STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0012946	A. BUILDING: _____ B. WING _____	C 02/11/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WOODSTONE SENIOR LIVING RCAC	**950 BEAR PAW AVE RICE LAKE, WI 54868**

(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
U 000	INITIAL COMMENTS On 02/02/2026, Surveyor began an abbreviated standard licensure survey, complaint investigation, and self-report investigation at Woodstone Senior Living RCAC. Data was collected through 02/11/2026. One of 1 complaint was unsubstantiated. Three new violations were identified. Census: 41 tenants	U 000		
U 155	89.26(1) COMPREHENSIVE ASSESSMENT REQUIREMENT. A comprehensive assessment shall be performed prior to admission for each person seeking admission as a basis for developing the service agreement under s. DHS 89.27 and the risk agreement under s. DHS 89.28. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure all aspects of the comprehensive assessment were completed before admission as the basis for developing the service agreement and risk agreement. Findings include: On 11/04/2025, the Department received a self-report regarding a potential suicide that read, "Resident [Tenant] left the facility in [his/her] own vehicle. Resident [Tenant] had not returned from	U 155		

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

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U 155	Continued From page 1	U 155		

an appointment by 7:00 PM. Staff entered Resident's [Tenant's] apartment and found a suicide note. Law enforcement was called [sic] by Resident's [Tenant's] guardian. A missing person report was sent out nationally. Resident [Tenant] has a history of 3 previous suicide attempts."

On 11/08/2025 at 9:48 AM, Surveyor received an email communication from Director of Health Services (DHS) A that read, in part, " ...sent a report to you last Tuesday regarding a missing resident. Sadly, [s/he] was found deceased in [his/her] car yesterday evening ...no foul play was suspected ..."

On 02/02/2026 at approximately 11:08 AM, Surveyor interviewed Administrator B who stated Tenant 1 was independent and received medication oversight by staff. Administrator B stated Tenant 1 drove his/her own vehicle, could come and go as s/he pleased, and that they did not provide a lot of services. Surveyor inquired about Tenant 1's history of suicide attempts. Administrator B stated Resident 1's guardian was also his/her sibling, and s/he often assisted by offering guidance on how Tenant 1 was doing.

At approximately 12:00 PM, Surveyor interviewed DHS A who stated Guardian C did not want regular checks on Tenant 1. DHS A stated that prior to the day Tenant 1 left, s/he had been presenting as more depressed, needed encouragement to come to meals, and was sleeping more.

On 02/05/2026, Surveyor reviewed Tenant 1's record. Tenant 1 was admitted on 07/31/2025. An Admission Assessment dated 07/28/2025, read, in part, " ...Hospitalizations ...Approximate number of hospitalizations in the last year ...3

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U 155	Continued From page 2 ...June Suicide Attempt ... -Meal Plan ...Breakfast ...Eats meal in dining area ...Dinner ...Eats meal in dining area ...Supper ...Eats meal in dining area ... -Supervision ...Capable of self supervision ... -Transportation...Independent with transportation needs... arranges own rides ...[family] ... -Self-Admin of Meds ...Med Self-Admin is not applicable ... -Life Losses ...recent change of residence or loss of home ...recent loss of pet ..." The following areas of the 07/28/2025 assessment were unchecked or left blank: -Destruction of Property or Self -Other Behavior Patterns, -Self-Abusive Behavior, -Suicidal Tendencies, -Vulnerability, Behavior, -Mental Status, -Mental Status Questionnaire, and Self-Concept. An Assessment dated 08/13/2025 and electronically signed by DHS A read, in part, "Diagnosis Bipolar 1 with psychosis (primary), alcohol use disorder, Anxiety disorder, Cannibis use disorder, Hx [history] of suicide attempt, Post traumatic stress disorder ... -Client History ...[Tenant 1] was living by [him/herself] in [town] but had been struggling with depression and hit rock bottom this past spring. [His/her] [child] had moved back in with [him/her] and it was not going well. [S/he] was depressed. [S/he] had a suicide attempt on May 11 where [s/he] tried to slit [his/her] throat (superficial) and was in the hospital for 10 days, then overdosed on prescription drugs on May 25th and was airlifted to a hospital where [s/he]	U 155		

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U 155	Continued From page 3 was intubated and stayed in the hospital 2-3 days, then went to behavioral health. Came back home for a week and overdosed again, more severely, on June 21 and was on a vent for a week, also had aspiration pneumonia and a UTI [urinary tract infection]. Since this time, [s/he] has been in behavioral health inpatient in [city] and is doing very well ..." On 02/11/2026 at approximately 9:30 AM, DHS A confirmed by email that s/he received the Client History (above) from Guardian C prior to Tenant 1's move-in. The provider did not ensure all aspects of the comprehensive assessment were completed before admission and used as the basis for developing the service agreement and risk agreement. Cross reference: U0186 89.27(3)(d) Service Agreement U0200 89.28(2)(a)1. Risk Agreement	U 155		
U 187	89.27(3)(e) SERVICE AGREEMENT (3) OTHER SPECIFICATIONS. (e) The service agreement shall be completed by the date of admission. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure the service agreement was completed by the date of admission. Findings include: On 02/02/2026, Surveyor reviewed Tenant 1's record. Tenant 1 was admitted on 07/31/2025.	U 187		

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U 187	Continued From page 4 -A document titled State of Wisconsin, Circuit Court [Wisconsin County] ...Letters of Temporary Guardianship of the Estate read, in part, "In the matter of [Tenant 1] ...Temporary Guardianship were effective 08/04/2025 ..." On 02/10/2026 from 10:00 AM to 11:10 AM, Surveyor interviewed Director of Health Services (DHS) A who stated the document titled New Resident Information Packet was considered the Service Agreement. Surveyor observed that the document was signed by Tenant 1 on 08/06/2026, 7 days after admission. Surveyor did not find an updated Service Agreement signed by Guardian C. In summary: -Tenant 1 was admitted on 07/31/2026, -Tenant 1 was ordered under Temporary Guardianship on 08/04/2025, -Tenant 1 signed The New Resident Information Packet also referred to as the Service Agreement on 08/06/2025.	U 187		
U 200	89.28(2)(a)1. RISK AGREEMENT (2) CONTENT. A risk agreement shall identify and state all of the following: (a) Risk to tenants. 1. Any situation or condition which is or should be known to the facility which involves a course of action taken or desired to be taken by the tenant contrary to the practice or advise of the facility and which could	U 200		

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U 200	Continued From page 5 put the tenant at risk of harm or injury. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure a risk agreement was in place when Tenant 1 experienced depressive symptoms resulting in completed suicide. Findings include: On 11/04/2025, the Department received a self-report regarding potential tenant suicide. On 02/02/2026, Surveyor requested to review Tenant 1's record. Tenant 1 had an admission date of 07/31/2025. Tenant 1's record included: -An Admission Assessment dated 07/28/2025 read, in part, " ...Diagnosis bipolar I with psychosis, anxiety disorder, PTSD ...Hospitalizations ...June Suicide Attempt ..." -An Assessment dated 08/13/2025 and electronically signed by Director of Health Services (DHS) A read, in part, "Client History... [Tenant 1] was living by [him/herself] in [town] but had been struggling with depression and hit rock bottom this past spring ...[S/he] was depressed. [S/he] had a suicide attempt on May 11 where [s/he] tried to slit [his/her] throat (superficial) and was in the hospital for 10 days, then overdosed on prescription drugs on May 25th and was airlifted to a hospital where [s/he] was intubated and stayed in the hospital 2-3 days, then went to behavioral health. Came back home for a week and overdosed again, more severely, on June 21 and was on a vent for a week ..."	U 200		

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U 200	Continued From page 6 On 02/10/2026 from 11:33 AM to 11:52 AM, Surveyor interviewed Managed Care Coach (MCC) D and MCC E who stated Tenant 1 was receiving the standard services such as housekeeping, medication management, and nothing beyond regular checks. MCC D and MCC E stated Tenant 1 could come and go as s/he pleased as s/he had a vehicle. MCC D and MCC E stated Tenant 1's case notes included that on 09/19/2025 Tenant 1 had an increase in Depakote and there did seem to be some improvement, but s/he was in bed and sleeping a lot. MCC D and MCC E stated around 10/28/2025, Guardian C reported that Tenant 1 began to refuse psychiatry and counseling appointments. MCC D and MCC E stated they felt the provider knew to watch for depression symptoms. MCC D and MCC E confirmed that Tenant 1 was admitted directly from a psychiatric facility. MCC D and MCC E stated they were not aware that Tenant 1's suicide history was not included in his/her Risk Agreement. On 02/02/2026, Surveyor reviewed Tenant 1's Risk Agreement dated 08/04/2025 and signed by Tenant 1 that read, in part ..."Describe source of risk ...Risk for Falls ..." No other risks were included in Tenant 1's Risk Agreement. On 02/10/2026 from 10:00 AM to 11:10 AM, Surveyor inquired of DHS A why suicide risk was not in Tenant 1's Risk Agreement. DHS A stated, "This is the same question I ask myself." DHS A stated Guardian C felt good about Tenant 1's placement. DHS A stated right before Tenant 1's suicide s/he was depressed and when his/her change in condition was noticed, we were all aware but confirmed services did not change other than increasing checks.	U 200		

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U 200	Continued From page 7 The provider did not include Tenant 1's significant suicide history in his/her Risk Agreement or update the Risk Agreement when Tenant 1 began to exhibit depression symptoms. On 11/04/2026, Tenant 1 left the facility after leaving a suicide note and was found in his/her own vehicle on 11/07/2026 deceased by suicide.	U 200		