

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0020482	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 07/08/2026
NAME OF PROVIDER OR SUPPLIER HUNTER MEADOW		STREET ADDRESS, CITY, STATE, ZIP CODE 1432 HUNTER AVE FOND DU LAC, WI 54937		
(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 07/07/2026 with information gathered through 07/08/2026, Surveyor conducted a complaint investigation, verification visit and standard survey at Hunter Meadow, an Adult Family Home (AFH) in Fond Du Lac, WI. Three deficiencies were identified. One of three deficiencies is a repeat deficiency. See Statement of Deficiency (SOD) 201511, dated 02/04/2026. Complaint substantiated. Under statutory provisions of Wis. Stat. Ch. 50, a \$200 revisit fee is being assessed. Census: 3	{M 000}		
M 336	88.05(4)(b)2 SMOKE DETECTORS-TESTING AND MAINTENANCE The licensee shall maintain each required smoke detector in working condition and test each smoke detector monthly to make sure that it is operating. If a unit is found to be not operating, the licensee shall immediately replace the battery or have the unit repaired or replaced. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure each required smoke detector was tested monthly to determine if it was operating properly for 1 of 1 calendar year reviewed (2025).	M 336		

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

TITLE

(X6) DATE

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M 336	Continued From page 1 Findings include: On 07/07/2026 at approximately 10:30 AM, Surveyor requested documentation of the home's smoke detector tests from Area Director C. Area Director C provided Surveyor with fire drills completed in November and December of 2025. On 07/07/2026 at approximately 10:35 AM, Surveyor interviewed Area Director C. Area Director C stated s/he would be honest and shared the smoke detectors had not been checked for awhile and on a monthly basis as required. Area Director C stated they are to do monthly fire drills and at that time is when the smoke detectors are to be tested as well. Area Director C stated s/he recently took over the home in April of 2026 so s/he was not sure why smoke detector checks were not completed for January-October of 2025. Area Director C stated s/he would make sure moving forward, the smoke detector checks are completed on a monthly basis.	M 336		
M 384	88.06(2)(b) SERVICE AGREEMENT EXCEPT RESPITE An adult family home shall have a service agreement with each person to be admitted to the home except a person being admitted for respite care. The service agreement shall be completed prior to admission and revised at least 30 days prior to any change. The service agreement shall be dated and signed by the licensee and the person being admitted or the persons guardian or designated representative. Copies shall be	M 384		

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M 384	Continued From page 2 provided to all parties and to the placing agency, if any. This Rule is not met as evidenced by: Based on record review and interview, the provider did not have a service agreement for 1 of 1 resident reviewed (Resident 2). Findings include: On 07/08/2026, Surveyor requested Resident 2's records from Area Manager C. Resident 2 was admitted to the facility on 10/16/2025. Resident 2 did not have an admission agreement completed. Resident 2 had a guardian. On 07/08/2026 at approximately 12:00 PM, Surveyor interviewed Area Manager C. Area Manager C stated s/he could not locate an admission agreement in his/her record. Area Manager C stated s/he was not overseeing the house at the time of his/her admission so s/he is not sure why the admission agreement did not get completed.	M 384		
{M 582}	88.10(3)(q) Medications Medications. To receive all prescribed medications in the dosage and at the intervals prescribed by the resident's physician, and to refuse medications unless there has been a court order under s. 51.61(1)(g), Stats., with a court finding of incompetency.	{M 582}		

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{M 582}	Continued From page 3 This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 residents reviewed received medications in the dosages and intervals prescribed by the physician for Resident 1 and Resident 2. Resident 1 missed 9 doses of prescribed medication in June 2026 and 26 does of prescribed medications in July 2026. Resident 2 missed 1 dose of prescribed medication in June 2026 and 5 does of prescribed medications in July 2026. This is a repeat deficiency. See Statement of Deficiency (SOD) 201511, dated 02/04/2026. Findings Include: On 07/08/2026, Surveyor reviewed Resident 1 and Resident 2's records and identified the following: RESIDENT 1 Resident 1's June 2026 and July 1st through 6th 2026 medication administration records (MAR) stated Resident 1 missed 9 does in June 2026 and 26 doses in July 2026. Surveyor noted several medications were documented as missed. The MAR documented the following: Astrovastatin 80mg - 1 tab daily for Dyslipidemia 06/29: x 1, 07/03: x 1, 07/04: x 2, 07/06: x 3 * The key on the MAR identified x 1 as "missed." * The key on the MAR identified x 1, x 2, x 3 as "missed."	{M 582}		

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{M 582}	Continued From page 4 Doxepin HCL 10mg - 1 cap every night for mood/insomnia 06/27: x 2, 06/29: x 3, 07/03: x 4, 07/04: x5 *The key on the MAR identified x 2 and x 3 as "missed." *The key on the MAR identified x 4 and x 5 as "missed." Levetiraceta 100mg - 2 tabs (200mg) twice daily for seizures/headaches 06/29: x 4, 07/03: x 6, 07/04: x 7, 07/06: x 8 *The key on the MAR identified x 4 as "missed." *The key on the MAR identified x 6, x 7, x 8 as "missed." Loratadine Tab 10mg-take 1 tablet by mouth once everyday for allergies 07/01: x 9 *The key on the MAR identified x 9 as "missed." Metoprol TAR 25mg - 1 tab every 12 hours for hypertension 06/29: x 5, 07/03: x 10, 07/04: x 11, 07/06: x 12 *The key on the MAR identified x 5 as "missed." *The key on the MAR identified x 10, x 11, x 12 as "missed." Stimulant LX 8.6-50mg - 2 tabs every morning for constipation 06/29: x 7, 07/03: x 13, 07/04: x 14, 07/06: x 15 *The key on the MAR identified x 7 as "missed." *The key on the MAR identified x 13, x 14, x 15 as "missed." True Metrix Tes Glucose-Use to test blood glucose 2-3 times daily for diabetes 07/03: x 16, 07/01: x 17, 07/02: x 18 and x 19 *The key on the MAR identified x 16, x 17, x 18, x 19 as "missed."	{M 582}		

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{M 582}	Continued From page 5 Valproic ACD 250mg - 5 caps (1250mg) every morning for seizure/headache 06/29: x 16, 07/03: x 20, 07/04: x 21, 07/06: x 22 *The key on the MAR identified x 16 as "missed." *The key on the MAR identified x 20, x 21, x 22 as "missed." VIT D-3 5,000 Units - 1 tab Monday-Friday 06/30: x 17 *The key on the MAR identified x 17 as "missed." Warfarin 4mg - 1 tab on Monday 06/29: x 18 *The key on the MAR identified x 18 as "missed." RESIDENT 2 Resident 2's June 2026 and July 1st through 6th 2026 medication administration records (MAR) stated Resident 1 missed 1 dose in June 2026 and 5 doses in July 2026. Surveyor noted several medications were documented as missed. The MAR documented the following: Guanfacine Tab 1mg - take 1 tablet by mouth every night for ADHD 06/29: x 2, 07/03: x 2, 07/04: x 3 *The key on the MAR identified x 2 as "missed." *The key on the MAR identified x 2, x 3 as "missed." Amphet/Dextr Cap 20 mg ER- take 1 capsule by mouth once every day for ADHD 07/04: x 1 *The key on the MAR identified x 1 as "missed." Loratadine Tab 10mg- take 1 tablet by mouth once every day for allergies 07/04: x 4 *The key on the MAR identified x 4 as "missed."	{M 582}		

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{M 582}	Continued From page 6 Risperidone Tab 1 mg-take 4 tablets (4mg) by mouth every morning for ADHD 07/04: x 5 *The key on the MAR identified x 5 as "missed." On 07/08/2026, Surveyor interviewed Area Manager C. Area Manager C stated s/he was not over the building during that time but s/he does not have an explanation for it and will have to take MAR as documented and that the medications were missed.	{M 582}			