STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0013796	A. BUILDING: _____ B. WING _____	C 10/17/2024

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NOUVELLE CARE SERVICES INC	6951 N 77TH CT MILWAUKEE, WI 53223

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M 000	INITIAL COMMENTS On 10/17/2024, Surveyors completed a standard survey and 1 complaint investigation at Nouvelle Care Services. As a result, 6 deficiencies were identified. One of 6 was a repeat violation (see Statement of Deficiency LS4U11, dated 02/13/2019). One complaint was unsubstantiated. Census: 3	M 000		
M 232	88.04(2)(g)1 HEALTH SCREENING FOR STAFF The licensee shall obtain documentation from a physician, a registered nurse or a physician's assistant indicating that the licensee and any service provider has been screened for illness detrimental to residents, including for tuberculosis. The documentation is to be completed within 90 days before the start of providing service. The documentation shall be kept confidential except that the licensing agency shall have access to the documentation for verification. This Rule is not met as evidenced by: Based on record review and interview, the provider did not obtain documentation indicating 1 of 1 staff had been screened for tuberculosis (TB), by a physician, a registered nurse or a physician's assistant, within 90 days before the start of providing service. Caregiver A's employee file did not contain documentation of the TB test results. This is a repeat deficiency. See Statement of Deficiency LS4U11, dated 02/13/2019.	M 232		

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

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M 232	Continued From page 1 Findings include: On 10/03/2024, at 10:00 AM, Surveyors reviewed Caregiver A's record. Caregiver A was hired on 02/02/2022. Caregiver A was screened for communicable diseases on 11/09/2023. Caregiver A's record did not contain evidence s/he was screened for TB. On 10/03/2024, at 11:10 AM, Surveyors interviewed Caregiver A. Caregiver A confirmed s/he started providing care when s/he was hired. Caregiver A confirmed s/he had a TB test and was screened for communicable diseases. On 10/17/2024, at 10:00 AM, Surveyors interviewed Licensee C. Licensee C reported Caregiver A was screened for communicable diseases including TB prior to her/his start date. Licensee C reported s/he was unsure where the documentation was.	M 232		
M 380	88.06(2)(a) ADMISSION-HEALTH EXAM Except as provided in subd. 2., the licensee shall ensure that a new resident of an adult family home receives a health examination by a physician to identify health problems and is screened for communicable disease, including tuberculosis. Screening for communicable disease may be provided by a physician, a registered nurse or a physician assistant. The health examination and screening shall take place within 90 days prior to admission to the home or within 7 days after admission.	M 380		

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M 380	Continued From page 2	M 380		

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure each resident admitted to the facility received a health examination by a physician to identify health problems and was screened for communicable disease within 90 days prior to placement or within 7 days after admission for 2 of 2 residents reviewed. Resident 1 was not screened for communicable diseases, including TB. Resident 2 was not screened for TB.

Findings include:

On 10/02/2024, at 10:20 AM, Surveyors reviewed resident records and identified the following:

Resident 1 was admitted on 03/23/2024. Resident 1's record did not contain evidence s/he was screened for communicable disease, including TB.

Resident 2 was admitted on 07/17/2024. Resident 2's record contained a communicable disease screening dated 07/17/2024. Resident 2's record did not contain the results of a TB test.

On 10/17/2024, at 10:00 AM, Surveyors interviewed Licensee C. Licensee C reported s/he was not aware Resident 2 still required a TB test along with the communicable disease screening. Licensee C reported Resident 1 was admitted from the hospital and all required documentation was requested. Licensee C reported s/he was unsure where the documentation was.

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M 384	Continued From page 3	M 384		
M 384	88.06(2)(b) SERVICE AGREEMENT EXCEPT RESPITE An adult family home shall have a service agreement with each person to be admitted to the home except a person being admitted for respite care. The service agreement shall be completed prior to admission and revised at least 30 days prior to any change. The service agreement shall be dated and signed by the licensee and the person being admitted or the persons guardian or designated representative. Copies shall be provided to all parties and to the placing agency, if any. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure an admission agreement was completed, dated, and signed by each resident, guardian or designated representative, and licensee, prior to admission for 1 of 2 residents. Resident 1 did not have a service agreement with the provider. Findings include: On 10/02/2024, at 10:20 AM, Surveyors reviewed Resident 1's record. Resident 1 was admitted to the facility on 03/23/2024. Resident 1 had a court appointed guardian. Resident 1's file contained a blank admission agreement. Resident 1's file did not contain any evidence of a signed agreement between the licensee and Resident 1's guardian. On 10/17/2024, at 10:00 AM, Surveyors interviewed Licensee C. Licensee C reported Resident 1's guardian would not come to the house. Licensee C reported s/he did not send	M 384		

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M 384	Continued From page 4 Resident 1's guardian the service agreement to be signed. Licensee C confirmed the service agreement should be signed upon admission.	M 384		
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 a statement of agreement with the Individual Service Plan (ISP) was dated and signed by all persons involved in developing the plan for 1 of 1 resident (Resident 1). Resident 1's ISP did not contain a guardian signature or managed care organization (MCO) team signatures. Findings include: On 10/02/2024, at 10:20 AM, Surveyors reviewed Resident 1's record. Resident 1 was admitted to the facility on 03/23/2024. Resident 1's ISP was undated. Resident 1's face sheet, undated, identified Resident 1 had a MCO case management team. Resident 1's face sheet also identified Resident 1 had a guardian. Resident 1's ISP did not contain a guardian signature or MCO case management team signatures. On 10/17/2024, at 10:00 AM, Surveyors interviewed Licensee C. Licensee C reported s/he was aware of the code requirements. Licensee C reported s/he had issues with getting Resident 1's	M 420		

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M 420	Continued From page 5 guardian and MCO team together for signatures due to the constant changes with Resident 1's team. Licensee C reported s/he did not send out Resident 1's ISP to the team for signatures but would wait for the team to come to the house.	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 medications stored in the common kitchen refrigerator were stored in a secure manner for 1 of 1 resident (Resident 2). The provider did not ensure all prescription medications were stored as specified by the pharmacist or the manufacturer for Resident 2. Resident 2's insulin pens were stored in the home's common kitchen refrigerator unsecured. Findings include: On 10/02/2024, at 10:30 AM, Surveyors observed the common refrigerator in the kitchen. Surveyor observed the following insulin pen cartridges for	M 458		

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M 458	Continued From page 6 Resident 1: - One box of Humalog 100/milliliter (ml) injection pens which contained 5 pens. - One box of Lantus Solostar injection which contained 3 pens. Surveyors observed Residents moving freely throughout the home. On 10/17/2024, at 10:00 AM, Surveyors interviewed Licensee C. Licensee C confirmed the insulin pens were to be securely stored. Licensee C did not offer a response to why the insulin pens were not securely stored.	M 458		
M 464	88.07(3)(d) MEDICATION- WRITTEN ORDER Before the licensee or service provider dispenses or administers a prescription medication to a resident, the licensee shall obtain a written order from the physician who prescribed the medication specifying who by name or position is permitted to administer the medication, under what circumstances and in what dosage the medication is to be administered. The licensee shall keep the written order in the resident's file. This Rule is not met as evidenced by: Based on record review and interview, prior to administering medications to a resident, the provider did not obtain a written order from the physician who prescribed medications to the resident, stating who can administer the	M 464		

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M 464	Continued From page 7	M 464		

medications for 2 of 2 residents. Resident 1 and Resident 2 required staff to administer their medication. Resident 1's written order for staff to administer medications was dated 194 days after admission. Resident 2's written order for staff to administer medications was dated 77 days after admission.

Findings include:

On 10/02/2024, at 9:20 AM, Surveyors reviewed resident records and identified the following:

-Resident 1 was admitted on 03/23/2024. Resident 1's ISP indicated Resident 1 required medication administration by staff. Resident 1's record did not contain a written order for staff to administer medications.

-Resident 2 was admitted on 07/17/2024. Resident 2's ISP indicated Resident 2 required medication administration by staff. Resident 2's record did not contain a written order for staff to administer medications.

On 10/03/2024 at 9:16 AM, House Manager B emailed Surveyors Resident 1's and Resident 2's signed medication written orders.

-Resident 1's written order for staff to administer medications was dated 10/03/2024. Resident 1's written order for staff to administer medications was dated 194 days after admission.

-Resident 2's written order for staff to administer medications was dated 10/02/2024. Resident 2's written order for staff to administer medications was dated 77 days after admission.

On 10/17/2024, at 10:00 AM, Surveyors

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M 464	Continued From page 8 interviewed Licensee C. Licensee C confirmed the code requirement. Licensee C reported they had the paperwork completed right away. Licensee C reported s/he was unsure why the paperwork was not completed or where it was. Licensee C reported they sent Surveyors the new medication orders. Licensee C confirmed the written orders were late.	M 464		