STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017968	A. BUILDING: _____ B. WING _____	C 04/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BERGEN MANOR CBRF	**522 WEST BERGEN DRIVE FOX POINT, WI 53217**

(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 04/01/2026, Surveyor completed a standard survey and 2 complaint investigations at Bergen Manor. As a result, 3 deficiencies were identified. Two complaints were unsubstantiated. Census: 7	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 interviews, the provider did not ensure the living environment was safe, clean, comfortable, and homelike. The bathroom and hallway needed cleaning and maintenance. This deficiency is being cited for the fifth time. See Statements of Deficiency (SOD) CUOK11, dated 09/20/2021, SOD CUOK12, dated 05/10/2022, SOD CUOK13, dated 05/23/2023, and SOD CUOK14, dated 10/03/2024. Findings include: On 03/31/2026, at 10:20 AM, Surveyor toured the facility and observed the following: Northeast Hallway - The northeast hallway floor was covered in	N 481		

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

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N 481	Continued From page 1 debris, wrappers, and other garbage-like material. - The window near the kitchen had different shades of brown staining and peeling paint around the inside framing, similar to water damage. The windowsill was covered in blackish brownish particles, almost like coffee grounds. These particles were on the windowsill, in the areas of peeled paint, and on the window sash. East Resident Bathroom - The ceiling vent fan was covered in approximately ¼ inch of a grayish substance, consistent with dust and debris. - The cold air return was covered in a grayish substance, consistent with dust. - The floor by the transition of the bathroom floor and the hallway floor had approximately 16 inches of thick blackish substance, similar to built up dirt. - The ceiling over the shower had brownish smear marks approximately 12 inches in length, consistent with feces or dried blood. -The area of flooring between the shower and vanity was covered in white and reddish substance, consistent with dried soap. The area also contained a grayish brown substance consistent with dust and debris. - The flooring between the toilet and vanity contained yellowish white staining, consistent with urine stains. There were also areas of brown staining around the toilet and vanity, consistent with feces. The bottom of the toilet contained grayish substances, consistent with dust.	N 481		

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N 481	Continued From page 2 On 03/31/2026, at 12:15 PM, Surveyors interviewed Manager A. Manager A acknowledged Surveyor's concerns. Manager A reported the window did have a leak from the gutter, which was repaired.	N 481		
N 499	83.45(3) Toxic substances. Toxic substances. The CBRF shall ensure that cleaning compounds, polishes, insecticides and toxic substances are labeled and stored in a secure area. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure cleaning compounds and toxic substances were securely stored in 1 of 1 resident areas. Cleaning compounds were not securely stored in the kitchen. This deficiency is being cited for a third time. See Statement of Deficiency (SOD) CUOK11, dated 09/20/2021 and CUOK14, dated 02/22/2024. Findings include: The provider is licensed to serve up to 8 residents in the following client groups: emotionally disturbed/mental illness, advanced age, alcohol/drug dependent, physically disabled, traumatic brain injury, developmentally disabled, terminally ill, and irreversible dementia/Alzheimer's. On 03/31/2026, at 10:30AM, Surveyor toured the facility and observed the kitchen. The kitchen cabinet beneath the sink was	N 499		

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N 499	Continued From page 3 unsecured and did not contain a locking mechanism. The cabinet contained 1 tub of dishwasher packs, 2 bottles of Odo Ban disinfectant, Member's Mark oven, grill and fryer cleaner and a bottle of Lysol toilet bowl cleaner. A sign was posted on the front of the cabinet which stated, "Do not put chemicals under sink! All chemicals are to be locked up in the laundry room closet!" Surveyor observed residents moving freely throughout the facility. On 03/31/2026, at 12:15 PM, Surveyors interviewed Manager A. Manager A confirmed cleaning supplies were to be secured. Manager A reported a sign was placed on the front of the kitchen cabinet to ensure staff locked cleaning compounds and toxic substances in the laundry room.	N 499		
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 water at fixtures used by residents did not exceed 115	N 617		

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N 617	Continued From page 4 degrees Fahrenheit (F) in 2 of 2 resident bathrooms. Bathroom water temperatures in both bathrooms were 130 degrees F. Findings include: The provider is licensed to serve up to 8 residents in the following client groups: emotionally disturbed/mental illness, advanced age, alcohol/drug dependent, physically disabled, traumatic brain injury, developmentally disabled, terminally ill, and irreversible dementia/Alzheimer's. On 03/31/2026, at 10:20 AM Surveyor toured the facility and observed the following: The resident bathroom on the south side of the home was 130 degrees F. The resident bathroom on the east side of the home was 130 degrees F. On 03/31/2026, at 12:15 PM, Surveyor interviewed Manager A. Manager A confirmed the code requirement. Manager A reported there was a mixing valve to ensure the temperature was not too hot. Manager A reported s/he would have them adjusted or replaced.	N 617		