Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0014327	A. BUILDING: _____ B. WING _____	C 10/16/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
INGLEWOOD	405 N 8TH ST MOUNT HOREB, WI 53572

(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 10/16/2025, Surveyors conducted a complaint investigation at Inglewood, an RCAC located in Mount Horeb, WI. As a result of the invesitgation, 1 violation of Chapter DHS 89 was issued. The complaint was substantiated.	U 000		
U 268	89.34(17) TENANT RIGHTS Rights of tenants. A tenant of a residential care apartment complex shall have all the rights listed in this section. These rights in no way limit or restrict any other rights of the individual under the U.S. Constitution, civil rights legislation or any other applicable statute, rule or regulation. Tenant rights are all of the following: (17) SAFE ENVIRONMENT. To a safe environment in which to live. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure a safe living environment appropriate for tenants. The fire panel was damaged during a storm 08/16/2025, the fire panel was not fixed until 10/06/2025 and facility did not conduct a fire watch until 09/16/2025. Findings include: On 10/16/2025 at 9:00 AM, Surveyors reviewed facility documentation regarding the facility fire panel being damaged by lightning.	U 268		

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

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U 268	Continued From page 1 Documentation from fire panel service company dated 08/28/2025 indicated knowledge of failing fire panel and recommendations for repair. Company recommended entire fire panel be replaced. Texts between Administrator A and Manager B indicate that fire watch was not implemented until 09/16/2025. Documentation from fire panel service company dated 10/06/2025, indicated that the fire panel was operational as of 10/06/2025. On 10/16/2025 at 9:00 AM, Surveyors interviewed Administrator A. Administrator A acknowledged that there was a thunderstorm on 08/28/2025 and a lightning strike likely damaged the fire panel rendering it inoperable at that time. Administrator A stated that the fire panel did effect the entire facility and also the elevator used by tenants. Administrator A stated s/he tenants had been complaining that the facility elevator was not working immediately after the lightning strike (08/29/2025). Administrator A stated that nobody checked the fire panel because, "We didn't know anything was wrong." Surveyor asked how nobody was aware that the fire panel was damaged when there is documentation from the fire panel service company dated 08/28/2025 that indicates that the fire panel needed to be replaced. Administrator stated that the paperwork regarding the fire panel did not get routed to him/her, but to corporate. Administrator A stated that at a Tenant Counsel Meeting, tenants brought up the fact that not only was the elevator not working, but the fire panel wasn't working either. Administrator A stated that the elevator was fixed as of 09/17/2025, but the	U 268		

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U 268	Continued From page 2 fire panel was not. Administrator A stated that a "fire watch" was implemented 09/16/2025, but not at the intervals required. Staff were conducting fire watch walk through once a shift, but increased to 3 times a shift after 09/22/2025. Administrator A acknowledged that, "fire watch is to be done once an hour when the fire panel is not operational, and we did not conduct walk throughs as required."	U 268		