Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0013990	A. BUILDING: _____ B. WING _____	R-C 06/08/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
FAITH GROUP HOME	**3317 OAKWOOD DRIVE RACINE, WI 53406**

(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 06/08/2026, Surveyor conducted an abbreviated survey and verification visit at Faith Group Home. As a result, the 2 previous deficiencies were corrected, and 3 new deficiencies were identified. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee will be assessed. Census: 4	{M 000}		
M 338	88.05(4)(c)1 EXITING FROM THE FIRST FLOOR Exiting from the first floor. The first floor of the home shall have at least 2 means of exiting which provides unobstructed access to the outside. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure 1 of 2 exits provided unobstructed access to the outside. The path to the rear exit, located through the kitchen, at the top of a stairway leading to the basement, identified as an emergency exit, was blocked with a mop bucket. Findings include: This provider was licensed on 01/19/2012 to provide care for up to 4 residents in the client groups of emotionally disturbed/mental illness, developmentally disabled, advanced aged, and alcohol/drug dependent. On 06/08/2026, at 11:15 AM, Surveyor toured the kitchen area and observed a yellow industrial type	M 338		

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

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M 338	Continued From page 1 of mop bucket, by the rear exit door. Surveyor measured the clear opening of the door. The clear opening from the door to the doorframe to was approximately 13 inches wide. During the survey, Surveyor observed Resident 2 utilized a 4 wheeled walker for ambulation. On 06/08/2026, at 11:50 AM, Surveyor interviewed Director of Operations A and House Manager D. Director of Operations A acknowledged placement of cleaning supplies at the rear entrance obstructed the rear emergency exit. House Manager D reported s/he usually stored the mop bucket on the other side of the door. Director of Operations A reported s/he usually stored the mop bucket in the closet in the living room.	M 338		
M 540	88.09(2)(c) Location and Retention Period Location and retention period. Service provider and licensee records shall be available at the adult family home for review by the licensing agency. A service provider's record shall be available while the service provider is employed by the home and for at least 3 years after ending employment. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that service provider and Director of Operations records were available at the adult family home for review by the licensing agency.	M 540		

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M 540	Continued From page 2 Findings include: On 06/08/2026, at approximately 11:10 AM, Surveyor requested Director of Operations A to bring staff records for review. On 06/08/2026, at 11:30 AM, Director of Operations A arrived at the home without staff records. On 06/08/2026 at 11:30 AM, Surveyor interviewed Director of Operations A. Director of Operations A reported staff files were stored at Human Resource C's home. Director of Operations A reported they were in the process of converting the paper documents to electronic documents. Director of Operations A reported, during the process, Human Resource C had passed away, and her/his home was unable to be entered into during the police investigation. Director of Operations A reported the investigation had been completed and s/he needed to retrieve the records. Director of Operations A reported s/he could have the records in a day or so. Director of Operations A confirmed s/he was unable to produce the records during the survey. Director of Operations A acknowledged Surveyor's concerns.	M 540		
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	M 570		

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M 570	Continued From page 3 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 interview, the provider did not ensure a safe physical environment by ensuring water temperatures were kept at a safe temperature for 4 of 4 residents. The hot water temperature in the bathroom was 138.6° Fahrenheit (F). Findings include: This provider was licensed on 01/19/2012 to provide care for up to 4 residents in the client groups of emotionally disturbed/mental illness, developmentally disabled, advanced aged, and alcohol/drug dependent. On 06/08/2026, at 11:27 AM, Surveyor tested the water temperature in the bathroom sink faucet. The water temperature was 138.6° F. "Exposure to hot water is a potential environmental danger for residents. Elderly residents and residents 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	M 570		

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M 570	Continued From page 4 Publication-01942, Hot Water Temperatures in Adult Family Homes, August 2017) On 06/08/2026, at 11:50 AM, Surveyor interviewed Director of Operations A. Director of Operations A confirmed the code requirement. Director of Operations A reported the water temperature would fluctuate. Director of Operations A turned on the water and confirmed it was too hot. Director of Operations A reported s/he went to check the water heater, and someone had adjusted the knob. Director of Operations A reported s/he had turned it down.	M 570		