STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0013742	A. BUILDING: _____ B. WING _____	02/13/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
KANTON HOME	26068 COUNTY HWY E MUSCODA, WI 53573

(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 02/13/2025, the bureau of assisted living southern regional office conducted a standard survey at Kanton Home an adult family home in Muscoda, WI . As a result, 2 violations of DHS Chapter 88 were issued Census: 3	M 000		
M 276	88.05(3)(a) HOME 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 the adult family home (AFH) was safe, clean, well-maintained and provided a homelike environment. FINDINGS INCLUDE: On 02/13/2025, Surveyor arrived at facility for a standard survey. OBSERVATIONS: On 02/13/2024, Surveyor observed the following: 1.) The first-floor common area had a pet manifested mal-odor. 2.) The first-floor bathroom shower was detached from the surrounding wall. The wall directly above	M 276		

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

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M 276	Continued From page 1 the shower stall had a moderate amount of finish removed from it (Picture 2). 3.) The first-floor bathroom linoleum floor had an approximately 3 foot by 2 foot section missing. The missing section of linoleum exposed the subflooring. The exposed subfloor was located between the laundry machines and the resident shower (Picture 3). 4.) The stairway between the first floor and the resident bedrooms on the second floor had a hand railing that had approximately 2 screws detached from the wall. This made the hand railing move when pressure was applied (Picture 1). 5.) On the second floor there was a wooden banister between the stairway and a resident bedroom. When Surveyor grabbed the banister the entire fixture moved side-to-side. INTERVIEW: On 02/13/2025 at 11:30 AM, Surveyor discussed the above concerns with Licensee A. Licensee A acknowledged the mal odor in the first-floor common area. Licensee A explained residents who lived at facility are involved in pet therapy and were out in the barn that morning with his/her partner. Licensee A stated the odor was temporary and would be gone after a cleaning. Licensee A acknowledged the stairway between the first and second floor did not have a stable hand railing and/or banister. Licensee A acknowledged the damage to the wall attached to the shower, and stated a pervious resident had picked at the wall. Licensee A acknowledged the exposed sub-floor in the bathroom. Licensee A reported s/he had been planning to remodel the resident shower and bathroom floor this coming Spring.	M 276		

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M 276	Continued From page 2 CROSS REFERENCE: DHS Chapter 88.05(4)(a) Fire-Safety - Fire Extinguisher	M 276		
M 332	88.05(4)(a) FIRE SAFETY-FIRE EXTINGUISHERS Fire extinguishers. Every adult family home shall be equipped with one or more fire extinguishers on each floor. Each required fire extinguisher shall have a minimum 2A, 10-B-C rating. All required fire extinguishers shall be mounted. A fire extinguisher is required at the head of each stairway and in or near the kitchen except that a single fire extinguisher located in close proximity to the kitchen and the head of a stairway may be used to meet the requirement for an extinguisher at each location. Each required fire extinguisher shall be maintained in readily usable condition and shall be inspected annually by the authorized dealer or the local fire department and have an attached tag showing the date of the last dealer or fire department inspection. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure each required fire extinguisher was inspected annually by the authorized dealer or the local fire department and have an attached tag showing the date of the last dealer or fire department inspection.	M 332		

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M 332	Continued From page 3 FINDINGS INCLUDE: On 02/13/2025, Surveyor conducted a standard survey. On 02/13/2025, Surveyor observed a fire extinguisher in the facility kitchen, and at the head of the main stairway. Surveyor reviewed the inspection tags on both fire extinguishers. The last date of inspection documented on both tags the date of last inspection was 09/2023. On 02/13/2024 at 11:30 AM, Surveyor discussed the above concern with Licensee A. Licensee A reported s/he had to switch contracts with the authorized dealer, and s/he hadn't been able to schedule an inspection with them in 2024. CROSS REFERENCE: DHS Chapter 88.05(3)(a) Home Environment	M 332		