STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016379	A. BUILDING: _____ B. WING _____	10/26/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PARK VISTA THE LEGACY	1403 CHURCHILL ST WAUPACA, WI 54981

(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 An abbreviated survey and investigation of a self-report was conducted at Park Vista The Legacy on 10/25/2023. As a result of this survey 1 deficient practice was identified. There were no concerns identified with the self-report. Census: 22	N 000		
N 504	83.46(1)(c) Heating system maintenance. Heating. The CBRF shall maintain the heating system in a safe and properly functioning condition. The CBRF shall ensure that a heating contractor or local utility company completes all of the following maintenance and makes available to the facility documentation of the maintenance performed: 1. An oil furnace shall be serviced at least once each year. 2. A gas furnace shall be serviced at least once every 3 years. 3. The CBRF shall have a chimney inspected at intervals corresponding with the heating system service under subd. 1. or 2. This Rule is not met as evidenced by: Based on record review and staff interview the provider did not ensure the gas furnace was inspected by a heating contractor every 3 years as required. Findings include: This facility is licensed as a Class C non-ambulatory (CNA). A class C non-ambulatory CBRF serves residents who are ambulatory, semi-ambulatory or non-ambulatory, but one or more of whom are not physically or	N 504		

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

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N 504	Continued From page 1 mentally capable of responding to a fire alarm by exiting the CBRF without help or verbal or physical prompting. This facility serves residents who are advanced aged, terminally ill, developmentally disabled, physically disabled, and who have irreversible dementia or Alzheimer's. On 10/25/2023, Surveyor conducted a survey at this facility and asked ADM (Administrator) - A for evidence of an inspection of the furnace by a heating contractor within the past 3 years. At 1:30 pm ADM - A told Surveyor s/he could not locate a furnace inspection within the past 3 years but would check further with maintenance to see if one was done. On 10/26/2023 ADM - A sent an email to Surveyor verifying a call was made to a heating contractor to inspect the furnace with an appointment set for November 2023 and sent no evidence of any previous inspection done within the past 3 years.	N 504		