to the health, safety, welfare, rights and treatment of residents every year beginning with the calendar year after the year in which the initial training is received. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 staff members (Licensee A and Caregiver B) received annual training related to the rights of residents and medication administration in 2022 and 2023. Findings include: On 06/19/2024, at approximately 5:30 PM, Surveyor requested Licensee A's and Caregiver B's annual training for 2022 and 2023. Licensee A and Caregiver B opened the home in 2016. Licensee A's and Caregiver B's record did not contain annual training in rights of residents or medication administration in 2022 and 2023.	M 246		

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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M 246	Continued From page 1 On 06/19/2024, at approximately 5:45 PM, Surveyor interviewed Licensee A. Licensee A stated s/he would make sure Caregiver B and him/herself included resident rights training and medication administration in their 2024 continuing education.	M 246		
M 404	88.06(3)(a) INDIVIDUAL SERVICE PLAN & ASSESSMENT The licensee shall ensure that a written assessment and individual service plan is completed and developed for each resident within 30 days after placement. This Rule is not met as evidenced by: Based on record review and interview, the licensee did not ensure 1 of 1 resident (Resident 1) reviewed had a written assessment and individual service plan (ISP) completed and developed within 30 days after placement. Findings include: On 06/19/2024, at approximately 5:30 PM, Surveyor requested to review Resident 1's record. Licensee A stated Resident 1 did not have a completed ISP but would be working with his/her managed care organization to complete it.	M 404		