STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018106	A. BUILDING: _____ B. WING _____	R 11/15/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ITS ABOUT YOU ADULT FAMILY HOME LLC	1716 HARRISON AVENUE BELOIT, WI 53511

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{M 000}	INITIAL COMMENTS On 11/12/2024-11/15/2024, Surveyor conducted a standard survey and verification visit at Its About You Adult Family Home LLC. Seven deficiencies were identified. Seven of 7 deficiencies were repeat violations (See Statement of Deficiency (SOD) ZTYO11, dated 05/09/2023). All other deficiencies from SOD ZTYO11, dated 05/09/2023 were substantially corrected. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 4	{M 000}		
M 276	88.05(3)(a) HOME 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 maintain a safe, clean, and homelike environment. This is a repeat deficiency. See Statement of Deficiency (SOD) ZTYO11, dated 05/09/2023. Findings include:	M 276		

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

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M 276	Continued From page 1 On 11/12/2024 at 8:48 AM, Surveyor toured the facility and observed the following: Upon walking to the main floor, a large adjacent wall had a hole with wires exposed. Upstairs bathroom: -The flooring had lifted causing an uneven surface for residents. Resident 3's bedroom: -Strong odor of urine was present. Resident 5's bedroom: -The ceiling wallpaper was peeled off leaving behind patches of discoloration and glue residue. Downstairs bathroom: -The ceiling fan was dusty. -The ceiling above the sink was discolored. On 11/12/2024 at 9:05 AM, Surveyor interviewed Licensee A regarding the ongoing lack of maintaining a homelike environment. Licensee A acknowledged the home needed repairs in different areas. Licensee A confirmed s/he was the owner of the home and s/he would be responsible for making any changes. Licensee A reported the wires exposed were from an old door bell. Licensee A stated s/he trying to hire a repair person to assist in updates the home needed.	M 276		
M 290	88.05(3)(e)2.b INSPECTIONS-GAS FURNACE A gas furnace shall be inspected and serviced every 3 years by a heating contractor or local utility company.	M 290		

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M 290	Continued From page 2 This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 gas furnace was inspected and serviced every 3 years. The furnace was last serviced 11/07/2019. This is a repeat deficiency. See Statement of Deficiency (SOD) ZTYO11, dated 05/09/2023. Findings include: On 11/12/2024 at 9:05 AM, Surveyor conducted a verification visit. Surveyor asked Licensee A for the most recent furnace inspection. Licensee A reported s/he would need to call the company that serviced their furnace as s/he did not have a current copy. Surveyor stated a copy would need to be submitted no later than 11/14/2024. As of 11/15/2024, no evidence of a furnace inspection was sent by Licensee A.	M 290		
M 378	88.06(1)(e) INFORMATION TO DETERMINE SERVICES The licensee shall obtain information from a prospective resident necessary to determine whether the person's needs can be met with the services identified in the home's program statement. This Rule is not met as evidenced by: Based on record review and interview, the provider did not conduct a pre-admission assessment for Resident 5. This is a repeat deficiency. See Statement of Deficiency (SOD) ZTYO11, dated 05/09/2023.	M 378		

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M 378	Continued From page 3 Findings include: On 11/12/2024, Surveyor reviewed Resident 5's record and identified the following: -Resident 5 was admitted to the facility July 2024. Resident 5's record did not contain a pre-admission assessment. On 11/12/2024 at 9:05 AM, Surveyor interviewed Licensee A regarding Resident 5's missing pre-admission assessment. Licensee A reported Resident 5 moved from up north and s/he completed a video conference with Resident 5's care team but did not document the meeting in writing. Licensee A stated s/he will work on creating a form for pre-admission assessments.	M 378		
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. This Rule is not met as evidenced by: Based on record review and interview, the	M 380		

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M 380	Continued From page 4 provider did not ensure Resident 5 received a health examination by a physician to identify health problems and screen for communicable disease, including tuberculosis (TB), within 90 days prior to admission or within 7 days after admission. Resident 5 did not have a TB test or communicable disease screen completed within 90 days prior to admission or within 7 days after admission. This is a repeat deficiency. See Statement of Deficiency (SOD) ZTYO11, dated 05/09/2023. Findings include: On 11/12/2024, Surveyor conducted a verification visit and identified the following: Resident 5 was admitted to the facility July 2024. Resident 5 's record did not include a TB test or communicable disease screen. On 11/12/2024 at 9:05 AM, Surveyor interviewed Licensee A. Licensee A reported Resident 5 moved from up north and s/he was still in the process of establishing care in the area. Licensee A confirmed Resident 5 admitted in July 2024. Surveyor expressed concern Resident 5 had been admitted for approximately 5 months without establish care and the provider continuing to not follow chapter 88 when admitting new residents. Licensee A acknowledged Resident 5 did not complete a health examination prior to admission.	M 380		
M 384	88.06(2)(b) SERVICE AGREEMENT EXCEPT RESPITE An adult family home shall have a	M 384		

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M 384	Continued From page 5 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 a service agreement was completed, dated, and signed prior to admission for 1 of 1 resident. Resident 5 has resided in the facility for over 4 months without a signed service agreement. This is a repeat deficiency. See Statement of Deficiency (SOD) ZTYO11, dated 05/09/2023. Findings include: On 11/12/2024, Surveyor reviewed Resident 5's record and identified the following: -Resident 5 was admitted to the facility July 2024. Resident 5's record did not contain a service agreement. On 11/12/2024 at 9:05 AM, Surveyor interviewed Licensee A regarding Resident 5's lack of service agreement. Licensee A reported s/he did not ensure Resident 5 had a service agreement. Licensee A stated s/he created a service agreement document after the last survey, but forgot to have Resident 5's legal representative	M 384		

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M 384	Continued From page 6 sign the document. Licensee A stated s/he would work on getting Resident 5's record up to code.	M 384		
M 404	88.06(3)(a) INDIVIDUAL SERVICE PLAN & ASSESSMENT The licensee shall ensure that a written assessment and individual service plan is completed and developed for each resident within 30 days after placement. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure a written assessment and individual service plan (ISP) was completed for 1 of 1 resident (Resident 5) within 30 days of placement. This is a repeat deficiency. See Statement of Deficiency (SOD) ZTYO11, dated 05/09/2023. Findings include: On 11/12/2024, Surveyors reviewed Resident 5's record and identified the following: -Resident 5 was admitted to the facility July 2024. Resident 5's record did not contain an ISP. On 11/12/2024 at 9:05 AM, Surveyor interviewed Licensee A regarding Resident 5's lack of an ISP. Licensee A acknowledged Resident 5's ISP was missing from the record. Licensee A stated s/he forgot to create the document. Licensee A stated s/he was hopeful with upcoming time off from his/her primary job, resident records would be	M 404		

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M 404	Continued From page 7 updated.	M 404		
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, the provider did not obtain a written order from the physician specifying the provider's staff could administer medications for 1 of 1 resident (Resident 5) reviewed. Resident 5 did not have a written order permitting the provider staff to administer medications. This is a repeat deficiency. See Statement of Deficiency (SOD) ZTYO11, dated 05/09/2023. Findings include: On 11/12/2024, Surveyor reviewed Resident 5's record. Resident 5 was admitted to the facility July 2024. Resident 5's medication administration record (MAR) indicated staff were administering Resident 5's medications in the months of October and November 2024. Resident 5's record	M 464		

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M 464	Continued From page 8 did not contain a written order from a physician for the provider to administer medications prior to receiving medications. On 11/12/2024 at 9:05 AM, Surveyor interviewed Licensee A regarding Resident 5's lack of a written order permitting provider staff to administer medications. Licensee A reported Resident 5 has an appointment with a new primary care physician (PCP) on 12/08/2024. Surveyor shared Resident 5's record showed emergency room (ER) visit dated 08/08/2024. Licensee A acknowledged Resident 5 received ER treatment in August 2024 and care should have been established closer to admission date. Licensee A stated s/he will have Resident 5's new PCP sign a written order.	M 464		