STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018548	A. BUILDING: _____ B. WING _____	03/05/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HELENS HOUSE KIMBERLY	206 RIVERS EDGE DRIVE KIMBERLY, WI 54136

(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 A standard survey was conducted at Helens House Kimberly on 03/04/2025 with information gathered through 03/05/2025. As a result of this survey 3 deficiencies were identified. Census: 4	M 000		
M 332	88.05(4)(a) FIRE SAFETY-FIRE EXTINGUISHERS Fire extinguishers. Every adult family home shall be equipped with one or more fire extinguishers on each floor. Each required fire extinguisher shall have a minimum 2A, 10-B-C rating. All required fire extinguishers shall be mounted. A fire extinguisher is required at the head of each stairway and in or near the kitchen except that a single fire extinguisher located in close proximity to the kitchen and the head of a stairway may be used to meet the requirement for an extinguisher at each location. Each required fire extinguisher shall be maintained in readily usable condition and shall be inspected annually by the authorized dealer or the local fire department and have an attached tag showing the date of the last dealer or fire department inspection. This Rule is not met as evidenced by: Based on observation and staff interview the provider did not ensure all fire extinguishers were mounted and inspected annually by an authorized dealer or local fire department having the	M 332		

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

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M 332	Continued From page 1 potential to affect all 4 residents. The fire extinguishers in the kitchen pantry and basement were last inspected in November 2023. The basement fire extinguisher was leaning against the wall and not mounted. Findings include: On 03/04/2025, Surveyor toured the facility with DIR (Director) - A at approximately 12:00 PM. Surveyor observed the tag on the fire extinguisher in the kitchen pantry showed it was last inspected in November 2023. The tag on the fire extinguisher in the basement showed it was last inspected in November 2023. DIR - A confirmed both had last been inspected in November 2023. The fire extinguisher in the basement was leaning against the wall by the stairwell and was not mounted.	M 332		
M 348	88.05(4)(d)2.c SEMI-ANNUAL FIRE DRILLS The licensee shall conduct semi-annual fire drills with all household members with written documentation of the date and the evacuation time for each drill maintained by the home. This Rule is not met as evidenced by: Based on record review and staff interview the provider did not complete semi-annual fire drills including documentation of household members involved in the drill and evacuation time for all drills for 2022, 2023 and 2024. This facility is licensed as non-ambulatory and serves residents who are ambulatory, semi-ambulatory or non-ambulatory, but one or	M 348		

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M 348	Continued From page 2 more of whom are not physically or mentally capable of responding to a fire alarm by exiting the facility without help or verbal or physical prompting. This facility serves residents who are advanced aged, terminally ill, developmentally disabled, physically disabled, and who have irreversible dementia or Alzheimer's disease. Findings include: On 03/04/2025, Surveyor reviewed the provider's fire safety drills. The fire drill records for 2022 showed the drills' evacuation times on 05/22 and 11/22 but did not list any residents involved. The records for 2023 showed a "0" in the drill for 05/23. The drill on 11/23 indicated evacuation time but no names of residents who participated. Fire safety drill records for 2024 showed the drill was in 05/24 but had no evacuation time and no names of residents involved. A second drill on 11/24 had correct documentation.	M 348		
M 570	88.10(3)(l) Safe Physical Environment Individuals, except for correctional residents, have basic rights which they do not lose when they enter an adult family home. A resident shall have a safe environment in which to live. The adult family home shall safeguard residents who cannot fully guard themselves from environmental hazards to which they are likely to be exposed, including conditions which would be hazardous to anyone and conditions which would be or are hazardous to a particular resident because of the resident's condition or disability.	M 570		

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M 570	Continued From page 3	M 570		

This Rule is not met as evidenced by:
Based on observation, record review, and staff interview the provider did not ensure that hot water temperatures at 2 of 2 resident bathroom sinks and at one common bathroom sink were 115 degrees F (Fahrenheit) or lower. Temperatures at resident bathroom sinks were as high as 135.6 degrees F and hot to touch.

This facility serves residents who are advanced aged, terminally ill, developmentally disabled, physically disabled, and who have irreversible dementia or Alzheimer's disease.

Findings include:

On 03/04/2025, Surveyor toured the facility with DIR (Director) - A at approximately 12:00 PM. The water temperature at Resident 1's bathroom sink was 133.6 degrees F and verified by DIR - A. The water temperature at Resident 2's bathroom sink was 135.6 degrees F and verified by DIR - A.

On 03/04/2025, Surveyor tested the water temperature at the sink in a common bathroom used by residents and visitors. The temperature was 134.4 degrees F and hot to touch.

Surveyor reviewed the water temperature logs which showed temperatures tested were 106 degrees F to 110 degrees F. DIR - A indicated not being aware how staff were testing these temperatures.

Publication DHS/DQA P-01942 dated 08/2017 states, "...Exposure to hot water is a potential environmental danger for residents. Elderly residents and residents with mental and physical

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M 570	Continued From page 4 disabilities may have neurological conditions that prevent instant recoil from hot water. Because these individuals do not instantly react to dangerous temperature levels, they are at particular risk for injury ..."	M 570		