STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0019634	A. BUILDING: _____ B. WING _____	R-C 02/04/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CREEK SIDE MANOR	8841 S 13TH STREET OAK CREEK, WI 53154

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{N 000}	Initial Comments On 02/04/2026, Surveyors conducted a standard licensure survey, complaint survey and verification visit at Creek Side Manor. All deficiencies were corrected and 2 new deficiencies were identified. One complaint was substantiated. Under statutory provisions of Wis. Stat. C. 50, a $200 revisit fee is being assessed. Census: 18	{N 000}		
N 120	83.06(1)(b) Program statement: staffing and availability The program statement shall accurately include all of the following: Employee availability, including 24 hour staffing patterns and the availability of a licensed nurse, if any. This Rule is not met as evidenced by: Based on record review and interview, the provider did not include the 24-hour staffing patterns within the community based residential facility's (CBRF) program statement. Findings include: The facility was licensed on 07/19/2023 as non-ambulatory CBRF, with a max capacity of 23 residents. The CBRF was licensed to care for residents with diagnoses related to advanced aged, terminally ill, physically disabled and irreversible dementia/Alzheimer's. On 01/28/2026, Surveyor reviewed the provider's program statement. The program statement did not include the 24-hour staffing patterns for the	N 120		

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

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N 120	Continued From page 1 CBRF. On 01/28/2026 at approximately 10:00 AM, Surveyor interviewed Director of Community Relations (DCR) P. DCR P denied having documentation that indicated the staffing patterns for the CBRF. DCR P reported the following staffing patterns for the CBRF, 3 caregivers for first shift (7:00 AM - 3:00 PM), 3 caregivers for 2nd shift (3:00 PM - 11:00 PM), and 2 caregivers for 3rd shift (11:00 PM - 7:00AM). On 01/28/2026 at approximately 12:03 PM, Surveyor informed Director of Operations (DOO) O that the 24-hour staffing patterns should be included within the facility's program statement. DOO O acknowledged this requirement. On 02/04/2026 at approximately 1:00 PM, Surveyor interviewed Administrator A and DOO O. Administrator A and DOO O confirmed the program statement does not address the staffing pattern for the CBRF as staffing is typically based on resident needs. Administrator A and DOO O acknowledged DHS 83's requirement to state the CBRF staffing pattern within the program statement.	N 120		
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.	Y3244		

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Y3244	Continued From page 2	Y3244		

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure residents received adequate and appropriate services that were within the provider's capacity. This had the potential to affect 18 of 18 residents. In the month of December 2025, there were 288 occasions where call lights were not responded to within 10 minutes.

Findings include:

The facility was licensed on 07/19/2023 as a non-ambulatory community based residential facility (CBRF), with a max capacity of 23 residents. The CBRF was licensed to care for residents with diagnoses related to advanced aged, terminally ill, physically disabled and irreversible dementia/Alzheimer's.

On 01/28/2026, Surveyor reviewed the provider's program statement. The program statement did not address the 24-hour staffing pattern for the CBRF.

On 01/28/2026 at approximately 10:00 AM, Surveyor interviewed Director of Community Relations (DCR) P. DCR P denied having

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Y3244	Continued From page 3	Y3244		

documentation that indicated the staffing patterns for the CBRF. DCR P reported the following staffing patterns for the CBRF, 3 caregivers for first shift (7:00 AM - 3:00 PM), 3 caregivers for 2nd shift (3:00 PM - 11:00 PM), and 2 caregivers for 3rd shift (11:00 PM - 7:00AM).

On 01/29/2026, Surveyor reviewed staff schedules for December 2025. The following was identified:

On 12/07/2025, only 1 caregiver was scheduled for 3rd shift, which is scheduled for 11:00 PM to 7:00 AM. The caregiver was scheduled to "Split with Manor."

On 01/29/2026, Surveyor reviewed the facility's call light response time for December 2025. Surveyor identified the following: on 49 separate occasions residents waited more than 10 minutes, on 52 separate occasions residents waited over 15 minutes, on 63 separate occasions residents waited over 20 minutes, on 26 separate occasions residents waited over 30 minutes, on 16 separate occasions residents waited over 40 minutes, on 15 separate occasions residents waited over 50 minutes, on 36 separate occasions residents waited over 1 hour, on 18 separate occasions residents waited over 2 hours, on 10 separate occasions residents waited over 3 hours, on 5 separate occasions residents waited over 4 hours, on 3 separate occasions residents waited over 5 hours, on 2 separate occasions residents waited over 6 hours, on 1 occasion a resident waited over 7 hours, on 1 occasion a resident waited over 9 hours, on 3 separate occasions residents waited over 10 hours, on 1 occasion a resident waited over 11 hours, on 1 occasion a residents waited over 13 hours, and on 2 separate occasions

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Y3244	Continued From page 4	Y3244		

residents waited over 16 hours.

On 02/03/2026 at approximately 10:38 AM, Surveyor interviewed Caregiver Q. Caregiver Q reported working third shift on a as needed basis. Caregiver Q confirmed working alone on 3rd shift, multiple times. Caregiver Q confirmed some residents are considered "two-person" assists. Caregiver Q denied staff from the neighboring CBRF assisted with any caregiving needs, when scheduled to do so. Caregiver Q reported delay in cares if the caregiver scheduled cannot "handle working alone."

On 01/28/2026 at approximately 10:20 AM, Surveyor interviewed Resident 7. Resident 7 confirmed having to wait over 30 minutes for assistance. Resident 7 reported wait times increase mostly on 2nd shift.

On 01/28/2026 at approximately 11:33 AM, Surveyor interviewed Resident 2. Resident 2 confirmed long wait times. Resident 2 stated, "during the night is terrible. I just wait it out." Resident 2 reported wait times of over 30 minutes.

On 01/28/2026, Surveyor reviewed resident records. The following was identified:

Resident 7 was admitted on 7/22/2025. Resident 7's Community Based Residential Facility (CBRF) Resident Satisfaction Evaluation, dated 10/01/2025 stated, " ...7. There appears to be enough staff on duty at all times to meet my needs as well as those of other residents. X No ..."

Resident 8 was admitted on 09/12/2024. Resident 8's Community Based Residential

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Y3244	Continued From page 5 Facility (CBRF) Resident Satisfaction Evaluation, dated 03/17/2025 stated, " ...2. Overall, I am satisfied with the services provided by this facility. X Somewhat Comments: Residents are often left sitting in front of the television without someone checking on them for 30 minutes or more ...7. There appears to be enough staff on duty at all times to meet my needs as well as those of other residents. X No Comments: I believe the caregiver to resident ratios should be higher ...12. The food served ...hot foods are served hot and cold foods are served cold. X NO Comments: food is often cold for evening meal ..." On 02/04/2026 at approximately 1:00 PM, Surveyors interviewed Administrator A and Director of Operations (DOO) O. Administrator A reported "Split with Manor" meant a caregiver from the neighboring CBRF would split their shift between each CBRF. The caregiver from the neighboring CBRF would assist with rounds and return to the neighboring CBRF. Administrator A and DOO O acknowledged having residents who require two-person assists and rely on mechanical lifts for transfers. Administrator A reported the expectation was for third shift caregivers to complete personal care. First shift caregivers would then get the residents up for the day. Administrator A disclosed staffing is based on resident needs and acuity, which is why the program statement does not address the CBRF's staffing patterns as it could change day to day. Administrator A and DOO O disclosed building directors are responsible for reviewing call light response times, daily and report any concerns to them. Administrator A reported call lights should be answered within 10 minutes. Administrator A and DOO O will have a conversation with the building director as they have not received any	Y3244		

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Y3244	Continued From page 6 concerns regarding call light response time.	Y3244		