

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0011165	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 10/24/2024
NAME OF PROVIDER OR SUPPLIER HOMEPLACE OF STANLEY (THE) LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 225 E FOURTH AVE STANLEY, WI 54768		
(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
{U 000}	INITIAL COMMENTS On 09/25/2024, Surveyors conducted a verification visit and 2 complaint investigation at The Homeplace of Stanley LLC. Data collected through 10/24/2024. The 2 complaints were unsubstantiated. One deficiency was identified. The deficiency is a repeat violation. See Statement of Deficiency (SOD) 3FIL11, dated 07/28/2023 and SOD 3FIL12 dated 01/25/2024. Under statutory provisions of Wis. Stat. Ch. 50, a \$200 revisit fee is being assessed. Census: 7	{U 000}		
{U 268}	89.34(17) TENANT RIGHTS Rights of tenants. A tenant of a residential care apartment complex shall have all the rights listed in this section. These rights in no way limit or restrict any other rights of the individual under the U.S. Constitution, civil rights legislation or any other applicable statute, rule or regulation. Tenant rights are all of the following: (17) SAFE ENVIRONMENT. To a safe environment in which to live. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure a safe environment appropriate for resident needs.	{U 268}		

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

TITLE

(X6) DATE

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{U 268}	Continued From page 1 This is a repeat deficiency. See Statement of Deficiency (SOD) 3FIL11, dated 07/28/2023, and SOD 3FIL12, dated 01/25/2024. Findings include: On 09/25/2024 at approximately 11:00 AM, Surveyors toured the physical environment and found the following environmental concerns: 1.) The entrance door out to the courtyard would not shut securely. The courtyard walkway cement was cracked and chipped, causing an uneven walking surface and potential fall risk. 2.) The carpet was frayed in a few places in the hallway. Some new transition strips were placed at a couple resident room entrance doorways and other places in the hall. Two of these strips did not completely patch the frayed carpet below the strip. The carpet remained a potential fall risk for the residents even though the strips were placed. 3.) There was black substance on the weather stripping on two walk-in coolers in the kitchen. On the ceiling outside of the walk-in coolers there was paint missing and peeling. 4.) One of the 3 ovens did not function. The other oven needed staff to start the fan on top with a metal rod. To make up for the shortage of ovens for the facility, the provider added a non-commercial stove that did not hold even temperatures. 5.) The hand washing sink in the kitchen was not working properly. A bucket was placed underneath the sink to catch the dripping water. At 11:45 PM, Surveyors interviewed Kitchen	{U 268}			

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{U 268}	Continued From page 2 Director (KD) A. KD A reported one of the ovens did not function. S/he then showed Surveyors how the other oven needed to have the fan rotated with a metal rod before the fan would function properly. KD A stated the small oven was recently added, did not hold temperature, and seemed to run hotter than the set temperature. KD A stated the missing paint on the ceiling by the walk-in cooler had been missing for over a year. KD A stated maintenance was supposed to be coming in to fix the sink. S/he stated the bucket under the sink had to be dumped at least once a day. On 10/02/2024 at 8:30 AM, Surveyor interviewed Maintenance Staff (MS) B. MS B stated that the last administrator did not really share all the environmental concerns regarding the facility. MS B stated s/he did try to repair the carpet and door to the courtyard but the door must have broken again. MS B also stated s/he tried to repair the cement in the courtyard, but it needed to be completely replaced. On 10/24/2024 at 3:00 PM, Surveyors interviewed Chief Operating Officer (COO) C. COO C stated they had recently ordered new flooring for the facility and obtained estimates for fixing the courtyard cement.	{U 268}			