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	0016473	A. BUILDING: _____ B. WING _____	R-C 04/16/2026

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{N 000}	Initial Comments On 04/13/2026, with additional information gathered through 04/16/2026, Surveyors conducted 2 complaint investigations, a verification visit, and standard survey at Wyndemere Birch House. One of 2 complaints were substantiated. One of 2 complaints were unsubstantiated. Three (3) deficiencies were identified. All previous deficiencies were corrected. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee will be assessed. Census: 15	{N 000}		
N 223	83.18(1) Employee records maintained and current. A separate record for each employee shall be maintained, kept current, and at a minimum, include: (a) Written job description including duties, responsibilities and qualifications required for the employee; (b) Beginning date of employment; (c) Educational qualifications for administrators; (d) Completed caregiver background check following procedures under s. 50.065, Stats., and ch. HFS 12; (e) Documentation of training, or exemption verification. This Rule is not met as evidenced by: Based on record review and interview, the provider did not maintain and keep current 1 of 2 sample employee records reviewed. Findings include: On 04/13/2026, Surveyors conducted a standard	N 223		

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

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N 223	Continued From page 1 survey. At 11:00 AM, Surveyors received an employee roster from Administrator C and noted Caregiver P was hired in 08/2025. Surveyor requested to review Caregiver P's record as a sample for the survey. Administrator C said there had a been a flooding issue in the facility's office and Caregiver P's record was destroyed from water damage in March 2026. Administrator C said they had not put the record together again yet. Administrator C said s/he had Caregiver P's completed background checks, but no other documentation. Surveyor noted Caregiver P's employee record was missing at minimum a written job description including his/her duties, responsibilities and qualifications and documentation of trainings or exemption verification. On 04/14/2026 at 2:30 PM, Surveyors interviewed Administrator C who verified s/he did not have Caregiver P's employee record.	N 223		
N 389	83.35(3)(d) Service plans updated annually or on changes Individual service plan review. Annually or when there is a change in a resident ' s needs, abilities or physical or mental condition, the individual service plan shall be reviewed and revised based on the assessment under sub. (1). All reviews of the individual service plan shall include input from the resident or legal representative, case manager, resident care staff, and other service providers as appropriate. The resident or resident ' s legal representative shall sign the individual service plan, acknowledging their involvement in, understanding of and agreement with the individual service plan.	N 389		

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This Rule is not met as evidenced by:
Based on record review, interview and observation, the provider did not update the Individual Service Plan (ISP) upon a change in physical abilities for Resident 4.

Resident 4 had a diagnosis of Parkinson's disease and experienced an increase in disease progression and symptoms. Resident 4 struggled to communicate his/her needs to caregivers. Resident 4's ISP was not reviewed and updated to include interventions to assist him/her with communicating his/her needs.

Findings Include:

On 11/13/2025, the department received a complaint regarding concerns with providing appropriate care.

On 04/13/2026, Surveyor reviewed Resident 4's Individual Support Plan, dated 09/24/2026. The ISP noted Resident 4 had the following diagnosis: Parkinson's Disease, dysphasia-oropharyngeal phase, tremors, dysarthria, anarthria, dysphonia slurred speech, muscle weakness and reduced mobility. The ISP stated Resident 4 had hallucinations and was a fall risk. The ISP further noted Resident 4 needed full assistance with: Mobility and walking, dressing, toileting, bathing, eating, medication administration and as needed assistance with eating. Regarding Resident 4's ability to communicate, the ISP noted the following: "Directions: Encourage and assistance in communicating needs or ideas ..."

According to the National Institute of Neurological Disorders and Stroke, Parkinson's Disease is

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described as:
"Parkinson's disease is a progressive movement disorder of the nervous system. It causes nerve cells (neurons) in parts of the brain to weaken, become damaged, and die, leading to symptoms that include problems with movement, tremor, stiffness, and impaired balance. As symptoms progress, people with Parkinson's disease (PD) may have difficulty walking, talking, or completing other simple tasks."

Information obtained on 04/14/2026 at 2:00PM at: https://www.ninds.nih.gov/health-information/disorders/parkinsons-disease

According to the Mayo Clinic, dysphonia is described as follows:
"Dysarthria happens when the muscles used for speech are weak or are hard to control. Dysarthria often causes slurred or slow speech that can be difficult to understand."

Mayo Clinic describes symptoms of dysarthria as follows: "Slurred speech, Slow speech Not being able to speak, louder than a whisper ...Trouble moving your tongue or facial muscles."

Information obtained on 04/14/2026, at 2:15PM at:
https://www.mayoclinic.org/diseases-conditions/dysarthria/symptoms-causes/syc-20371994

On 04/13/2026, Surveyor reviewed Resident 4's updated assessments dated 09/24/2025 and 11/19/2025. Both assessments noted the following regarding communication: "To receive encouragement/assistance communicating needs or ideas as they are unable to make these needs known. To avoid communication breakdowns and receive complete assistance from staff in

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communication."

On 04/13/2026, at 12:30PM, Surveyor interviewed Power of Attorney R (POA-R). POA-R was the activated power of attorney for Resident 4. POA-R reported prior to Resident 4's decline, s/he was able to speak, but since declining, s/he now experiences difficulties speaking.

On 04/13/2026, at approximately 1:30PM, Surveyor interviewed Caregiver S. Caregiver S identified Resident 4 had difficulties expressing what s/he wants. Caregiver S explained Resident 4 becomes frustrated when s/he cannot communicate as evidenced by an increase in tremors. Caregiver S reported Resident 4 should be encouraged to eat in the dining room. Caregiver S reported Resident 4 has always preferred to eat in the dining room.

On 04/13/2026 at approximately 1:356PM, Surveyor entered Resident 4's room for an interview and observation. Surveyor asked Resident 4 if s/he preferred to eat lunch in the dining room or in his/her room. Resident 4 appeared to move his/her mouth, was unable to make sound or say words. Surveyor asked Caregiver S to assist with determining what Resident 4's preference was. Resident 4 continued to move his/her mouth but could not communicate. Surveyor observed an increase in Resident 4's during the conversation.

On 04/13/2026, Surveyor reviewed Resident 4's January 2026 through April 2026 medication administration record (MAR). The MAR documented an increase in Resident 4's as PRN (as needed) medications for anxiety and tremors related to his/her Parkinson's Disease symptoms. The administration dates were as follows:

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N 389	Continued From page 5 01/15/2026: Clonazepam 0.5mg - "Resident 4 is shaking really bad" 01/17/2026: Clonazepam 0.5mg - "Restless over shaking" 01/25/2026: Clonazepam 0.5mg - "Said s/he can't stop shaking ..." 03/05/2026: Carbidopa/levo 12.5/50mg - "shaky" 03/10/2026: Carbidopa/levo 12.5/50mg - "Resident 4 is shaking more than usual" 03/13/2026: Clonazepam 0.5mg - "shaking ..." 03/13/202: Carbidopa/levo 12.5/50mg - "Resident 4 is shaking really bad" 03/17/2026: Clonazepam 0.5mg - "Anxiety, Resident 4 has pushed his/her call light about 10 times withing [sic] 10 mins (minutes) of shift start, but s/he does not need anything." 03/17/2026: Clonazepam 0.5mg - "very shakey [sic]" 03/17/2026: Carbidopa/levo 12.5/50mg - "Resident 4 is shaking non stop [sic]" 03/22/2026: Carbidopa/levo 12.5/50mg - "Tremors Resident 4 is shaking more than usual." 03/23/2026: Carbidopa/levo 12.5/50mg - "Resident 4 shaking more than usual" 04/03/2026: Clonazepam 0.5mg - "requested for tremors" 04/05/2026: Carbidopa/levo 12.5/50mg - "Tremors Shaking more than usual." 04/06/2026: Clonazepam 0.5mg - Anxious, unsure of what s/he wants, s/he responds with saying s/he needs nothing." On 04/13/2026, Surveyor reviewed Resident 4's observation notes from September 2025 through April 2026. The notes showed instances of Resident 4 trying to communicate his/her needs but was not able. The observation notes were as follows:	N 389		

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N 389	Continued From page 6 10/19/2026 at 6:00AM: "Pressing the alarm this morning saying [s/he's] shaking a lot but staff is having a very hard time understanding what [Resident 4] is needing. [Resident 4] is getting frustrated being unable to get [his/her] point across to staff." 03/26/2026 at 5:30AM: "[Resident 4" has been pushing [his/her] call light excessively, most times [s/he] is not ringing for anything other than [his/her] blanket put on or taken off, [his/her] fan on and off, and [s/he] has need more assistance ...Overall, [Resident 4] has needed much more of staff's time than usual on ALL shifts ..." 04/05/2026 at 1:00AM: " ...normally resident is not able to tell me why [s/he] is ringing and what [s/he] needs, the last few times, [Resident 4] is looking at writer as if [s/he's] unsure of something ..." 04/06/2026 at 3:30AM: " ...[Resident 4] continues to push call light but [s/he] says when asked if needs anything ...no, nothing ..." 04/07/2026 at 10:00AM: Notification to Managed Care Organization: " ...During the night shift, [Resident 4] has been using [his/her] call light more often. However, when staff respond and check on [him/her], [s/he] frequently states that [s/he] does not need assistance or is unable to identify a specific need at that time ..." 04/09/2026 at 5:15AM: "[Resident 4] had a long anxious night with a lot of tremors. [Resident 4] was unable to do anything for [him/herself], [s/he] needed assistance sitting up, standing up, gait belt to hold [him/her[up as [s/he] was very weak ...writer was unsure how to help [him/her] without what [s/he] actually wanted [sic] ...Can we ask	N 389		

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Hospice Nurse to make [him/her] some kind of chart with pics (pictures) on it so when [s/he] is unable to communicate with staff, [s/he] can point to the picture of what [s/he] needs ..."

04/09/2026 at 9:30AM: " ...explained to Resident 4 that s/he would have to come down for breakfast instead of being served in room Resident 4 started yelling at staff unaware of what he saying writer asked Resident 4 to allow him/her to help assist him/her still ref (refused) Resident 4 took up and walked to door but stopped and started getting weak ...Resident 4 became confused then got agitated stood up and rammed his/her walker into staff stomach ..."

On 04/13/2026, at approximately 2:15PM, Surveyor interviewed Administrator C. Administrator C reported POA-R became Resident 4's activated power of attorney of health care on 03/15/2026 due to his/her decline. Additionally, Resident 4 was admitted to hospice services. Administrator C informed Surveyors Resident 4 was re-assessed on 09/24/2025 and 11/19/2025 and the ISP was updated to address his/her mobility and toileting needs. On 04/14/2026, at 2:30PM, Administrator C acknowledged Resident 4's decline in ability to communicate. Administrator C advised s/he will coordinate with the hospice agency for ideas to increase Resident 4's ability to communicate.

Resident 4 had a diagnosis of Parkinson's Disease. Interviews with the provider's staff and Resident 4's POA revealed Resident 4's Parkinson's was progressing. Review of Resident 4's MAR showed an increase in PRN medication usage to help manage symptoms. Review of the observation notes showed instances of Resident 4's communication difficulties due to disease

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N 389	Continued From page 8 progression. The ISP was not updated to provide interventions to assist Resident 4 with communicating his/her needs.	N 389		
N 611	83.55(2) Bath and toilet areas: location. Location. Toilet rooms and bathing areas shall be accessible and available to residents on each floor in class AS, class ANA, class CS and class CNA facilities. This Rule is not met as evidenced by: Based on observation and interview, residents did not have access and availability to use 1 of 2 resident showers in the facility. According to Wisconsin Administrative Code DHS 83.55, Bath and toilet areas. (1) Number. DHS 83.55(1)(a) The CBRF shall provide at least one toilet, one sink and one bath or shower for every 10 residents and other occupants or fraction thereof. Findings include: The provider is licensed as a class C non-ambulatory (CNA) community-based residential facility who may serve up to 16 residents who may be of advanced age and/or have irreversible dementia/Alzheimer's. On 04/13/2026, Surveyors conducted a standard survey. At the time of survey, the census was 15. At approximately 11:45 AM, Surveyors toured the facility with Office Assistant O, and walked down the hallway to the back left from the entrance which had 7 occupied resident rooms. At the end	N 611		

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of the hallway was a room identified as the "Hair Salon." The room was split by a partial wall with a toilet and sink area in the first section and a walk-in shower area on the back section. The toilet and sink area had a lamp, shelf, salon sink, and salon chair taking up majority of the space. The shower had all the fixtures available for the shower, but a shower head was not on the fixture. Surveyors observed an approximate 4 foot high by 2 foot length cardboard decorated box that said "Feed Me Candy," a salon hair drying stand, and an arm chair in the shower area, blocking the use of the shower.

Surveyors and Office Assistant O toured the resident hallways to the right of the entrance and observed a shower with similar layout than the shower on the left wing hall. Surveyor inquired whether the second shower was ever used or made available to residents. Office Assistant O indicated this (right wing) shower was the only one available and used since s/he had worked at the facility.

Surveyor reviewed the floor plan of the facility and noted a bath with a walk-in shower was identified on each hallway on the map.

On 04/14/2026 at 2:30 PM, Surveyors interviewed Administrator C who verified the shower located on the left wing resident hallway was not utilized. S/he said since the management group took over the facility, the shower had not been used/available to residents.

Surveyor note: Department's provider record indicated the provider had been licensed with a regular license since 03/01/2018.