STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017569	A. BUILDING: _____ B. WING _____	R 06/12/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WHITETAIL ESTATES RIVER BLUFF LLC	**910 RIVER BLUFF DR MANITOWOC, WI 54220**

(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 06/10/2025 with additional inforamtion gathered through 06/12/2025, Surveyor conducted a verification visit at Whitetail Estates River Bluff LLC. Three (3) of 4 deficiencies were corrected. One repeat deficiency was identified. Under statutory provisions of WI Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 7	{N 000}		
{N 631}	83.59(1)(a) Class AS, ANA, CS, CNA 2 grade level exits All habitable floors shall have at least 2 exits providing unobstructed travel to the outside. Small class AA CBRFs licensed on or before the effective date of this section with no more than 2 habitable floors may have one exit from the second floor. Class AS, class ANA, class CS and class CNA CBRFs shall have at least 2 grade level or ramped exits to grade. This Rule is not met as evidenced by: Based on observation, interview and record review, the provider did not ensure the facility had at least 2 grade level exits or ramped exits to grade. This is a repeat violation. See statement of deficiency (SOD) MMIT11 dated 06/05/2024. Findings include:	{N 631}		

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

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{N 631}	Continued From page 1 This provider is currently licensed as a Class AS (semiambulatory) home for eight residents. The facility does not have a sprinkler system. The Department files did not contain any waivers approved by the Department. At the time of survey, the facility census was 7 (seven). Six (Resident 1, Resident 2, Resident 8, Resident 4, Resident 5, and Resident 9) out of the seven residents required the use of a walker. On 06/10/2025 at 9:50 AM, Surveyor conducted a verification visit. Surveyor observed the posted emergency exit diagram. The exit diagram identified a total of five emergency exits. The north and south front exit doors, the north and south garage service exit doors and the south rear exit door. Administrator A verified the north and south front exit doors, the north and south garage service exit doors and south rear exit door were designated as the emergency exits. During this survey, a tour of the facility was completed. Surveyor noted a total of six exit doors from the facility (North front door, North garage service door, North rear door, South front door, South garage service door, and South rear door) that lead outside. The north and south front exit doors had 3 concrete steps down to the sidewalk, the north and south garage service exit doors had one concrete step down from the home to the garage floor and another concrete step up from the garage floor to exit out the service doors, the north rear exit door had a total of 3 steps down to the lawn, without a hard surfaced pathway to a public way and the south rear exit door was ramped to grade, with a hard surfaced pathway to a public way. Five (5) out of the six exits from the home were not at grade level or ramped to grade. The only exit at grade or ramped to grade was the south rear exit. The facility did not have at	{N 631}		

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{N 631}	Continued From page 2 least 2 grade level exits or ramped exits to grade. ***On 06/10/2025, Surveyor reviewed the Department files and noted, Administrator A received a Notice and Order Letter from the Department on 07/18/2024 for SOD (Statement of Deficiencies) #MMIT11. On 07/30/2024, Administrator A requested a 6 (six) month extension for the date of compliance. On 08/06/2024, the Department approved a 6-month extension on the completion of the facility's Order to Comply with Requirements until March 4, 2025. No communication or request were submitted to the regional office for any additional extensions for the date of compliance after 03/04/2025. On 06/10/2025 at 10:40 AM, Surveyor discussed the emergency exit concerns and the need for 2 grade level exits or ramped to grade exits with Administrator A. Administrator A indicated the contractor s/he hired to complete the second grade level exit was suppose to start the work sometime this month (June 2025), but no official date was given. Surveyor asked Administrator A if s/he submitted a request to the Northeastern Regional Office for an additional extension for the date of compliance for SOD #MMIT11. Administrator A stated, "No, I didn't think to ask for another extension...I should have." On 06/11/2025 at 6:16 PM, Surveyor received the following email from Administrator A, "I attached the invoice for the ramp. Staff spoke to the contractor yesterday afternoon and [s/he] said we are in [his/her] schedule for later next week/following week...Again, I apologize for not communicating with you all regarding the ramp if you need anything else from me please let me know."	{N 631}		

Wisconsin Department of Health Services

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