

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0019661	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 11/06/2025
NAME OF PROVIDER OR SUPPLIER APPLE CREEK PLACE I		STREET ADDRESS, CITY, STATE, ZIP CODE 5102 N CHERRYVALE AVE APPLETON, WI 54913		
(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 11/05/2025, with additional information gathered through 11/06/2025, Surveyors conducted a complaint investigation and standard survey at Apple Creek Place I. The complaint was substantiated. One deficiency was identified. Census: 17	N 000		
Y3244	50.09(1)(L) Care (1) RESIDENTS' RIGHTS. Every resident in a nursing home or community based residential facility shall, except as provided in sub. (5), have the right to (l) Receive adequate and appropriate care within the capacity of the facility. This Rule is not met as evidenced by: Based on record review, observation, and interview, the provider did not ensure Resident 1 and Resident 2 received adequate and appropriate care within the capacity of the facility. Facility staff did not respond to residents' needs without delay.	Y3244		

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

TITLE

(X6) DATE

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Y3244	Continued From page 1 Resident 1 waited over 30 minutes for facility staff to assist Resident 1. Resident 2 waited over 30 minutes for facility staff to assist Resident 2. Findings include: The provider is a class CNA (non-ambulatory) CBRF licensed to provide services for up to 22 residents who may be terminally ill, of advanced age, and/or have Alzheimer's/dementia. On 06/19/2025, the department received complaint information alleging residents were not being assisted with care needs without delay. On 11/05/2025, Surveyors conducted a complaint investigation. On 11/05/2025, Surveyor reviewed provider's call logs and noted call light times exceeding 30 minutes. RESIDENT 1 On 11/05/2025, Surveyor reviewed Resident 1's record and noted Resident 1 was admitted to the facility on 05/23/2025 with diagnoses of Type 2 Diabetes Mellitus, Sleep apnea, Bipolar, Vertigo, Hypertension, Congestive Heart Failure, Chronic Obstructive Pulmonary Disease, Asthma, Cellulitis, Chronic Kidney Disease. Resident 1 was able to make Resident 1's needs known. On 11/05/2025, Surveyor reviewed Resident 1's Individual Service Plan (ISP) with a service plan review date of 11/04/2025. Staff to ensure Resident 1 safety and observe R1 while	Y3244		

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Y3244	Continued From page 2 completing ADLs. Resident 1 required 1 staff assist for toileting and showering. Resident 1 is at risk for falls due to gait imbalance. Resident 1's call light activity report documented the following response times greater than 30 minutes from 10/06/2025 through 11/05/2025: 10/08/2025 4:31 AM 52 minutes 10/11/2025 10:35 AM 55 minutes 10/11/2025 1:11 PM 33 minutes 10/11/2025 4:19 PM 41 minutes 10/12/2025 8:44 PM 62 minutes 10/13/2025 6:14 PM 66 minutes 10/14/2025 3:06 PM 59 minutes 10/14/2025 6:48 PM 42 minutes 10/15/2025 7:56 AM 298 minutes 10/15/2025 1:02 PM 68 minutes 10/15/2025 2:37 PM 82 minutes 10/15/2025 7:23 PM 47 minutes 10/18/2025 10:46 AM 45 minutes 10/19/2025 8:03 AM 103 minutes 10/19/2025 10:05 AM 30 minutes 10/21/2025 5:53 PM 58 minutes 10/21/2025 9:46 PM 37 minutes 10/30/2025 9:40 AM 31 minutes 11/01/2025 1:23 PM 113 minutes 11/02/2025 2:19 PM 78 minutes 11/02/2025 6:22 PM 137 minutes 11/03/2025 4:57 PM 34 minutes 11/04/2025 2:19 PM 40 minutes On 11/06/2025 at 3:30PM, Surveyor interviewed Resident 1. Resident 1 indicated Resident 1 waits for staff to assist Resident 1 to and from the bathroom for 20 to 30 minutes daily. Resident 1 indicated delayed response from staff answering Resident 1 call light is a daily problem. RESIDENT 2	Y3244		

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Y3244	Continued From page 3 On 11/05/2025, Surveyor reviewed Resident 2's record and noted Resident 2 was admitted to the facility on 09/17/2024 with diagnoses of Chronic pain, History of right femur fracture, Anxiety Disorder, Epilepsy, History of right foot pain. Resident 2 was able to make Resident 2's needs known. On 11/05/2025, Surveyor reviewed Resident 2's ISP with a service plan review date of 09/22/2025. Resident 2 required 1 staff assist for toileting, bathing, dressing, ambulating, meal set up, and transferring. Resident 2's Safety Check: Routine Safety Checks every 2-3 hours. Resident 2 is at risk for falls due to weakness and previous fracture of right lower extremity. Resident 2's call light activity report documented the following response times greater than 30 minutes from 10/06/2025 through 11/05/2025: 10/07/2025 11:51 AM 71 minutes 10/10/2025 5:20 PM 34 minutes 10/13/2025 5:58 PM 39 minutes 10/14/2025 6:48 PM 42 minutes 10/18/2025 9:03 AM 30 minutes 10/18/2025 2:13 PM 33 minutes 10/23/2025 12:56 AM 45 minutes 11/01/2025 5:42 PM 41 minutes 11/01/2025 7:42 PM 48 minutes On 11/05/2025 at 2:12PM, Surveyor interviewed Resident 2. Resident 2 indicated Resident 2 often waits a long time for staff to assist with going to the bathroom at night. Resident 2 indicates Resident 2 waits hours. Resident 2 stated staff answer Resident 2 call light on average of 5 minutes during the day.	Y3244		

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Y3244	Continued From page 4 On 11/05/2025 at 11:54AM, Surveyor interviewed Medication Technician (MT) D. MT-D indicated staff are alerted to resident call lights on 2 tablets in the facility that staff carry. On 11/05/2025 at approximately 1:05PM, Surveyor interviewed Assistant Director of Wellness (ADOW)-C who indicated ADOW had not reviewed resident call light times since working as the Assistant Director of Wellness role for the last month. On 11/05/2025 at approximately 2:57 PM, Surveyor interviewed Director of Nursing (DON)-B. DON-B indicated it is the expectation of facility staff to answer resident call lights within 7 minutes. On 11/06/2025 at approximately 2:30 PM, Surveyors interviewed and shared findings of care concerns regarding Resident 1 and Resident 2 with HM-A, DON-B, and ADOW-C. No additional information or comments were provided.	Y3244			