STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0015073	A. BUILDING: _____ B. WING _____	R 07/21/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUST LIKE HOME V	W5140 COUNTY RD A UNIT 1 ELKHORN, WI 53121

(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 07/21/2025, Surveyor conducted a verification visit at Just Like Home V. One deficiency was identified. One deficiency was a repeat violations (see Statement of Deficiency (SOD) M2O511). Under statutory provisions of Wis. Stat. ch. 50, a $200.00 revisit fee is being assessed. Census: 8	{N 000}		
{N 490}	83.44(2)(b) Toilet and bathing area. All toilet and bathing areas, facilities and fixtures shall be clean and in good working order. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure resident bathrooms were clean and in good working order. This is as repeat deficiency. See Statement of Deficiency (SOD) M2O511, dated 02/18/2025. Findings include: On 07/21/2025, at approximately 11:30 AM, Surveyor conducted a tour of the facility and observed the following in the shared resident bathroom: -3 light metal vanity light fixtures were sprinkled with a brown-like substance that appeared to be rust. -Shower spray nozzle was sprinkled with a brown-like substance that appeared to be rust. -Shower rod sprinkled with a brown-like substance that appeared to be rust. -Bathtub/Shower basin/walls, which were	{N 490}		

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

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{N 490}	Continued From page 1 originally white in color, had the appearance of various colors of yellow/brown/orange. -Bathroom vanity, side nearest the toilet, the coating appeared to be peeling off. -Ceilings were sprinkled with various circular black and brown stains -Holes were in the wall where the towel rod had previously been attached -Towel rods were not available due to missing brackets -Sink vanity door was not securely attached On 07/21/2025, at approximately 2:15 PM, Surveyor interviewed Assistant Administrator A and Manager B. Surveyor discussed his/her observations and showed Assistant Administrator A pictures of his/her concerns. Assistant Administrator A stated s/he understood the concerns.	{N 490}		