STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018075	A. BUILDING: _____ B. WING _____	R-C 04/24/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WOLVERTON GLEN ASSISTED LIVING	50 WOLVERTON AVENUE RIPON, WI 54971

(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 04/24/2024, Surveyor conducted a verification visit at Wolverton Glen Assisted Living. As a result of the survey one (1) of four (4) deficiencies remained uncorrected. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 20	{N 000}		
{N 427}	83.38(1)(c) Leisure time activities. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the resident ' s highest level of functioning. In addition to the assessed needs as determined under s. DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Leisure time activities. The CBRF shall provide a daily activity program to meet the interests and capabilities of the residents. Employees shall encourage and promote resident participation in the activity program. The CBRF shall develop and post the activity schedule in an area available to residents. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure a daily activity program to meet the interests and capabilities of residents was provided. This is a repeat deficiency. See statement of deficiency (SOD) 8NF512, dated 11/09/2023. Findings include:	{N 427}		

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

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{N 427}	Continued From page 1 On 04/24/2024 at approximately 12:30 PM, Surveyor entered the facility. At 12:36 PM, Surveyor interviewed Administrator A. Administrator A stated the activity calendar was posted on the wall near entrance on a bulletin board. Surveyor observed the April calendar. Calendar reflected a 1:00 PM activity "Casino Day." At 1:20 PM Surveyor toured the facility and did not observe any activities being held. Surveyor observed 3 residents: Resident 1, Resident 2 and Resident 3 sitting in a common area. Residents confirmed they were unaware of any activities occurring and stated there is nothing to do. Surveyor interviewed Resident Assistant (RA) B. RA B confirmed there was no Casino Day activity on 04/24/2024. Surveyor shared calendar observation and RA B stated s/he didn't know what to say, the activity was not occurring. On 04/24/2024 at approximately 1:30 PM, Surveyor interviewed Administrator A. Administrator A stated they had an activity person, and s/he did an activity in this building and then the next hour would go to a sister facility and the following hour return to do another activity. Surveyor asked how long activities last, and Administrator A stated approximately an hour. Surveyor shared observation on activity calendar reflecting activities were happening at 9:00 AM, 10:30 AM, 1:00 PM and 3:30 PM daily. Administrator A commented that was not how s/he believed the activities were supposed to be scheduled, and that this schedule would not allow for the activity person to go conduct activities at the sister facility. Administrator A provided progress notes for resident to show whether they participated or not in activities.	{N 427}		

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{N 427}	Continued From page 2 Resident 1 04/03/2024 - "[Resident 1] did not participate in activities today." 04/04/2024 - "[Resident 1] did not participate in activities today." 04/09/2024 - "[Resident 1] did not participate in root beer float social." Resident 2 04/03/2024 - "[Resident 2] participated in activities today." 04/04/2024 - "The staff member did small 1 on 1 to discuss their interests for activities." 04/09/2024 - "[Resident 2] did not participate in root beer float social." Resident 3 04/03/2024 - "[Resident 3] participated in activities today." 04/04/2024 - "The staff member did small 1 on 1 to discuss their interests for activities." 04/09/2024 - "[Resident 3] did not participate in root beer float social." Administrator A called to activity department to question activity schedule. Administrator A looked at Surveyor and stated, "Activities are not happening." The provider did not ensure a daily activity program to meet the interests and capabilities of the residents was provided as scheduled on the April activity calendar.	{N 427}		