

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0013419	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 03/18/2026
NAME OF PROVIDER OR SUPPLIER DIMENSIONS LIVING WAUSAU		STREET ADDRESS, CITY, STATE, ZIP CODE 226446 HUMMINGBIRD RD WAUSAU, WI 54401		
(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 03/17/2026, Surveyor conducted a standard licensure survey and complaint investigation at Dimensions Living Wausau. Data collection continued through 03/18/2026. The complaint was unsubstantiated. One deficiency was identified. Census: 13	N 000		
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. This Rule is not met as evidenced by: Based on record review and interview, the provider did not review and revise Resident 1's individual service plan (ISP) after there was a change in Resident 1's needs, abilities and mental condition. Resident 1 ingested foreign objects, and underwent medical procedures in December	N 389		

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

TITLE

(X6) DATE

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N 389	Continued From page 1 2025 to remove the foreign objects. Findings include: The provider is licensed to care for up to 19 residents in the following client groups: advanced aged and irreversible dementia/Alzheimer's disease. On 12/26/2025, the Department received a complaint reporting that Resident 1 was hospitalized on 12/22/2025 and underwent medical procedures to remove foreign objects from Resident 1's abdomen and rectum. On 03/18/2026, Surveyor reviewed Resident 1's record. Resident was admitted on 05/09/2023. Resident 1's diagnoses included: mild cognitive impairment, generalized anxiety disorder, and conductive hearing loss. According to a facility progress note, dated 12/22/2025, "Writer received a phone call from care staff last night at approx. 20:08 that resident was found lying on [his/her] left side, on the floor, in [his/her] room when staff went into administer medication. Alarmed fall mat had not been in place at time of fall. Staff spoke with writer during ROM/injury (range of motion) assessment, no findings made. Staff unable to obtain vitals at time of fall as resident was restless wanting to get up. Vitals obtained once resident was off of the floor...writer reached out to [POA] (power of attorney) and requested that resident be taken to the ER for eval [sic]. POA in agreement and here to transport resident to [Aspirus ER]." According to medical records, Resident 1 was admitted to Aspirus Wausau Hospital on 12/22/2025. A hospital note (dated: 12/22/2025),	N 389		

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N 389	Continued From page 2 read in part, "[Resident 1] is a 70 y.o. [female/male] with a past medical history of dementia with behavioral disturbance who presented to the ED (emergency department) due to hypotension and multiple falls at [his/her] facility. [S/He] had been diagnosed with influenza a [sic] outpatient. Labs in the ED showed leukocytosis. Chest x-ray showed distended air-filled loops of colon in the upper abdomen. CT (computed tomography) abdomen and pelvis showed multiple foreign bodies in [his/her] colon. [S/He] was admitted and finish treatment for Influenza A. [S/He] underwent days of enemas and a hefty bowel regimen, but the foreign bodies did not pass. [S/He] underwent a flexible sigmoidoscopy on January 2 (2025). One 4 and body [sic] (foreign body) was removed from the rectum. On February 4 [sic], [s/he] underwent a colonoscopy (and) the other 2 foreign bodies were retrieved from the appendiceal orifice. [S/He] is now medically stable to return to [his/her] facility. [S/He] will need close follow-up with [his/her] PCP (primary care provider) in the next week if possible to monitor [his/her] bowel habits. [Family member] is in agreement with the plan of care." Resident 1's ISP, initiated 07/29/2025 & 01/25/2026; revised on 03/09/2026, noted the following: SAFETY - Will maintain safety while living in community. - Safety Check: Every 2-3 hours (Date initiated: 07/29/2025 & 01/25/2026; Revised: 03/09/2026) On 03/17/2026 at approximately 3:25 PM, Surveyor interviewed Administrator A. Surveyor	N 389		

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N 389	Continued From page 3 asked about Resident 1's hospitalization on 12/22/2025. Administrator A reported that Resident 1 had Influenza A and was sent out to the hospital on 12/22/2025. Administrator A indicated that the hospital discovered foreign objects in his/her abdomen. Administrator A commented that the facility self reported the incident and educated staff "not to leave things out." Administrator A denied that Resident 1 had a known history of ingesting foreign objects. On 03/18/2026 at approximately 8:45 AM, Surveyor interviewed Administrator A via telephone. Surveyor asked about Resident 1's ISP. Surveyor asked Administrator A if Resident 1's ISP was reviewed and updated since being hospitalized on 12/22/2025. Administrator A reported, "I am not seeing anything addressing eating foreign objects on the ISP. It was a fluke thing." Administrator A commented that Resident 1's behavior (ingesting foreign objects) "should have been updated and noted in the ISP under behaviors." Administrator A verified that Resident 1's ISP was not updated to reflect Resident 1's behavior of ingesting foreign objects. On 03/18/2026 at approximately 1:29 PM, Surveyor interviewed Regional Director (RD) B via telephone. Surveyor asked about Resident 1's hospitalization on 12/22/2025 and ingesting foreign objects. RD B stated, "It was the first time we were made aware of it (ingesting foreign objects)." RD B verified that Resident 1's ISP was not revised to address Resident 1 ingesting foreign objects. RD B indicated that Resident 1's ISP "should have been updated." On 03/18/2026 at approximately 2:00 PM, Surveyor interviewed Administrator A and RD B via telephone. RD B reported that Resident 1 had	N 389		

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N 389	Continued From page 4 not had any known concerns with ingesting foreign objects since 12/22/2025, Resident 1's ISP was revised today (03/18/2026), and caregiver tasks were added to address and prevent Resident 1 from ingesting foreign objects. The provider did not review and revise Resident 1's individual service plan (ISP) after there was a change in Resident 1's needs, abilities and mental condition.	N 389		