STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	410083	A. BUILDING: _____ B. WING _____	C 05/27/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CLARITY CARE THIRD STREET HOUSE	225 THIRD ST NEENAH, WI 54956

(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
N 000	Initial Comments On 05/22/2025 with additional information gathered through 05/27/2025, Surveyor conducted a complaint investigation at Clarity Care Third Street House. As a result, 1 of 1 complaints was substantiated and 1 deficiency was identified. Census: 5	N 000		
N 431	83.38(1)(g) Health monitoring. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the resident ' s highest level of functioning. In addition to the assessed needs as determined under s. DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Health monitoring. 1. The CBRF shall monitor the health of residents and make arrangements for physical health, oral health or mental health services unless otherwise arranged for by the resident. Each resident shall have an annual physical health examination completed by a physician or an advanced practice nurse as defined in s. N 8.02(1), unless seen by a physician or an advanced practice nurse as defined in s. N 8.02(1) more frequently. 2. When indicated, a CBRF shall observe residents ' food and fluid intake and acceptance of diet. The CBRF shall report significant deviations from normal food and fluid intake patterns to the resident ' s physician or dietician. 3. The CBRF shall document communication with the resident ' s physician and other health care providers, and shall record any changes in the resident ' s health or mental health status in the resident ' s record.	N 431		

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

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N 431	Continued From page 1 This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure Resident 1 received appropriate health monitoring to meet his/her needs. Resident 1 experienced a change in condition when s/he began spitting up blood on 05/13/2025. The provider did not contact Resident 1's physician or ensure timely follow up with his/her guardian. On 05/22/2025, Resident 1 was ultimately diagnosed with bronchitis. Findings include: On 05/20/2025, the Department received a complaint alleging resident health was not being monitored when there was a change in condition. On 05/22/2025 at 9:00 AM, Surveyor requested Resident 1's record including his/her face sheet, individual service plan (ISP), behavioral support plan (BSP), observation notes, medication administration record (MAR) and the provider's change in condition and health monitoring policy and procedure from Program Lead (PL) A and Division Administrator (DA) B. Surveyor reviewed the facility's policy titled, "Health Monitoring Policy and Procedure," date unknown, which stated, "PURPOSE: Clarity Care Staff should follow health monitoring procedures for all members to actively and successfully ensure health needs are addressed and needed medical attention is initiated. PROTOCOL: 1) When a resident experiences a change in condition, the guardian and IDT staff (Care Manager and RN Care Manager) will be notified. Timeframe for notification will be in alignment with	N 431		

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the contract expectations of the resident's funding source (typically within one business day). Depending on the nature of the change in condition, the resident's physician and any other necessary supports will also be notified, as needed. 2) Changes will be recorded in ECP as necessary. 3) The resident's Individual Service Plan will be updated, as needed, to reflect the change in condition per Clarity Care's certification and licensing regulations ... 4) Clarity Care Staff will be trained annually on the Health Monitoring Policy. Clarity Care Leads will facilitate all appointments needed for members.

Common illnesses to monitor are listed below:

-Common cold or flu ...
-Diarrhea ... occasional diarrhea isn't uncommon ... But there are signs to look for that could indicate a problem. These include: Diarrhea that lasts more than 3 days ...
-Headache ...
-Digestive issues ... problems in the upper digestive tract (esophagus and stomach) and the lower tract (intestines). If you experience any of the following, call your doctor: ...vomiting blood or bile (green) ...
-Back pain ...

Many of them can be managed at home. But sometimes they can progress or change, and then its best if they are addressed by a doctor. If you aren't sure what to do, call the consumer's doctor ... Call the doctor with issues or concerns that arise [sic all]."

Surveyor reviewed Resident 1's record and identified the following:

Resident 1 admitted to the facility on 08/01/2024

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with diagnoses to include mild intellectual disability, major depressive disorder and nonpsychotic mental disorder. Resident 1 had a guardian and was identified as a fall and elopement risk.

Resident 1's ISP, signed 05/02/2025, noted s/he required "24-hour supervision ... oriented to person, place and time ... needs some assistance ... needs cues and prompts to complete ADL tasks ... makes needs known." Resident 1 required staff assistance with medication management, laundry services, toileting and grooming. Resident 1 also needed reminders to use his/her walker while ambulating due to his/her unsteady gait.

Resident 1's progress notes from 05/13/2025 noted the following:

05/13/2025, 3:00 PM: "[Resident 1] is spitting up blood. [S/he] is very pale and not feeling well. [S/he] spit up a good chunk of blood outside that we cleaned up. I am keeping an eye on it. But [s/he] is very sweaty and says [his/her] tummy hurts and has had 2 accidents [sic all]."

05/13/2025, 7:15 PM: "[Resident 1] - my last note for the night. [S/he] has been coughing up blood clots. and looks very pail and sweaty. Been keeping an eye on it. But [s/he] keeps smoking which I told [him/her] is probably not helping right now. And I tried getting [him/her] to drink some water as well and [s/he] won't think any water either. [S/he] says [s/he] is cold but there is sweat dripping off [his/her] face ... [sic all]."

Surveyor reviewed email correspondence between PL A and Guardian C from 05/14/2025. The email documentation noted PL A emailed

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N 431	Continued From page 4 Guardian C at 7:28 AM stating, "Good morning. I just wanted to let you know that [Resident 1] is coughing up blood. It is in is mucus. [S/he] has been smoking a lot and I told [him/her] the Dr is going to tell [him/her] to quit right away. I just wanted to see what you would like me to do. It's been happening since mon or Tues as far as I know [sic all]." Guardian C responded to PL A's email at 2:57 PM on 05/14/2025 stating, "Hello, Sorry forgot about this email! Have staff observed the blood or is this what [Resident 1] is reporting? Any other symptoms? When did [s/he] start smoking again?" (Surveyor note: There was no follow up communication from the provider with Guardian C until Resident 1's psychiatry appointment on 05/16/2025.) On 05/22/2025 at 10:35 AM, Surveyor interviewed Resident 1 who stated s/he had diarrhea for 2 weeks and started coughing up blood a week ago. Resident 1 reported, "I was feeling miserable. I had the chills, an upset stomach, a headache and was coughing up blood." Resident 1 stated s/he told a staff member, but could not remember who s/he told. S/he reported, "I wanted to go to the doctor. I didn't know what was wrong. They said if it didn't stop they would take me in, but they never did. I was told to sit down and take it easy." Resident 1 stated, "I finally started feeling better yesterday." During an interview with PL A and DA B on 05/22/2025 at approximately 10:00 AM, PL A reported Resident 1 was spitting up blood on 05/13/2025 and s/he contacted Guardian C via email the morning of 05/14/2025 when s/he saw the observation note entered by Direct Support Professional (DSP) D from the day before. PL A reported s/he did not hear back from Guardian C until late afternoon on 05/14/2025 and s/he had	N 431		

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already left for the day. PL A stated s/he did not see Guardian C's email until s/he came in the following day, 5/15/2025 at 1:00 PM. PL A reported s/he did not respond to Guardian C's email as s/he was getting resident's ready for a facility wide event. PL A reported Resident 1 had a psychiatry appointment on 05/16/2025 where s/he had an in-person conversation with Guardian C. S/he stated Guardian C said to wait a week to see if Resident 1's symptoms clear up on their own. PL A stated Resident 1 recently started smoking cigarettes again, so they did not know if [his/her] symptoms were related. When Surveyor read the observation notes from 05/13/2025 and asked what the expectation was for staff, PL A reported "[DSP D] should have called me that night. I would have called the emergency number for Guardian C to see what they would have wanted me to do. [Resident 1] was not this bad on 05/14/2025." DA B stated, "We have policies and procedures for changes in condition and health monitoring" and there is a binder in the home staff have access to in situations like these. DA B reported, "[DSP D] should have followed the chain in command and notified [PL A] and if [s/he] was not available then me."

On 05/22/2025 at 3:20 PM, Surveyor interviewed DSP D who stated s/he worked the PM shift on 05/13/2025 when Resident 1 was coughing up blood. DSP D reported, "When we were outside, [Resident 1] spit up and [s/he] showed me. I could see blood clots. [Resident 1] also spit up in the toilet and again I could see blood clots." DSP D confirmed this was a change in condition for Resident 1. S/he stated, "I've never seen [him/her] like that. [S/he] was pale, sweaty, had the chills and was covered in a blanket." When Surveyor asked if they have protocol for situations like this, DSP D stated, "I believe we do." S/he

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stated s/he thought s/he contacted PL A on 05/13/2025, but when s/he looked through his/her text messages and phone calls, s/he confirmed s/he did not contact PL A. When Surveyor asked if s/he took any vitals from Resident 1, DSP D reported, "We don't do vitals."

During an interview with Guardian C on 05/22/2025 at 1:55 PM, s/he confirmed s/he received an email from PL A on 05/14/2025 regarding Resident 1 coughing up blood. S/he reported s/he responded that afternoon, but did not hear anything until Resident 1's psychiatry appointment on 05/16/2025. Guardian C stated, "I didn't hear anything, so I assumed everything was done." Guardian C stated Resident 1 expressed s/he had diarrhea at his/her appointment, but s/he otherwise appeared fine. When Surveyor read the observation notes from 05/13/2025, Guardian C reported, "They did not tell me that. This changes everything. This would have been an urgent care visit for sure." Guardian C confirmed Resident 1 has a follow up appointment today.

On 05/23/2025 at 11:25 AM, Surveyor received a follow up email from Guardian C who stated Resident 1 saw the doctor yesterday for "coughing up phlegm with some blood." S/he was diagnosed with bronchitis and prescribed an antibiotic.

On 05/27/2025 at 1:00 PM, Surveyor interviewed Director E who acknowledged Resident 1 did not receive appropriate health monitoring to meet his/her needs. S/he reported s/he spoke with PL A regarding Resident 1's change in condition and progress note from 05/13/2025 and questioned where the follow up was. Director E stated PL A will be meeting with each staff member individually to go over their policy and procedure

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N 431	Continued From page 7 on changes in condition and health monitoring.	N 431		