STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	390164	A. BUILDING: _____ B. WING _____	09/05/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GUNDERSON FAMILY HOME	707 224TH AVE KANSASVILLE, WI 53139

(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
M 000	INITIAL COMMENTS On 09/05/2025, Surveyor conducted an abbreviated survey at Gunderson Family Home. As a result, 2 deficiencies were identified. Census: 1	M 000		
M 262	88.05(2)(a) DIFFICULTY WALKING If a resident is not able to walk at all or able to walk only with difficulty, or only with the assistance of crutches, a cane, or walker or is unable to easily negotiate stairs without assistance: 1. The exits from the home shall be ramped to grade with a hard surfaced pathway with handrails. 2. All entrance and exit doors and interior doors serving all common living areas and all bathrooms and bedrooms used by a resident not able to walk at all shall have a clear opening of at least 32 inches. 3. Toilet and bathing facilities used by a resident not able to walk at all shall have enough space to provide a turning radius for the resident's wheelchair and provide accessibility appropriate to the resident's needs. This Rule is not met as evidenced by: Based on observation, and interview, the provider did not ensure 2 of 2 exits from the home were ramped to grade with a hard surfaced pathway with handrails for residents who walked only with difficulty, or only with the assistance of crutches, a cane, or a walker, or were unable to easily	M 262		

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

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M 262	Continued From page 1 negotiate stairs without assistance. Resident 1 utilized a wheelchair for mobility. Findings include: On 09/05/2025, at 10:00 AM, Surveyor toured the home and observed the following: Front door identified as an emergency exit. There were 3 steps from the driveway to the front door. From the concrete steps to inside the house, there was a 1-inch rise from the step to the threshold of the door. Side door identified as an emergency exit. There was a 1-inch rise from the interior floor of the home to the threshold of the door. From the threshold of the door, there was a 1.5-inch drop to the wooden deck. Surveyor observed Resident 1 utilize a wheelchair during the survey. On 09/05/2025, at 11:15 AM, Surveyor interviewed Licensee A and Licensee B. Licensee A confirmed the home was licensed for non-ambulatory residents. Licensee A reported Resident 1 could walk, however it was more of a sideways shuffle. Licensee A reported s/he was not aware both exits needed to be ramped. Licensee A reported s/he had ambulatory residents during previous surveys. Licensee B reported they would ensure the exit was ramped and the thresholds were fixed.	M 262		
M 332	88.05(4)(a) FIRE SAFETY-FIRE EXTINGUISHERS Fire extinguishers. Every adult	M 332		

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M 332	Continued From page 2 family home shall be equipped with one or more fire extinguishers on each floor. Each required fire extinguisher shall have a minimum 2A, 10-B-C rating. All required fire extinguishers shall be mounted. A fire extinguisher is required at the head of each stairway and in or near the kitchen except that a single fire extinguisher located in close proximity to the kitchen and the head of a stairway may be used to meet the requirement for an extinguisher at each location. Each required fire extinguisher shall be maintained in readily usable condition and shall be inspected annually by the authorized dealer or the local fire department and have an attached tag showing the date of the last dealer or fire department inspection. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure 4 of 4 fire extinguishers were inspected annually by an authorized dealer. The fire extinguishers were last inspected in August 2024. Findings include: On 09/05/2025, at 10:45 AM, Surveyor toured the home. Surveyor observed 1 fire extinguisher in the kitchen, 1 fire extinguisher at the top of the stairs, and 2 fire extinguishers in the basement. All fire extinguishers were last inspected in August 2024. On 09/05/2025, at 11:15 AM, Licensee A and	M 332		

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M 332	Continued From page 3 Licensee B. Licensee A and Licensee B confirmed the code requirement. Licensee B reported the company normally comes around on their own. Licensee B reported s/he would call the company to ensure the fire extinguishers were inspected.	M 332		