

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 199036	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 04/22/2026
NAME OF PROVIDER OR SUPPLIER REM EVERGREEN TRAIL		STREET ADDRESS, CITY, STATE, ZIP CODE 657-659 EVERGREEN TR PORTAGE, WI 53901		
(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 On 04/22/2026, Surveyor conducted a standard licensing survey at REM Evergreen Trail, an AFH located in Portage, WI. As a result of the survey, 1 violation of Chapter DHS 88 was issued. Facility will be changing licensure from Ambulatory to Non-Ambulatory as of this survey. Facility meets all requirements for serving Non-Ambulatory residents. Facility will be able to serve 3 Non-Ambulatory residents and 1 Ambulatory resident due to the 4th bedroom located on the 2nd floor of home. Census: 4	M 000		
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 interview, the provider did not ensure a safe, clean and homelike environment. There were 2 light fixture covers missing. Findings include:	M 276		

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

TITLE

(X6) DATE

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M 276	Continued From page 1 On 04/22/2026, Surveyor toured the physical environment. OBSERVATIONS: The light cover in Resident 1's bedroom was missing. Caregiver B stated the cover was missing because it fell off when the roof was being repaired last week. The light cover in a common bathroom that residents use was missing. Caregiver B did not know why or when the cover fell off. There was a container of food in the refrigerator with no label. Caregiver B stated s/he would talk with staff about the importance of labeling all food items and discarding in the proper timeframe. On 04/22/2026 at 12:00 PM, Surveyor interviewed Area Director A. Area Director A acknowledged that light fixtures need to have covers to ensure a homelike environment. Area Director A acknowledged that left over food must be in a container and labeled.	M 276		