

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 310314	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/01/2023
NAME OF PROVIDER OR SUPPLIER BIRCH TERRACE		STREET ADDRESS, CITY, STATE, ZIP CODE 1109 CASWELL ST FORT ATKINSON, WI 53538		
(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 08/01/2023, the Bureau of Assisted Living, Southern Regional Office conducted an abbreviated licensing survey at Birch Terrace, a CBRF located in Fort Atkinson, WI. As a result of the survey, 3 violations of Chapter DHS 83 were issued. Census: 8	N 000		
N 481	83.43(1) Environment safe, clean, and comfortable Environment. The CBRF shall provide a living environment that is safe, clean, comfortable, and homelike. All common dining and living areas shall contain furnishings appropriate to the intended use of the room. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure a safe, clean and comfortable living environment. The entry/exit doors were damaged, the patio on the lower level was in need of repair. Findings include: On 08/01/2023 at 9:00 AM, Surveyor toured the physical environment. OBSERVATIONS: The roofing soffits were deteriorated above the front entry door and the wood portion appeared to be rotting.	N 481		

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

TITLE

(X6) DATE

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N 481	Continued From page 1 The front entry door was damaged and had dents and scuff marks on the lower half of the door. Assistant Director A stated that the damage was from wheelchairs and walkers striking the door over time. The entry/exit door near the rear of the facility was damaged and had dents and scuff marks on the lower half of the door. Assistant Director A stated that the damage was from wheelchairs and walkers striking the door over time. The entry/exit door near the side of the facility was damaged and had dents and scuff marks on the lower half of the door. Assistant Director A stated that the damage was from wheelchairs and walkers striking the door over time. The kitchen cabinets under the in wall stove were damaged and contained scuff marks. There was a towel holder missing from the lower level bathroom. The light in the lower level bathroom was burned out. The patio on the lower level which is used as an emergency exit was deteriorated. The railroad ties used as a retaining wall were rotting and the concrete surface appeared to be eroding due to lack of maintenance. Assistant Director A stated that the patio is rarely used, but is considered an emergency exit. On 08/01/2023 at 11:00 AM, Surveyor discussed the above concern with Assistant Director A. Assistant Director A stated that the facility needed some improvements and s/he was emailing	N 481		

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N 481	Continued From page 2 his/her superiors and maintenance regarding areas that needed repair.	N 481		
N 507	83.46(1)(f) Combustibles. Combustible materials shall not be placed within 3 feet of any furnace, boiler, water heater, fireplace or other similar equipment. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure that combustibles were kept at least 3 feet away from a water heater. There were combustible items placed next to the facility water heater. Findings include: On 08/01/2023 at 9:00 AM, Surveyor toured the physical environment. OBSERVATIONS: There were 2 plastic flat screen televisions within 3 feet of the water heater. There was a wheeled walker with plastic, foam and canvas covering within 3 feet of the water heater. There was a cardboard box within 3 feet of the water heater. On 08/01/2023 at 9:15 AM, Surveyor discussed the above concern with Assistant Director A. Assistant Director A acknowledged that combustible items should be kept at least 3 feet away from a furnace and/or water heater. Assistant Director A acknowledged that 2	N 507		

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N 507	Continued From page 3 televisions, a wheeled walker and a cardboard box were within 3 feet of the facility water heater.	N 507		
N 617	83.55(6)(b) Bath and toilet areas: water temperature The CBRF shall set the temperature of all water heaters connected to sinks, showers and tubs used by residents at a temperature of at least 140°F. The temperature of water at fixtures used by residents shall be automatically regulated by valves and may not exceed 115°F, except for CBRFs serving residents recovering from alcohol or drug dependency or clients of a government correctional agency. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure proper water temperatures. Three of 3 faucets had water temperatures exceeding 130 degrees Fahrenheit. Findings include: On 08/01/2023 at 9:15 AM, Surveyor toured the physical environment. OBSERVATIONS: The bathroom faucet that residents use on the main level of the facility measured 140 degrees Fahrenheit. The bathroom faucet that residents use on the second level of the facility measured 133 degrees Fahrenheit. The bathroom faucet that residents use on the	N 617		

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N 617	Continued From page 4 lower level of the facility measured 140 degrees Fahrenheit. On 08/01/2023 at 9:30 AM, Surveyor discussed the above concern with Assistant Director A. Assistant Director A acknowledged that water temperatures at faucets must be 115 degrees Fahrenheit or lower. Assistant Director A acknowledged that 3 of 3 faucets measured in excess of 130 degrees Fahrenheit.	N 617			