

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0019987	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED C 07/07/2026
NAME OF PROVIDER OR SUPPLIER 1ST HEALTH LLC			STREET ADDRESS, CITY, STATE, ZIP CODE 215 3RD ST MONROE, WI 53566		
(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	
N 000	Initial Comments On 07/07/2026, the bureau of assisted living southern regional office conducted a complaint investigation at 1st Health LLC a CBRF located in Monroe, WI. As a result of this survey, 1 violation of DHS Chapter 83 was issued. The complaint was unsubstantiated. Census: 11	N 000			
N 386	83.35(3)(a) Comprehensive Individualized Service Plan Comprehensive individual service plan. Scope. Within 30 days after admission and based on the assessment under sub. (1), the CBRF shall develop a comprehensive individual service plan for each resident. The individual service plan shall include all of the following: 1. Identify the resident 's needs and desired outcomes. 2. Identify the program services, frequency and approaches under s. HFS 83.38(1) the CBRF will provide. 3. Establish measurable goals with specific time limits for attainment. 4. Specify methods for delivering needed care and who is responsible for delivering the care. This Rule is not met as evidenced by: Based on record review and interview, the provider did not develop a comprehensive individualized service plan within 30 days after admission.	N 386			

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

TITLE

(X6) DATE

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N 386	Continued From page 1 Resident 1 was admitted to the on 04/03/2026. Prior to admission s/he required assistance with twice daily (BID) dressing changes to his/her suprapubic urinary catheter. On 07/07/2026, Surveyor reviewed Resident 1's facility record. The only individualized service plan (ISP) documented was the temporary ISP signed by Administrator A on 03/16/2026. This is a repeat violation of statement of deficiency (SOD) E16T11 dated 12/27/2024, SOD E16T12 03/05/2025 and SOD E16T13 dated 07/16/2025. FINDINGS INCLUDE: On 06/12/2026, the Department received a complaint with allegations of inadequate treatment of urinary catheter. On 07/07/2026 at approximately 9:00 AM, Surveyor arrived at facility for a complaint investigation. On 07/07/2026 at 9:15 AM, Surveyor interviewed Caregiver B about Resident 1. Caregiver B stated s/he had cared for Resident 1 on morning shifts from April to June this year. Caregiver B stated Family Member C had demonstrated to Administrator A and herself/himself how to care for Resident 1's suprapubic urinary catheter. Caregiver B did not know if Family Member C was a nurse or not. Caregiver B stated Family Member C's training included how to change the gauze dressing twice daily (BID) to maintain skin integrity and cleanliness around the catheter entrance cite. Caregiver B stated Family Member C instructed them to use warm water to clean the catheter tubing and catheter entrance site.	N 386		

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N 386	Continued From page 2 Caregiver B stated that home health applied an anchor dressing to Resident 1's catheter tubing, but facility staff didn't normally use the anchor dressing. Caregiver B stated Administrator A cut a hole in the pocket of Resident 1's pants and would then feed the catheter tubing through the hole. Caregiver B reported s/he wasn't aware the anchor dressing applied by home health was placed to prevent the catheter tubing from being pulled out of the bladder. Caregiver B reported being disturbed by Family Member C's practice of changing the catheter dressing without washing his/her hands or donning gloves. Caregiver B stated facility staff implemented standard precautions and donning of gloves when they changed the dressing about the catheter entrance. Caregiver B reported Resident 1 developed a bladder infection while residing at facility. Caregiver B denied working with a nurse affiliated with facility. Caregiver B reported that when concerns arose with Resident 1's suprapubic catheter facility would contact home health provider for further direction. Caregiver B reported s/he hadn't cared for a suprapubic catheter prior to meeting Resident 1. On 07/07/2026 at 10:20 AM, Administrator A reported facility doesn't have a nurse providing general supervision to entire facility, instead nurses are contracted on an individualized basis. Administrator A reported Resident 1 was seen weekly by home health staff and their role was to replace catheter tubing/collection bag and anchor dressing. Administrator A reported it was decided the facility would oversee BID gauze dressing changes, BID cleansing of skin/tubing with warm water, and to empty urinary collection bag as needed. Administrator A reported Family Member C training him/her on Suprapubic catheter care and s/he was disturbed by Family Member C	N 386		

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N 386	Continued From page 3 practice of not washing hands or donning gloves prior to the dressing changes. Administrator A reported facility staff did implement standard precautions and donning of gloves to help safeguard Resident 1 from bladder and/or skin infections. Administrator A reported s/he hadn't cared for a suprapubic catheter prior to meeting Resident 1. On 07/07/2026, Surveyor reviewed Resident 1's facility record. Resident 1 was admitted to the facility on 04/03/2026. Resident 1 had an activated power of attorney. Resident 1 was diagnosed with but not limited to: bipolar disorder, bi-lateral hearing loss, generalized anxiety disorder, impulse disorder, mild intellectual disability, right kidney absence, and chronic heart failure. On 07/07/2026, Resident 1's physician orders. The following was documented, "Discharge Instructions: Caring for your Suprapubic Catheter You are going home with a suprapubic catheter in place. This tube is placed directly into the bladder through your belly (abdomen) To drain urine from your bladder. You were shown how to care for your catheter in the hospital. This sheet will help Remind you of the steps and guidelines when you are at home...Home Care Change your dressing every day. Change the dressing more often when it falls off, becomes dirty, or has absorbed a lot of drainage ...Gather your supplies...Tape, Soap, Washcloth, Wastebasket and plastic bag, Dressing sponges (4"x4") That are cut to split halfway into the middle...Remove The addressing and check for problems Wash your hands thoroughly before and after all catheter care, Gently remove the old dressing if you have one, Don't pull on the tube, Check the dressing for drainage. Notice whether anything looks	N 386		

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N 386	Continued From page 4 abnormal or smells bad, Place your dressing in the plastic bag and throw it away in the wastebasket. Now look at the place where the catheter leaves your body (exit site), Note any swelling, bleeding, irritation, abnormal, or smelly discharge... Also check for any sores next to the exit site. Soars form around the exit site if there is too much pressure from the tube on the skin ...Clean the area Wash the area around the catheter exit site gently with soap and water, Gently pat dry the area, Don't use powders, creams, or sprays near the exit site, Place a split 4"x4" sponge around the catheter. Tape it in place...When to contact your doctor ... Catheter that falls out, or is clogged or feels clogged ...Stitches that fall out ... Urine leaking around the catheter ...Urine that is cloudy, bloody, or smells bad ... No urine drainage... Bladder that feels full or painful... Rash, itching, redness, swelling, or draining at the catheter site...Fever of 100.4 F (38C) or higher as directed by your doctor ...shaking chills ..." On 07/07/2026, Surveyor reviewed a document titled, "CRISIS INTAKE." It was documented that Resident 1 had bi-lateral hearing loss. On 07/07/2026, Surveyor reviewed Resident 1's clinical after visit summary. On 04/30/2026, Resident 1 was seen in the clinic for dry eyes, and skin irritation. The provider ordered carboxymethylcellulose sodium 0.5% (Artificial Tears) drops to be administered three times daily for dry eyes. Provider also ordered barrier cream (Desitin) to be applied to "skin irritation in {his/her} buttock ...wash with mild soap, pat dry ...apply Desitin 2X daily ...". An order for the PRN psychotropic medication, " ...Olanzapine 5 mg tablet ...May also take 0.5 (one-half) tablet once daily as needed (PRN) for increased agitation, not	N 386		

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N 386	Continued From page 5 sleeping, anxiety ..." On 07/07/2026, Surveyor reviewed Resident 1's temporary ISP. The temporary ISP was signed by Administrator A on 03/16/2026. Under the subsection toileting the following was documented, "Has stomach catheter." The temporary ISP did not document how staff were to care for and monitor the suprapubic catheter, TID eye drops, BID barrier (Desitin) cream application or related skin irritation. The behavioral service plan (BSP) was a half-page word document, the BSP didn't document staff could administer PRN Olanzapine 2.5 mg tablet for increased agitation, insomnia, or anxiety. On 07/07/2026 at 1:00 PM, Surveyor discussed the above concern with Administrator A. Administrator A stated the only ISP documented for Resident 1 was the temporary ISP signed by him/her on 03/16/2026. Administrator A acknowledged Resident 1, nor their legal guardian had signed the temporary ISP. Administrator A acknowledged s/he hadn't created a comprehensive ISP within 30-days of admission for Resident 1 which included facility roles versus home health roles in caring for his/her suprapubic catheter.	N 386			