

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 410480	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/09/2023
NAME OF PROVIDER OR SUPPLIER ABODE ON ONTARIO (THE)		STREET ADDRESS, CITY, STATE, ZIP CODE 503 ONTARIO AVE SHEBOYGAN, WI 53081		
(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 11/07/2023, with information gathered through 11/09/2023, Surveyors conducted a standard survey. As a result of the survey, 2 new deficiencies were identified. Census 0	N 000		
N 166	83.12(4)(d) Reporting catastrophe resulting in damage A CBRF shall send a written report to the department within 3 working days after any of the following occurs: A catastrophe occurs resulting in damage to the CBRF. This Rule is not met as evidenced by: Based on interview and observation, the provider did not ensure a written report was sent to the department within 3 working days after a catastrophe resulting in damage to the building occurred. Findings Include: The provider is licensed as a class AA (ambulatory) to provide services to the following client groups: correctional clients, developmentally disabled, emotionally disturbed/mental illness, alcohol/drug dependent and advanced age. On 11/07/2023 at approximately 11:15AM, Surveyors arrived at the provider's location, but no one was there. Surveyors made contact with Director B to gain access to the building. On 11/07/2023, at approximately 11:20AM, Surveyors interviewed Director B. Director B informed the surveyors residents were not	N 166		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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N 166	Continued From page 1 residing in the building at this time. Director B explained begining in September of 2022, there were no residents residing in the building. Sometime in December 2022, the furnace went out and needed to be replaced. While pending the furnace replacement, the pipes froze and burst. This caused significant damage to the walls and floors. Director B further explained the house was unsafe for anyone to enter because it is an active construction site. On 11/07/2023, Surveyors reviewed department records and noted a self report was not submitted as required. On 11/07/2023 at 12:26PM, Board Member A arrived and provided Surveyors access to the building. Surveyors observed several areas of the building that needed repair. Surveyors observed bedrooms and common areas with holes in the ceiling and walls with pipes and wiring exposed. Surveyors noted there were bathrooms with doors off the hinges and detached sinks. In the kitchen, counter tops and cabinets were removed, the stove was detached, and the sink was uninstalled and sitting in the office. Surveyors observed large amounts of construction debris and dust all through the building to include, drop clothes paint supplies, construction tools, sawhorses, large ladders, and paint supplies. On 11/08/2023 at 1:01PM, Surveyors interviewed Director B. Director B confirmed a report was not sent to the department indicating the pipes burst rendering the home inhabitable until repairs were complete. Cross Reference N0493 DHS 83.45(1)(b) - Building integrity Cross Reference N0498 DHS 83.45(2) Storage	N 166		

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N 166	Continued From page 2 Areas	N 166		
N 493	83.45(1)(b) Building integrity. Building integrity. The CBRF shall be structurally sound without visible evidence of structural failure or deterioration and shall be maintained in good repair. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure the facility was maintained in good repair. Findings include: The provider is licensed as a class AA (ambulatory) to provide services to the following client groups: correctional clients, developmentally disabled, emotionally disturbed/mental illness, alcohol/drug dependent and advanced age. On 11/07/2023 at 11:19 AM, Surveyors interviewed Director B to gain entrance to the facility. Director B informed the surveyors residents were not residing in the building at this time. Director B explained sometime in December 2022, the furnace went out and needed to be replaced. While the furnace was pending replacement, the pipes froze and burst. This caused significant damage to the walls and floors. Director B further explained the house is unsafe for anyone to enter because it is an active construction site. Director B stated s/he would call to find someone to let Surveyors gain access to the facility. On 11/07/2023 at 12:10 PM, Board Member (BM)	N 493		

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N 493	Continued From page 3 A met Surveyors at the facility and toured the facility with Surveyors. Surveyors observed the following: Basement - Hole in the ceiling with heat ducting pipes exposed in the resident recreation room - Can goods on shelving and in boxes on the floor in basement storage with a box leaning against the food that appeared wet resembling mold on the damaged box - Storage room off furnace area with pipes not connected to anything - Open pipe with no cap and not connected to anything near basement bathroom Upstairs - Bedrooms with holes in hardwood floor were only radiator heaters were removed, holes in wall with wires exposed, bedroom window screens with holes/tears, rooms need painting/patching - Bathroom with door off hinges, bathroom sink sitting in middle of room not connected, toilet tank cover on sink counter - One of the walls had a two large hole with exposed pipes. Surveyor looked through the larger hole and could see the stairway/foyer area below. - Hallways obstructed with ladder, chairs, fans, hole in ceiling next to ceiling register grate All Rooms Both Floors: - Large amounts of construction debris all through the house such as long pieces of wood, drop clothes paint supplies, tools, several sawhorses, - Equipment scattered through the house such as ladders, large wet/dry vacuums, Main Floor - Holes in walls and ceiling in foyer area with exposed pipes and wires	N 493		

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N 493	Continued From page 4 - Dry erase board with to do list of items to be completed. Including: take down sink to see if mold damage, scrap washer & dryer, areas that need paint, wood, sheetrock, etc. - Sheet covering stairway for steps off kitchen to upstairs Kitchen - No countertops on top of the cabinets. - Section of cabinets were missing doors. - Section of bottom cabinets were removed. - The stove was detached and moved to another room. - Sink was uninstalled and sitting in the office. Living Room Flooring: - Hardwood floors were unfinished. The were sanded down and rough to the touch. During tour of the facility BM A acknowledged they are currently working to complete all repairs and they are hopeful to be able to readmit residents after the 1st of the year. Cross Reference N0166 DHS 83.12 (4)(d) Reporting Catastrophe Resulting in Damage Cross Reference N0498 DHS 83.45(2) Storage Areas	N 493		