

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0019326	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 09/23/2025
NAME OF PROVIDER OR SUPPLIER PINE MEADOWS 1		STREET ADDRESS, CITY, STATE, ZIP CODE 4930 ALDERSON ST SCHOFIELD, WI 54476		
(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 09/23/2025, Surveyor conducted a verification visit, complaint and standard licensure survey at Pine Meadows 1. The complaint was unsubstantiated. The deficiencies from SOD 26NO11, dated 04/16/2025, were corrected. Two deficiencies were identified. Census: 11 Under statutory provisions of Wis. Stat. ch. 50, a \$200 revisit fee is being assessed.	{N 000}		
N 417	83.37(3)(a) Medication storage: original containers. Original containers. The CBRF shall keep medications in the original containers and not transfer medications to another container, unless the CBRF complies with all of the following: 1. Transfer of medications from the original container to another container shall be done by a practitioner, registered nurse, or pharmacist. Transfer of medication to another container may be delegated to other personnel by a practitioner, registered nurse or pharmacist. 2. If a medication is administered by CBRF employees and the medication is transferred from the original container by a registered nurse, or practitioner or other personnel who were delegated the task, the CBRF shall have a legible label on the new container that includes, at a minimum, the resident ' s name, medication name, dose and instructions for use. The CBRF shall maintain the original pharmacy container until the transferred medication is gone.	N 417		

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

TITLE

(X6) DATE

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N 417	Continued From page 1 This Rule is not met as evidenced by: Based on observation and interview, the provider did not keep all medications in their original containers for Resident 1. Findings include: On 09/23/2025 at approximately 11:30 a.m., Surveyor observed the medication cart with Caregiver C. Surveyor observed a medication cup in the top drawer that had 3 pills in it. The cup did not have a label on it. Caregiver C told Surveyor the pills were 2 Tylenol and an aspirin for Resident 1. S/he said Resident 1 did not get up for the day yet. Caregiver C told Surveyor s/he was aware s/he should not remove the pills from the package until s/he was ready to administer the medications.	N 417		
N 427	83.38(1)(c) Leisure time activities. 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: Leisure time activities. The CBRF shall provide a daily activity program to meet the interests and capabilities of the residents. Employees shall encourage and promote resident participation in the activity program. The CBRF shall develop and post the activity schedule in an area available to residents.	N 427		

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N 427	Continued From page 2 This Rule is not met as evidenced by: Based on observation, interview, and record review, the provider did not provide a daily activity program to meet the interests and capabilities of the residents. The provider did not post an activity schedule in an area available to residents. Findings include: The provider is licensed to care for up to 14 residents in the client groups of: physically disabled, terminally ill, irreversible dementia/Alzheimer's disease, and advanced age. The provider's program statement read, in part: "Traditions at Pine Meadows will strive to maintain each Resident's current physical and psychosocial functioning and prevent decline whenever possible. In order to maintain each Resident's current level of physical and psychosocial functioning, Traditions at Pine Meadows will provide: ... B. Leisure Services and Activities The Pre-Admission Assessment will include inquiries related to past and current activity and leisure interests. Three group activity periods will be offered daily incorporating these interests. A monthly calendar listing of scheduled activities will be posted in the facility ..." On 09/23/2025 at approximately 11:45 a.m., Surveyor interviewed Resident 2. Surveyor asked what kind of activities there were. Resident 2 told Surveyor they used to do Bingo, but not anymore. S/he said there were no other activities. On 09/23/2025 at approximately 12:00 p.m., Surveyor toured the facility. Surveyor did not	N 427		

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N 427	Continued From page 3 observe an activity schedule posted. Surveyor asked House Manager (HM) A and House Lead (HL) B if they had an activity schedule. HM A said it should be posted on the "busy board." HL B showed Surveyor a board posted on the wall labeled, "Busy Board." This board had 3 pockets on it that contained word searches, sudoku puzzles, and trivia. There was a mechanical lift and a table in front of this board, that made the board not easily accessible. There was no activity calendar on the board. On 09/23/2025 at approximately 12:15 p.m., Surveyor interviewed Resident 3 and asked about activities. Resident 3 told Surveyor they used to do Bingo, but they have not for quite a while. On 09/23/2025, Surveyor reviewed Resident 2's record. Resident 2 did not have a legal guardian and was responsible for self. Resident 2's satisfaction evaluation, dated, 04/01/2025, read, in part: "List other services or activities that you feel you need but are NOT provided or arranged by the CBRF (community based residential facility. 'Playing bingo' ... List any activities you would like to have but which are not available. Bingo more often." On 09/23/2025, Surveyor reviewed activity calendars from June, July, August, and September. The calendars indicated the activity was to take place between 1:30 and 2:30. On each Monday was exercise, Tuesdays were trivia, Wednesdays were card game, Thursdays were baking, or kitchen prep and Fridays were Bingo. There were no activities for Saturdays or Sundays. These calendars were photocopied 30 day calendars with the 1st falling on a Tuesday each month and the 30th falling on a Wednesday each month. The calendar did not give accurate	N 427		

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N 427	Continued From page 4 dates. For example, 09/23/2025, was a Tuesday, but the activity calendar identified the date as a Wednesday. On 09/23/2025 at approximately 4:00 p.m., Surveyor interviewed HM A and explained the daily activity requirement. HM A said they were currently looking to hire an activity person. The provider did not develop and post an activity calendar and did not provide a daily activity program for the residents.	N 427			