STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018490	A. BUILDING: _____ B. WING _____	C 08/18/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ANGELUS VILLAGE OF MANITOWOC LLC	1010 BAYSHORE DRIVE 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
U 000	INITIAL COMMENTS On 08/18/2025, Surveyor conducted one (1) complaint investigation at Angelus Village of Manitowoc. One (1) of 1 complaint was substantiated. As a result of the survey, one (1) deficiency will be issued. Census: 52 apartments	U 000		
U 131	89.23(4)(b)1. SERVICES PROVIDER QUALIFICATIONS. Service manager. Each residential care apartment complex shall have a designated service manager who shall be responsible for day-to-day operation of, including ensuring that the services provided are sufficient to meet tenant needs and are provided by qualified persons; that staff are appropriately trained and supervised; that facility policies and procedures are followed; and that the health, safety and autonomy of the tenants are protected. The service manager shall be capable of managing a multi-disciplinary staff to provide services specified in the service agreements. This Rule is not met as evidenced by:	U 131		

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

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U 131	Continued From page 1 Based on record review and interview, the service manager did not ensure the health, safety and autonomy for 1 of 1 (Tenant 1) tenants reviewed were protected. Tenant 1 was riding in the facility bus. Tenant 1 fell out of his/her motorized mobility scooter during the ride. Tenant 1 was noted to have scrapes and bruises on his/her right arm. Findings Include: On 07/24/2025, the department received a complaint regarding falls during transport. On 08/18/2025, Surveyor conducted an onsite visit to the facility. Tenant 1's record was reviewed. Tenant 1 was admitted to the facility on 06/24/2024 with diagnoses to include type 2 diabetes, chronic fatigue syndrome and peripheral nerve disease. Tenant 1's most recent ISP (Individual Service Plan) dated 06/02/2025 indicated Tenant 1 is independent with mobility and uses a motorized scooter and walker as assistive devices. Surveyor reviewed a facility incident report dated 07/18/2025 which indicated Tenant 1 had a witnessed fall inside the bus. The report continued to indicate Tenant 1 "fell off of scooter on bus, onto floor." The report states family and physician were notified. A section of the report titled, "Actions recommended or taken as a result of incident:" indicated, "Put resident in wheelchair when transporting in van." On 08/18/2025 at 10:00 AM, Surveyor interviewed Director A. Director A stated s/he received a call from the ER that Tenant 1 needed to be picked up. Director A stated s/he took	U 131		

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U 131	Continued From page 2 Tenant 1's scooter along as Tenant 1 uses the scooter for long distance ambulation. Director A stated s/he brought the scooter into the ER and it took Director A and a nurse to transfer Tenant 1 into the scooter. Director A indicated s/he got Tenant 1 into the bus using the ramp and then clamped down the scooter. Director A stated at that time s/he asked Tenant 1 if s/he wanted to move to a regular seat instead which had a seatbelt. Director A stated Tenant 1 said "No, I'll be ok." Director A stated s/he then started to drive away and was going around a curve and Tenant 1 fell out of scooter and onto the bus floor. Director A indicated s/he pulled over and helped Tenant 1 up and s/he sat down in a regular seat and used the seatbelt. Director A stated Tenant 1 had some scrapes and bruises on right arm but no broken bones or head injury. Director A indicated Tenant 1 had a scheduled doctor's appointment within a few days of the incident and was checked over with no further injuries noted. Director A stated s/he felt really bad about the incident. On 08/18/2025 at 10:15 AM, Surveyor interviewed Tenant 1. Tenant 1 stated s/he had went to the emergency room (ER) earlier in the day and was there for about 4 hours. Tenant 1 stated s/he was "exhausted" after the ER visit. Director A came with facility bus to pick up Tenant 1 at the ER. Tenant 1 indicated s/he saw scooter on the bus and sat in the scooter but couldn't figure out why s/he sat in the scooter instead of in a seat with a seatbelt. Director A drove away from ER and went around 2 or 3 corners and then on the 4th or 5th corner, Tenant 1 slid off the scooter and hit the floor of the bus. Tenant 1 stated the scooter stayed in place. Tenant 1 stated Director A immediately pulled over and helped Tenant 1 up and sat him/her in a regular seat and buckled him/her in. Tenant 1 stated s/he had scrapes and	U 131		

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U 131	Continued From page 3 bruises on right arm. Tenant 1 stated s/he does not have memory of getting on the scooter or being asked if s/he wanted to sit on scooter or in regular seat with seatbelt. On 08/18/2025 at 11:15 AM, Surveyor interviewed Director A regarding transportation services. Director A indicated tenants and families are informed verbally at time of admission that the facility bus is to be a "last resort" for transportation services to appointments or hospital. Director A stated tenant's family or cab services should be arranged if there are appointments the tenant needs to attend. Director A stated the facility bus is used for social outings and does have the capabilities of having wheelchairs on the bus. Director A stated wheelchairs can be strapped down and the tenant can use a seatbelt when in the wheelchair. Director A stated s/he did not see a wheelchair for Tenant 1 in their room, so grabbed his/her scooter and brought it. Director A indicated the facility does have a wheelchair, however, Director A didn't think it was the right size for Tenant 1 and therefore didn't bring it.	U 131		