

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0016562	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 10/29/2024
NAME OF PROVIDER OR SUPPLIER BUFFLEHEAD LANE		STREET ADDRESS, CITY, STATE, ZIP CODE 2084 BUFFLEHEAD LN GREEN BAY, WI 54311		
(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 10/28/2024, with additional information gathered through 10/29/2024, Surveyor conducted a complaint investigation and verification visit at Bufflehead Lane. The complaint was unsubstantiated. Seven of 8 previous deficiencies were corrected. One deficiency was identified. One deficiency was a repeat violation, see Statement of Deficiency (SOD) HNT011, dated 06/06/2024. Under statutory provisions of Wis. Stat. Ch. 50, a \$200 revisit fee will be assessed. Census: 8	{N 000}		
{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 the temperature of 1 of 2 water heaters connected to sinks, showers, and tubs used by residents were set at a temperature of at least 140 degrees Fahrenheit. The water heater located on the west side of the CBRF had a water heater tank temperature of 110 degrees Fahrenheit with the risk of affecting up to 4 residents.	{N 617}		

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

TITLE

(X6) DATE

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{N 617}	Continued From page 1 This is a repeat deficiency, see Statement of Deficiency (SOD) HNT011, dated 06/06/2024. Findings include: On 10/28/2024, Surveyor conducted a verification visit. At approximately 11:10 AM, Surveyor and Program Manager A toured the basement on the west side of the duplex. Surveyor and Program Manager A observed a digital temperature display for the water heater connected to resident sinks, showers, and tubs to be 110 degrees Fahrenheit. On 10/29/2024 at approximately 9:45 AM, Surveyor reviewed email correspondence from Operational Support Manager B who stated another maintenance request was submitted to turn up the water heater, as it was not turned up enough and still was 110 degrees Fahrenheit. As of 10/29/2024 end of business day, verification of the water heater being set to at least 140 degrees Fahrenheit was not received.	{N 617}			