STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0012191	A. BUILDING: _____ B. WING _____	06/19/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CLOVER LANE PLACE AFH	421 CLOVER LANE FORT ATKINSON, WI 53538

(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 06/18/2025, Surveyor conducted a standard survey at Clover Lane Place AFH. Two (2) deficiencies were identified. Census: 4	M 000		
M 276	88.05(3)(a) Homelike Environment An adult family home shall be safe, clean and well-maintained and shall provide a homelike environment. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure the home was clean and well-maintained. The home was in disrepair and a considerable amount of dust and cobwebs. Findings include: On 06/18/2025 at approximately 8:45 a.m., Surveyor toured the provider's home with Caregiver B. Surveyor observed the following concerns: - The living room curtain rod was broken and the curtains were laying on the ground. - Resident 2's bedroom had dust and debris on the floor, soiled shelves in the closer, and a hole in the closet door. - The bathroom had a broken closet door, and a	M 276		

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

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M 276	Continued From page 1 layer of dust on the grab bar near the toilet, the window ledges, paper towel holder and the floor boards. - A kitchen cabinet was missing the door. - The vents throughout the home were partially rusted and had a layer of dust on them. - The window screens in the kitchen and bedrooms had thick cobwebs on them. On 06/18/2025 at approximately 10:30 a.m., Surveyor reviewed the above concerns with Program Manager A. Program Manager A stated that s/he agreed the place could use a good cleaning and that 3rd shift will be perfect for doing it.	M 276		
M 448	88.07(2)(b)5 MONITORING HEALTH Monitoring resident health by observing and documenting changes in each resident's health and referring a resident to health care providers when necessary. This Rule is not met as evidenced by: Based on record review and interview, the provider did not refer to Resident 1's health care provider when his/her blood sugars were lower than 60. Findings include: On 06/18/2025, Surveyor reviewed the record of Resident 1. Resident 1 was admitted to the provider on 02/27/2024 with diagnoses including diabetes. Resident 1 had a physician order for Humalog which included directions to notify the MD (medical doctor) if blood sugar is lower than	M 448		

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 448	Continued From page 2 60 or higher than 400. Surveyor reviewed Resident 1's May and June 2025 medication administration records (MAR). The MAR documented Resident 1's blood sugars as the following: 05/01/2025 at 4:12 p.m., blood sugar 37 05/05/2025 at 12:06 p.m., blood sugar 59 05/11/2025 at 4:03 p.m., blood sugar 58 05/12/2025 at 12:00 p.m., blood sugar 56 05/13/2025 at 12:18 p.m., blood sugar 57 05/15/2025 at 4:06 p.m., blood sugar 53 05/16/2025 at 4:04 p.m., blood sugar 53 05/17/2025 at 4:12 p.m., blood sugar 55 05/20/2025 at 4:12 p.m., blood sugar 44 06/01/2025 at 12:06 p.m., blood sugar 59 06/03/2025 at 4:02 p.m., blood sugar 54 06/04/2025 at 4:09 p.m., blood sugar 54 On 06/18/2025 at approximately 10:30 a.m., Surveyor reviewed the above blood sugars with Program Manager A. Surveyor asked for documentation that Resident 1's MD was notified each time his/her blood sugar was below 60, as indicated in the physician order. Program Manager A stated no, that they have not been. S/he stated that Resident 1's blood sugar goes up after s/he eats a meal, so the provider has not been notifying Resident 1's MD. Surveyor asked Program Manager A if s/he had documentation of staff re-checking Resident 1's blood sugar or a clarification from the doctor only to notify them if Resident 1's blood sugar doesn't go up after a meal. Program Manager A stated no, that was his/her misunderstanding.	M 448		