

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0015022	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 08/06/2026
NAME OF PROVIDER OR SUPPLIER LIVING PROOF FAMILY FACILITY LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 5620 N 78TH STREET MILWAUKEE, WI 53218		
(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 08/06/2026, Surveyor completed a complaint investigation and verification visit at Living Proof Family Facility LLC. As a result, 5 deficiencies were corrected and 3 new deficiencies were identified. The complaint was substantiated. Under statutory provisions of Wis. Stat. Ch. 50, a \$200 revisit fee will be assessed. Census: 3	{M 000}		
M 216	88.04(2)(a) RESPONSIBILITIES The licensee shall ensure that the home and its operation comply with this chapter and with all other laws governing the home and its operation. This Rule is not met as evidenced by: Based on record review, and interviews, the provider did not ensure the home, and its operation complied with this chapter and all other laws governing the home and its operations potentially affecting 4 of 4 residents. Licensee A did not follow special orders from the Department and maintain compliance. Licensee A was Resident 1's representative payee and did not ensure her/his bills were paid. Findings include: On 07/29/2026, Surveyors reviewed the Departments files and identified the following: On 05/21/2026, the Department issued SOD H17M13 and Notice and Order Letter notifying the provider of the results of survey and verification visit at Living Proof Family Facility. As a result of	M 216		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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M 216	Continued From page 1 the survey, the provider was issued 5 deficiencies. One of 5 were repeat deficiencies, and 1 citation was cited for the third time. The following deficiencies were identified: M0246 88.04(5)(b) - Training -8 Hours Annually - This is a repeat cite M0276 88.05(3)(a) - Homelike Environment - This is cited for the third time M0290 88.05(3)(e)2.b Inspections - Gas Furnace M0570 83.10(3)(l) Safe Physical Environment Z0014 50.065(2)(d) Maintain Background Information The Special Orders from the Notice and Order Letter included the following: " ... WITHIN 7 DAYS of receipt of this notice, the licensee shall provide the legal representative and the case manager (if any) for each current resident with a copy of Statement of Deficiency H17M13 and a copy of this Notice and Order letter. The licensee shall retain evidence, acceptable to the Department, to verify compliance with Order #1. Acceptable documentation will be a signed, certified mail receipt or a verification letter or email from the legal representative and case manager. Required evidence will be made available to the Department representatives upon request...." On 08/06/2026, Surveyor completed a verification visit and complaint investigation at Living Proof Family Facility. As a result of the survey, 5 deficiencies were corrected and the provider was issued 3 deficiencies. The following deficiencies identified: M0216 88.04(2)(a) - Responsibilities - This is being cited for the fourth time	M 216		

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M 216	Continued From page 2 M0436 88.07(2)(a) Services M0510 88.09(1)(d)11 Resident Funds Example 2 On 07/29/2026 at 11:30 AM, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 03/01/2015. Resident 1's Individual Service Plan (ISP), dated 07/05/2025, indicated the provider (Licensee D) was Resident 1's representative payee and assisted Resident 1 with her/his finances. Resident 1's ISP indicated Resident 1 received a monthly benefit of \$994 a month. Resident 1 received a personal allowance of \$110 each month for discretionary spending and the remaining \$884 was applied towards Resident 1's room/board and approved care expenses. "What is a representative payee? A representative payee is a person or an organization. The Social Security Administration appoints a payee to receive the Social Security or SSI benefits for anyone who can't manage or direct the management of their benefits. A trusted family member or friend can be nominated to be a representative payee, but is subject to the Social Security Administration's approval. A payee's main duties are to use the benefits to pay for the current and future needs of the beneficiary. Payee duties also include properly saving any benefits not needed to meet current needs. A payee must keep records of: " The amount of Social Security or SSI benefits received " Expenses for food and housing " Expenses for clothing, medical, dental, personal items, recreational, and other miscellaneous expenses	M 216			

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M 216	Continued From page 3 Any savings as well as interest earned on those savings Being an authorized representative, serving as an agent under a power of attorney, or having a joint bank account with the beneficiary does not give a person legal authority to manage the Social Security and/or SSI benefits for a person with disabilities.2 To become a representative payee a person must apply and be appointed by the Social Security Administration. Additional information is available on the SSA's website ssa.gov/payee/faqrep.htm. What a representative payee can and should do: " Determine the beneficiary's needs and use his or her payments to meet those needs. " Save any money left after meeting the beneficiary's current needs in an interest bearing account or savings bonds for the beneficiary's future needs. " Report any changes or events, which could affect the beneficiary's eligibility for benefits or payment. " Keep records of all payments received and how they were spent and saved. " Provide benefits information to social service agencies or medical facilities that serve the beneficiary. " Help the beneficiary get medical treatment when needed. " Complete written reports accounting for the representative payee's use of funds." (Source: Consumer Financial Protection Bureau, The role of a representative payee https://files.consumerfinance.gov/f/documents/cfpb_ymsg_disabilities_payee-representative_role_handout.pdf (retrieval date - August 6th, 2026).) On 08/06/2026 at 2:00 PM, Surveyor reviewed records from Resident 1's managed care organization (MCO). A correspondence indicated	M 216		

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M 216	Continued From page 4 a payment for room and board was made to the MCO on 01/12/2026 as a partial payment of \$648. No other payments were made to the MCO after January 2026. On 07/29/2026, at 12:30 PM, Surveyor interviewed Licensee D. Licensee D confirmed receipt of the SOD and Notice and Order Letter. Licensee D reported s/he did not send the required documents to the legal representatives or the case managers as required in the special orders. Licensee D confirmed s/he was Resident 1's representative payee and had been since around 2018. Licensee D reported they were working with the MCO so Resident 1 would be her/his own payee. Licensee D confirmed s/he did not make the room and board payments to the MCO. Licensee D reported s/he thought the payments went to the facility.	M 216			
M 436	88.07(2)(a) SERVICES The licensee shall provide or arrange for the provision of individualized services specified in a resident's individual service plan that are the licensee's responsibility. This Rule is not met as evidenced by: Based on record review and interview, the provider did not provide for the provision of individualized services for 1 of 1 resident (Resident 1) with funds. Resident 1 required assistance with management of funds which was not provided.	M 436			

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M 436	Continued From page 5 Findings include: On 07/29/2026 at 11:30 AM, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 03/01/2015. Resident 1's Individual Service Plan (ISP), dated 07/05/2025, indicated the following: The provider was Resident 1's representative payee and assisted Resident 1 with her/his finances. Under section "Resident strengths/what resident prefers to do independently", Resident 1's ISP reported, "Resident understands that [s/he] receives a monthly income and is aware of how [her/his] personal funds are used. [S/He] participates in discussions regarding [her/his] spending money and independently uses [her/his] personal allowance for items of [her/his] choosing. Resident may request to review [her/his] finances at any time and is informed of purchases made on [her/his] behalf." Under section "What Provider/Caregiver/Support Person does/when & how" Resident 1's ISP indicated Resident 1 received a monthly benefit of \$994 a month. Resident 1 received a personal allowance of \$110 each month for discretionary spending and the remaining \$884 was applied towards Resident 1's room/board and approved care expenses. Resident 1's Supplemental Security Income (SSI) disbursement receipt and room & board acknowledgement for January 2026 - July 2026 reported the following: 01/2026 - SSI Benefit \$994 Amount received by resident \$600	M 436		

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M 436	Continued From page 6 Amount applied to room & board \$394 02/2026 - SSI Benefit \$994 Amount received by resident \$600 Amount applied to room & board \$394 03/2026 - SSI Benefit \$994 Amount received by resident \$500 Amount applied to room & board \$494 04/2026 - SSI Benefit \$994 Amount received by resident \$650 includes birthday spending Amount applied to room & board \$344 05/2026 - SSI Benefit \$994 Amount received by resident \$600 Amount applied to room & board \$394 06/2026 - SSI Benefit \$994 Amount received by resident \$110 Amount applied to room & board \$884 07/2026 - SSI Benefit \$994 Amount received by resident \$110 Amount applied to room & board \$884 On 07/29/2026, at 12:30 PM, Surveyor interviewed Licensee D. Licensee D reported they were working on Resident 1 becoming her/his own payee. Licensee D reported Resident 1 at times requests more money and refuses to pay her/his bills. Licensee D acknowledged Surveyor's concerns.	M 436			
M 510	88.09(1)(d)11 RESIDENT FUNDS Records maintained by the licensee of the resident's finances, including	M 510			

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M 510	Continued From page 7 written authorization from the resident of resident's guardian to control the resident's funds. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure a record of funds was maintained for 1 of 1 resident (Resident 1,) for whom the provider managed finances. The provider assisted Resident 1 with their financial management but did not keep an accurate record of funds. Findings include: On 07/17/2026, the Department received a complaint alleging concerns with resident funds. On 07/29/2026 at 11:30 AM, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 03/01/2015. Resident 1's Individual Service Plan (ISP), dated 07/05/2025, indicated the provider was Resident 1's representative payee and assisted Resident 1 with her/his finances. Resident 1's ISP indicated Resident 1 received a monthly benefit of \$994 a month. Resident 1 received a personal allowance of \$110 each month for discretionary spending and the remaining \$884 was applied towards Resident 1's room/board and approved care expenses. Resident 1's ISP indicated Resident 1 and the provider managed the finances and financial records. Resident 1's signed admission agreement, dated 03/01/2015, under section "Personal Funds" indicated "All personal funds under \$100 will be held by the Facility as petty cash. The Facility shall maintain a separate accounting of any deposited money for each resident. An individual	M 510		

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M 510	Continued From page 8 financial record is available on request to the resident or his or her legal representative. Resident's or his or her legal representative will automatically receive quarterly financial statements." Resident 1's Supplemental Security Income (SSI) disbursement receipt and room & board acknowledgement for January 2026 - July 2026 reported the following: 01/2026 - SSI Benefit \$994 Amount received by resident \$600 Amount applied to room & board \$394 02/2026 - SSI Benefit \$994 Amount received by resident \$600 Amount applied to room & board \$394 03/2026 - SSI Benefit \$994 Amount received by resident \$500 Amount applied to room & board \$494 04/2026 - SSI Benefit \$994 Amount received by resident \$650 includes birthday spending Amount applied to room & board \$344 05/2026 - SSI Benefit \$994 Amount received by resident \$600 Amount applied to room & board \$394 06/2026 - SSI Benefit \$994 Amount received by resident \$110 Amount applied to room & board \$884 07/2026 - SSI Benefit \$994 Amount received by resident \$110 Amount applied to room & board \$884	M 510		

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M 510	Continued From page 9 On 07/29/2026, at 12:30 PM, Surveyor interviewed Licensee D. Licensee D reported s/he started a ledger when a complaint was received from the Managed Care Organization (MCO) regarding the missed room & board payments. Licensee D reported s/he thought s/he may have other ledgers for Resident 1 and would send them to Surveyor. As of 08/06/2026, at 2:00 PM, no further documentation was received.	M 510			