STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0019690	A. BUILDING: _____ B. WING _____	02/11/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TAMARACK HOME	898 TAMARACK LN SUN PRAIRIE, WI 53590

(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 From 11/25/2025 to 02/11/2026, Surveyor conducted a standard survey at Tamarack Home, an AFH in Sun Prairie. Three deficiencies were identified. Census: 3	M 000		
M 386	88.06(2)(c) SERVICE AGREEMENT REQUIREMENTS A service agreement shall specify all of the following: This Rule is not met as evidenced by: Based on record review and interview, the provider's service agreement for 1 of 3 residents did not include the necessary elements required within the service agreement. Resident 1had a blank service agreement and was not signed by themselves or their legal representative. Findings include: On 11/25/2025, Surveyor reviewed Resident records and reviewed the following: -Resident 1 was admitted on 08/02/2024. Resident 1 had a blank service agreement in his/her record. On 11/25/2025 at approximately 12:00 p.m., Surveyor shared concern with Licensee A regarding the service agreement being blank in the records for Resident 1. Licensee A stated that	M 386		

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

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M 386	Continued From page 1 s/he read the agreement to each resident at admission. Licensee A stated s/he must have forgotten that the blank form was in the file. Licensee A said, "I will get those completed as soon as possible."	M 386		
M 420	88.06(3)(d)5 SIGNED STATEMENT OF AGREEMENT A statement of agreement with the plan, dated and signed by all persons involved in developing the plan. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 3 individual service plans (ISP) reviewed included a statement of agreement with the plan, dated and signed by all persons involved in the development of it. Resident 1's ISP was not signed by themselves and/or the legal representative. Findings include: On 11/25/2025 at approximately 1:30 p.m., Surveyor reviewed resident records, which documented the following: - Resident 1 was admitted to the provider's home on 08/02/2024. Resident 1's record indicated that Resident 1 had a legal representative. Resident 1's record included an ISP, dated 08/07/2025, created by the provider. The ISP did not include a signature to indicate a statement of agreement by the legal representative.	M 420		

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	0019690	A. BUILDING: _____ B. WING _____	02/11/2026

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M 420	Continued From page 2 On 11/25/2025 at approximately 3:00 p.m., Surveyor shared concern with Licensee A regarding the signed statement of agreement with the plan for Resident 1. Licensee A stated that the guardian lives out of town, and it has been hard to get a signature. Licensee A stated s/he will try and send the plan with other family members to get the ISP signed.	M 420		
M 458	88.07(3)(a) PRESCRIPTION MEDICATIONS Every prescription medication shall be securely stored, shall remain in its original container as received from the pharmacy and be stored as specified by the pharmacist. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure every prescription medication was securely stored. The provider had insulin stored unsecured. This had the potential to affect 4 of 4 residents. Findings include: On 11/25/2025 at approximately 1:00 p.m., Surveyor toured the provider's home. Surveyor observed 2 boxes of insulin Lispro Kwik pen stored in the home's refrigerator, unsecured.	M 458		

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TAMARACK HOME	898 TAMARACK LN SUN PRAIRIE, WI 53590

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M 458	Continued From page 3 Caregiver B stated they keep the medication in there because it needs to be refrigerated. On 11/25/2025 at approximately 2:00 p.m., Surveyor discussed concern with Licensee A that there were unsecured medications within the home. Surveyor observed the medications with Licensee A. Licensee A acknowledged that the medications were mixed in with food containers. Licensee A said, "I will fix that."	M 458		