STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0009644	A. BUILDING: _____ B. WING _____	07/02/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VISTA CARE MANOR PARKWAY	1729 MANOR PKWY SHEBOYGAN, WI 53082

(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 An abbreviated survey was conducted at Vista Care Manor Parkway AFH on 07/02/2025. As a result of this survey 3 deficiencies were identified. Census: 4	M 000		
M 272	88.05(2)(c) Levered Handles If any resident has either manual strength or dexterity limitations, the home shall have levered handles on all doors, bathroom water fixtures and other devices normally used by the resident if these can be replaced and if replacement is readily achievable. This Rule is not met as evidenced by: Based on observation, staff interview, and record review, the provider did not ensure handles were levered on 2 of 4 resident rooms who had manual strength and dexterity limitations. The room doors for Residents 1 and 2, both with dexterity limitations had turning knob door handles. Findings include: On 07/02/2025 at approximately 10:00 AM, Surveyor observed resident rooms and noted that all 4 resident rooms had turning knob door handles. Surveyor interviewed RM (Resident Manager) - A and AD (Area Director) - B at 11:15 AM regarding resident's ability to open their room doors. RM - A and AD - B confirmed that Residents 1 and 2 had physical limitations and would have difficulty turning their door knobs. AD - B confirmed these	M 272		

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

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M 272	Continued From page 1 handles should be changed to levered handles. Review of Resident 1's record showed Resident 1 had a diagnoses of neurological impairment, intellectual disability, seizures, multiple contractures, and spastic quadriplegia limiting dexterity. Review of Resident 2's record showed Resident 2 had a diagnoses of cerebral palsy limiting dexterity.	M 272		
M 276	88.05(3)(a) Homelike 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 staff interview the provider did not ensure this home was well-maintained having the potential to affect 4 of 4 residents living at the home. The main shower room had 6 missing tiles on the base of the shower floor and the small tub room had caulking missing at the base of the tub and a rusty vent. Findings include: On 07/02/2025 at approximately 10:30 AM, Surveyor observed the main shower room to have a large walk-in shower. There were 6 tiles	M 276		

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M 276	Continued From page 2 approximately 2 inches by 2 inches each missing in the middle of the shower floor. The small tub room was noted to have the caulking strip pulled away from the base of the tub approximately 6 inches and the floor vent next to the tub twas rusty and in need of painting or replacement. On 07/02/2025 at approximately 11:00 AM, RM (Resident Manager) - A and AD (Area Director) - B confirmed all residents shower in the main shower room and use the sink and toilet in the small tub room. AD - B indicated the shower floor in the main room had been repaired but the tiles came up again.	M 276		
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. This Rule is not met as evidenced by: Based on observation and staff interview, the provider did not provide a safe environment and did not ensure hot water temperatures were 115 degrees F (Fahrenheit) or below at 2 of 2 sinks in residents bathrooms. Water temperatures were 126.1 degrees F and 126.6 degrees F.	M 570		

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M 570	Continued From page 3 Findings include: This facility serves residents with physical and developmental disabilities, traumatic brain injuries, and emotional disturbance or mental illness. Exposure to hot water is a potential environmental danger for clients. Elderly clients and clients with mental and physical 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. Hot water can cause scalding, e.g., second and third degree burns in which the skin blisters and swells. In such instances, skin does not return to normal and forms scar tissue upon healing. These burns may lead to permanent disability. (DQA publication P-01942, Hot Water Temperatures in Adult Family Homes, 08/2017). On 07/02/2025 at approximately 10:00 AM, Surveyor observed hot water temperatures at the sinks in resident bath/shower rooms. The main shower room had a temperature of 126.6 degrees F and the small tub room had a temperature of 126.1 degrees F. Both temperatures were verified by RM (Residential Manager) - A who confirmed all residents shower in the main shower room, and all residents can use the sink in the small tub room but do not use the tub. AD (Area Director) - B confirmed knowledge that water temperatures should be 115 degrees F or less in resident bathrooms.	M 570		