STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0019548	A. BUILDING: _____ B. WING _____	R-C 07/07/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOOD HAND CARE AFH 2	1308 MATHYS RD MONONA, WI 53716

(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 07/07/2025, Surveyor conducted a verification visit at Good Hand Care AFH 2. Three deficiencies were identified. Three of 3 deficiencies were repeat (see Statement of Deficiency (SOD) TK6V11 and SOD TK6V12). Under statutory provisions of Wis. Stat. Ch. 50 a $200 revisit fee is being assessed. Census: 4	{M 000}		
{M 462}	88.07(3)(c) MEDICATION ASSISTANCE If the licensee or service provider assists a resident with prescription medication, the licensee or service provider shall help the resident securely store the medication, take the correct dosage at the correct time and communicate effectively with his or her physician. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure 1 of 2 residents received prescribed medications in the proper dosage. This is a repeat deficiency. See Statement of Deficiency (SOD) TK6V12, dated 02/23/2025. Resident 3 did not receive his/her Fluticasone Propionate and Salmeterol inhaler as prescribed.	{M 462}		

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

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{M 462}	Continued From page 1 Findings include: On 07/07/2025, at approximately 10:45 AM, Surveyor and Co-Owner C observed Resident 3's medications in the med closet. Surveyor observed Resident 3's Fluticasone Propionate and Salmeterol inhaler, with a handwritten open date of 06/18/2025, which displayed 38 of 60 doses remaining. Surveyor and Co-Owner C reviewed Resident 3's Medication Administration Records, dated 06/01/2025 to 07/07/2025, which documented: Fluticasone - Salmeterol 500-50 Inhale 1 puff twice daily. The MARs documented that the medication had been administered as prescribed. Based on the documentation, approximately 22 doses should be left in the inhaler (60 doses - approximately 19 days of use x 2 inhales a day = 38. 60 doses - 38 = 22). "For Advair Diskus, there are 60 doses (60 puffs) per Diskus inhaler. For Advair HFA, there are either 30 doses (60 puffs) or 60 doses (120 puffs), depending on the canister size. Advair Diskus and Advair HFA inhalers have a counter that tells you how many doses are left in the device." (Source: Medical News Today website, Advair dosage, 07/21/2023, https://www.medicalnewstoday.com/articles/drugs-advair-dosage (retrieval date - July 08, 2025).) Co-Owner C stated that the inhaler was handed to Resident 3 for him/her to administer. Co-Owner C stated that Resident 3 would be assessed to determine if s/he was pressing the inhaler down to ensure s/he was receiving a dose.	{M 462}		

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{M 466}	88.07(3)(e)1 MEDICATION- RECORD KEEPING The licensee shall keep a record of all prescription medications controlled, dispensed or administered by the licensee which show the name of the resident, the name of the particular medication, the date and time the resident took the medication and errors and omissions. The medication controlled by the licensee shall be kept in a locked place. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure accurate records were kept of all prescription medications administered for 1 of 2 residents. This is a repeat deficiency. See Statement of Deficiency (SOD) TK6V11, dated 08/28/2024, and SOD TK6V12, dated 02/23/2025. Resident 2's Medication Administration Records (MARs) were missing documentation of medication administration of his/her scheduled Furosemide. Findings include: On 07/07/2025, at approximately 10:00 AM, Surveyor and Licensee A reviewed Resident 2's medications in the med closet. Surveyor compared available bottles of medications to Resident 2's MARs, dated 06/01/2025 to 07/07/2025, and determined the bottle of Furosemide (Lasix) 20 MG (milligram) was not documented on the MARs. The label on the	{M 466}		

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{M 466}	Continued From page 3 bottle of Furosemide stated the medication had been dispensed on 06/03/2025 and the order stated, "Take 2 tablets by mouth once daily." Licensee A stated s/he was unsure of why the medication was not documented on the MARs and would discuss the concern with Co-Owner C. Surveyor and Licensee A reviewed Resident 2's record and observed a pharmacy delivery report, dated 06/03/2025, that stated the Furosemide had been filled. On 07/07/2025, at approximately 10:45 AM, Surveyor and Co-Owner C reviewed Resident 2's MARs. Co-Owner C stated s/he had forgotten to add the Furosemide prescription to Resident 2's MARs.	{M 466}		
{M 474}	88.07(4)(c) FOOD PREPARED AND STORED SANITARY WAY Food shall be prepared and stored in a sanitary manner. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure that food was stored in a safe and sanitary manner. The provider did not implement a system to identify when opened food was to be discarded for the prevention of food borne illnesses. This is a repeat deficiency. See Statement of Deficiency (SOD) TK6V12, dated 02/23/2025. Findings include:	{M 474}		

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{M 474}	Continued From page 4 The provider is licensed to care for up to 4 residents within the client groups of developmentally disabled, emotionally disturbed/mental illness, advanced aged, irreversible dementia/Alzheimer's, and physically disabled. On 07/07/2025, at approximately 10:50 AM, Surveyor and Co-Owner C observed: Refrigerator: -Raw chicken sitting in a pan of water that was not sealed or dated. -(2) bowls of white rice that were partially sealed and not dated. -A bowl of what appeared to be meatballs that were not dated. -A package of protein toppers that was not sealed. -A silver bowl of a leftover food that was partially sealed and not dated. Freezer: -An opened 5.5 ounce package of bacon strips that was not sealed. -An opened 10 ounce package of corn dogs that was not sealed. According to the 2017 FDA (US Food and Drug Administration) Food Code, refrigerated, ready to eat (RTE), Time/Temperature Controlled for Safety (TCS) food prepared and held in a food establishment for more than 24 hours shall be clearly marked to indicate the date or day by which the food shall be consumed on the premises, sold, or discarded when held at a temperature of 41 degrees Fahrenheit or less for a maximum of seven days. The day of preparation shall be counted as Day 1.	{M 474}		

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{M 474}	Continued From page 5 Refrigerated, RTE/TCS food prepared and packaged by a food processing plant shall be clearly marked, at the time the original container is opened in a food establishment and if the food is held for more than 24 hours, to indicate the date or day by which the food shall be consumed or discarded. The "Servsafe Coursebook - 7th Edition, documented ready-to-eat TCS food (foods that need time and temperature control for safety) can be stored for only seven days if it is held at 41 degrees Fahrenheit or lower." TCS foods includes milk and dairy products, eggs, meat (beef, pork, and lamb), poultry, fish, shellfish and crustaceans, baked potatoes, tofu or other soy protein, sprouts and sprout seeds, sliced melons, cut tomatoes, cut leafy greens, untreated garlic-and-oil mixtures, and cooked rice, beans, and vegetables. Co-Owner C stated s/he understood that food products need to be labeled and dated when opened.	{M 474}		