STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0020925	A. BUILDING: _____ B. WING _____	C 04/08/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DISCOVERY COMMONS NORTH SHORE	100 W RIVER WOODS PKWY GLENDALE, WI 53212

(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 04/08/2026, Surveyor conducted a standard survey and 1 complaint investigation at Discovery Commons North Shore. As a result, 3 deficiencies were identified, and 1 complaint was substantiated. Census: 107	N 000		
N 220	83.17(2)(a) Employees screened for communicable disease. The CBRF shall obtain documentation from a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse indicating all employees have been screened for clinically apparent communicable disease including tuberculosis. Screening for tuberculosis shall be conducted using centers for disease control and prevention standards. The screening and documentation shall be completed within 90 days before the start of employment. The CBRF shall keep screening documentation confidential, except the department shall have access to the screening documentation for verification purposes. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure all employees have been screened for clinically apparent communicable disease including tuberculosis (TB), within 90 days before the start of employment for 2 of 2 staff reviewed (Caregiver D and Caregiver E). Caregiver D was screened for communicable diseases 46 days after her/his date of hire. Caregiver E's communicable disease screening was not completed prior to providing cares.	N 220		

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

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N 220	Continued From page 1 Findings include: On 04/08/2026, at approximately 11:30 AM, Surveyor reviewed staff files and identified the following: Caregiver D was hired on 06/01/2024. Caregiver D's record contained a communicable disease screening dated 07/17/2024, 46 days after her/his start date. Caregiver E was hired on 04/13/2024. Caregiver E's record contained a communicable disease screening dated 04/12/2024. The communicable disease screening was not completed. On 04/08/2026, at 12:30 PM, Surveyor interviewed Business Office Manager (BOM) A and Director of Nursing (DON) B. BOM A and DON B confirmed the requirement for a TB test and communicable disease screening to be completed within 90 days before the start of employment. BOM A reported s/he was unaware the communicable disease screenings were completed late or incomplete. BOM A and DON reported the facility would ensure TB and communicable disease screenings are completed within the required timeframe for new employees.	N 220		
N 617	83.55(6)(b) Bath and toilet areas: water temperature The CBRF shall set the temperature of all water heaters connected to sinks, showers and tubs used by residents at a temperature of at least 140°F. The temperature of water at fixtures used by residents shall be automatically regulated by valves and may not exceed 115°F, except for CBRFs serving residents recovering from alcohol	N 617		

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N 617	Continued From page 2 or drug dependency or clients of a government correctional agency. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure the temperature of water at fixtures used by residents did not exceed 115 degrees Fahrenheit (F) in 2 of 2 bathrooms. Bathroom water temperatures measured between 120.6 degrees F and 123.6 degrees F. Findings include: The facility is a class CNA non-ambulatory community based residential facility licensed to serve up to 110 residents in the areas of advanced age, irreversible dementia/ Alzheimer's, physically disabled. On 04/08/2026, at approximately 9:20 AM Surveyor toured the facility and observed the following: Room 212's bathroom water temperature was 120.6 degrees F. Room 238's bathroom water temperature was 123.6 degrees F. On 04/08/2026, at 12:30 PM, Surveyor interviewed Business Office Manager (BOM) A and Director of Nursing (DON) B. BOM A and DON B were unaware of the code requirement. BOM A and DON B reported maintenance would adjust water temperature to the appropriate temperature.	N 617		

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Y3100	Continued From page 3	Y3100		
Y3100	50.09(1)(f) Resident's Rights In Certain Facilities (f) Physical and emotional privacy in treatment, living arrangements and in caring for personal needs, including, but not limited to: 1. Privacy for visits by spouse or domestic partner. If both spouses or both domestic partners under ch. 770 are residents of the same facility, the spouses or domestic partners shall be permitted to share a room unless medically contraindicated as documented by the resident ' s physician, physician assistant, or advanced practice nurse prescriber in the resident ' s medical record. 2. Privacy concerning health care. Case discussion, consultation, examination and treatment are confidential and shall be conducted discreetly. Persons not directly involved in the resident ' s care shall require the resident ' s permission to authorize their presence. 3. Confidentiality of health and personal records, and the right to approve or refuse their release to any individual outside the facility, except in the case of the resident ' s transfer to another facility or as required by law or 3rd-party payment contracts and except as provided in s. 146.82 (2) and (3).	Y3100		

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Y3100	Continued From page 4 This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure each resident had the right not to be recorded or filmed when electronic monitoring cameras were placed in common areas and hallways in the facility. This had the potential to affect 107 of 107 residents. Findings include: On 01/26/2026, the Department received a complaint alleging concerns about cameras in common areas of the facility. The facility is a class CNA non-ambulatory community based residential facility licensed to serve up to 110 residents in the areas of advanced age, irreversible dementia/ Alzheimer's, physically disabled. Observations On 04/08/2026, at approximately 9:20 AM, Surveyor toured the facility. Cameras were located on the first and second floor in common areas and hallways leading to resident rooms. Cameras were in common areas at the end of hallways on the first and second floor and in an activity room on the second floor. Cameras were also located outside on the patio area where residents congregate. On 04/08/2026, at approximately 10:45 AM, Surveyor observed Maintenance Director C's camera access and observed the following camera locations: - Interior Front Desk - Interior Bistro	Y3100		

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Y3100	Continued From page 5 - Interior Bistro Fox Therapy (common hallway) - Interior Bistro Piano Bar - Interior AL 1st Floor (7 different cameras showing hallways with resident rooms) - Interior AL 1st Floor Pond Exit (common seating area with 4 chairs) - Interior 2nd floor activity room - Interior 2nd floor movie theater hallway - Interior 2nd floor 201-208 hallway (common seating area and hallway with resident rooms) - Interior 2nd floor Poker hallway (common seating area and hallway with resident rooms) - Interior 2nd floor 238 corner hallway (hallway with resident rooms) - Interior 2nd floor 238 stairway - Outside Patio v1 (common seating area) - Outside Back Patio v2 (common seating area) - Outside Back Patio v3 Interviews On 04/08/2026, at approximately 10:40 AM, Surveyor interviewed Maintenance Director C. Maintenance Director C reported the facility originally had cameras only covering the exits of the building. Maintenance Director C reported "around June 2025" the additional cameras in the hallways and common areas were installed to prevent or identify theft. Maintenance Director C reported only s/he and one other person had access to the cameras. On 04/08/2026, at 12:30 PM, Surveyor interviewed Business Office Manager (BOM) A and Director of Nursing (DON) B. BOM A and DON B were unaware of the code requirement. BOM A and DON B acknowledged Surveyor concerns for residents' rights to privacy in common areas.	Y3100		