STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016391	A. BUILDING: _____ B. WING _____	C 12/04/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LAKEVIEW CARE PARTNERS AT WATERFORD	1701 SHARP RD WATERFORD, WI 53185

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N 000	Initial Comments On 12/04/2025, Surveyor completed a complaint investigation at Lakeview Care Partners at Waterford. As a result, 2 deficiencies were identified. One complaint was substantiated. Census: 20	N 000		
N 386	83.35(3)(a) Comprehensive Individualized Service Plan Comprehensive individual service plan. Scope. Within 30 days after admission and based on the assessment under sub. (1), the CBRF shall develop a comprehensive individual service plan for each resident. The individual service plan shall include all of the following: 1. Identify the resident ' s needs and desired outcomes. 2. Identify the program services, frequency and approaches under s. HFS 83.38(1) the CBRF will provide. 3. Establish measurable goals with specific time limits for attainment. 4. Specify methods for delivering needed care and who is responsible for delivering the care. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 resident (Resident 1) had a comprehensive individualized service plan (ISP) which identified the resident's needs, program services, measurable goals with specific time limits for attainment, specified methods for delivering care, who was responsible for delivering the care, and the frequencies and approaches of the needed care for behavior patterns and management, mental/emotional health, and social participation. In addition,	N 386		

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

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N 386	Continued From page 1 Resident 1's ISP did not include information Resident 1 ambulated with a wheelchair and did not reference Resident 1's behavior support plan (BSP). Findings include: The facility was licensed as a class CNA (non-ambulatory) community based residential facility (CBRF), serving up to 20 residents within the client groups of traumatic brain injury, alcohol/drug dependent, developmentally disabled, physically disabled, and public funding. On 12/02/2026, at approximately 11:15 AM, Surveyor reviewed Resident 1's record, and the following was identified: Resident 1 was admitted to the facility on 04/30/2025, with diagnoses including bipolar disorder, depression, autistic disorder, suicidal ideations, and impulsiveness. Resident 1's record included a behavior support plan (BSP), which identified information regarding aggression, inappropriate sexual comments, and suicidal ideations. Resident 1's BSP included prevention strategies, a reinforcement plan to include a reward system, response strategies, private time protocol, and flow charts for responding to her/his aggression and any suicidal ideation that could become a probable threat. Resident 1's record included an incident report, dated 11/03/2025. Resident 1 made threats of suicide and was observed holding a knife to her/his neck in her/his room. Resident 1's ISP, dated 08/25/2025, documented the following:	N 386		

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N 386	Continued From page 2 "Behavior Patterns - Function or Activity: Aggressive/Combative Resident Needs: Requires staff assistance to manage/redirect aggressive/combative behaviors. Frequency: . . . As needed every day Resident's Desired Outcomes: To have interventions in place that help alleviate behaviors . . . Function or Activity: Destructive/Abusive Resident Needs: Resident displays destructive behaviors. Frequency: . . . As needed every day Resident's Desired Outcomes: To have interventions in place that help alleviate behaviors. Function or Activity: Self-Abusive Behavior Resident's Needs: Not Applicable . . . Function or Activity: Suicidal Tendencies Resident's Needs: Resident has suicidal thoughts/tendencies. Frequency: . . . As needed every day Resident's Desired Outcomes: To have proper precautions/care in place to alleviate suicidal thoughts/tendencies . . . Mental Health - Function or Activity: Attitude Resident's Needs: Resident requires staff assistance to maintain motivation and positive attitude. Frequency: . . . Staff Assistance - As needed every day Resident's Desired Outcomes: To remain	N 386		

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N 386	Continued From page 3 motivated and have a positive attitude toward circumstances . . . Function or Activity: Mental Illness Resident's Needs: Resident has history of self-harm, impulsivity and lack of safety awareness . . . Resident's Desired Outcomes: Maintain decreased behaviors . . . Social Participation - . . . Function or Activity: Community Contacts Resident's Needs: Not Applicable . . . Function or Activity: Education Resident's Needs: Not Applicable . . . Function or Activity: Interpersonal Relationships Resident's Needs: Not Applicable . . . Function or Activity: Religion Resident's Needs: Not Applicable . . . Function or Activity: Vocation Resident's Needs: Not Applicable . . . " Resident 1's ISP identified functions or activities under the subject area of behavior patterns including aggressive/combative, destructive/abusive, self-abusive behavior, and suicidal tendencies, but did not identify the program services and approaches the CBRF would provide, measurable goals with specific time limits for attainment, specify methods for delivering needed care, or specify who was responsible for delivering the care needed for all areas identified within the subject area of behavior patterns.	N 386		

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N 386	Continued From page 4 Resident 1's ISP identified functions or activities under the subject area of mental health including attitude and mental illness but did not identify the program services and approaches the CBRF would provide, measurable goals with specific time limits for attainment, specify methods for delivering needed care, or specify who was responsible for delivering the care needed for all areas identified within the subject area of mental health. Resident 1's ISP identified under the subject area of mental health Resident 1 had a history of self-harm; Self-abusive behavior was identified under the subject area of behavior patterns but was documented as not applicable to Resident 1. Resident 1's ISP identified functions or activities under the subject area of social participation including community contacts, education, interpersonal relationships, religion, and vocation, but documented all of these areas as not applicable to Resident 1. Resident 1's ISP did not include information s/he ambulated with a wheelchair and did not reference Resident 1's Behavior Support Plan (BSP). On 12/02/2025, at 12:57 PM, Surveyor interviewed Director of Residential Services A, Quality Coordinator B, and Case Manager (CM) C, and the following was reported: CM C was responsible for completing residents' ISPs. The facility recently started moving resident information, including the ISPs, into a resident care computer program and they were working to understand how the program worked and how to enter information. Care staff were not utilizing	N 386		

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N 386	Continued From page 5 ISPs to care for residents and were only using BSPs. Surveyor inquired if Resident 1's ISP referenced her/his BSP and CM C confirmed it did not. They confirmed Resident 1's ISP did not include all information required. They reported they planned to review resident files and update ISPs with the code required information following the survey exit.	N 386		
N 429	83.38(1)(e) Family and social contacts. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the resident ' s highest level of functioning. In addition to the assessed needs as determined under s. DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Family and social contacts. The CBRF shall encourage and assist residents in maintaining family and social contacts. This Rule is not met as evidenced by: Based on interviews, observations, and record review, the provider did not provide or arrange services adequate to meet the needs of the residents for social contacts and did not encourage or assist in maintaining social contacts for 1 of 1 resident (Resident 1) reviewed. Resident 1's individual service plan (ISP) did not identify her/his needs for social participation. The provider prevented Resident 1 from maintaining social contacts s/he had established, following an incident that occurred on 11/02/2025. Findings include:	N 429		

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N 429	Continued From page 6 On 11/10/2025, the Department received a complaint alleging the facility had implemented rules which isolated residents from the other licensed community based residential facility (CBRF) residents within the building. On 12/02/2025, at 9:52 AM, Surveyor interviewed Person D (resident from other licensed CBRF within the building). The following was reported: On 11/02/2025, Resident 1 confined in Person D and told her/him s/he wanted to commit suicide and later that day Resident 1 attempted to carry out that thought and held a knife to her/his throat. Prior to the incident, Resident 1, Person D, and Resident 2 regularly spent time together. Typically, Person D would visit the facility and meet with Resident 1 and Resident 2 in the common areas of the facility. They enjoyed doing activities together, such as playing card games, and ate lunch together in the shared dining room on the main level of the building. Person D considered Resident 1 and Resident 2 friends. When the activities director was done with her/his shift, the residents were on their own for evening/weekend activities and socialization. Following the incident on 11/02/2025, staff began implementing new rules which prevented Person D from spending time with the residents at the facility. Person D reported s/he was told by Director of Resident Services (DRS) A s/he had to eat her/his meals in the dining room in her/his CBRF. Person D provided laundry folding services to the facility's residents and previously entered the facility to get/give the laundry from/to the residents. One of the new rules required staff to bring the laundry between the two facilities, as to keep Person D from visiting. Person D	N 429		

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N 429	Continued From page 7	N 429		

reported feeling like s/he could no longer visit Resident 1 or any other residents living at the facility. S/He reported s/he had not been allowed to spend time with Resident 1 since the incident, approximately 1 month.

On 12/02/2025, at 10:25 AM, Surveyor interviewed Resident 1, and the following was reported:

S/He was no longer allowed to spend time with Person D. S/He reported staff told her/him "CBRF 2 should not mingle with CBRF 1." They were not allowed to have meals together. Resident 1 and Person D previously met most evenings and played card games. Resident 1 reported s/he was sad and wished s/he could see her/his friend, Person D. Resident 1 started to cry and reported s/he really enjoyed the company and socialization with Person D. The activities director only worked during the week on dayshift and residents were on their own for activities outside of those hours. Resident 1 appreciated the activities Person D did with her/him and other residents. Resident 1 reported s/he had not been allowed to spend time with Person D since the incident on 11/02/2025. Resident 1 requested Surveyor interview Resident 2, as s/he played games with them too and had not been allowed to spend time with Person D.

On 12/02/2025, at 10:58 AM, Surveyor interviewed Resident 2, and the following was reported:

S/He used to do activities with Resident 1 and Person D. Resident 2 was unsure what happened and why things had changed. S/He was "not allowed" to play cards with Resident 1 and Person D anymore. Surveyor inquired why s/he

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	0016391	A. BUILDING: _____ B. WING _____	C 12/04/2025

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N 429	Continued From page 8	N 429		

was not allowed and who had told her/him that. S/He was unsure and did not know how long it had been since they last got together. S/He reported being sad and missed spending time with Person D.

On 12/02/2025, at approximately 11:15 AM, Surveyor reviewed Resident 1's record, and the following was identified:

Resident 1 was admitted to the facility on 04/30/2025, with diagnoses including bipolar disorder, depression, autistic disorder, suicidal ideations, and impulsiveness.

Resident 1's ISP, dated 08/25/2025, identified functions or activities under the subject area of social participation including community contacts, interpersonal relationships, and leisure time activities. Resident 1's ISP documented the following:

"Social Participation - . . .

Function or Activity: Community Contacts
Resident's Needs: Not Applicable . . .

Function or Activity: Interpersonal Relationships
Resident's Needs: Not Applicable . . .

Function or Activity: Leisure Time Activities
Resident's Needs: Resident requires staff to offer activities and monitor participation.
Frequency: . . . 5x every day
Resident's Desired Outcomes: Find enjoyment/fulfillment in activities of choice . . . "

On 12/02/2025, at approximately 12:30 PM, Surveyor observed lunch service in the shared cafeteria on the main level of the building. The

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N 429	Continued From page 9 following was observed: Resident 1 was in her/his wheelchair pulled up to a table. S/He was eating nearby other residents, but Person D was not in the cafeteria. Surveyor was exiting the cafeteria and observed Person D walking by. Surveyor inquired if Person D had eaten lunch, and s/he reported s/he had, upstairs in her/his room. On 12/02/2025, at 12:57 PM, Surveyor interviewed DRS A, and the following was reported: Prior to the incident with Resident 1, on 11/02/2025, Person D conducted activities with the residents. Person D joined residents for lunch and dinner and bingo days. DRS A stated following the incident "interactions needed to be different." Following the investigation of the incident, DRS A reported interviews of residents and staff were conflicting. DRS A was concerned about what could transpire if Resident 1 and Person D were allowed to spend time together; Resident 1's behaviors increased if s/he did not get what s/he wanted. DRS A denied allegations s/he or any of the staff told Resident 1 and/or Resident 2 they could not spend time with Person D or other persons/residents. Facility administration did implement a new rule which required CBRF II residents to walk through the courtyard to get to common spaces, rather than through CBRF 1. DRS A was unaware residents felt they could not socialize with persons of their choosing and the impact it was having on them.	N 429		