STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017298	A. BUILDING: _____ B. WING _____	R 01/09/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
REM WISCONSIN INC CRESTLINE	2506 CRESTLINE DR MADISON, WI 53704

(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 01/09/2025, Surveyor conducted a verification visit at REM Wisconsin Inc Crestline, an AFH located in Madison, WI. As a result of the survey, 1 violation of Chapter DHS 88 was issued. One violation is a repeat violation from previous Statement of Deficiency (SOD) 7F6811 dated 06/01/2022 and SOD 2LVY11 dated 07/24/2024. One violations from previous SOD 2LVY11 were corrected. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 2	{M 000}		
{M 570}	88.10(3)(l) Safe Physical Environment Individuals, except for correctional residents, have basic rights which they do not lose when they enter an adult family home. A resident shall have a safe environment in which to live. The adult family home shall safeguard residents who cannot fully guard themselves from environmental hazards to which they are likely to be exposed, including conditions which would be hazardous to anyone and conditions which would be or are hazardous to a particular resident because of the resident's condition or disability. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure a safe physical environment	{M 570}		

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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{M 570}	Continued From page 1	{M 570}		

appropriate for residents. That deck was badly deteriorated, and the deck boards were significantly warped.

This is a repeat violation from previous Statement of Deficiency (SOD) 7F6811 dated 06/01/2022 and SOD 2LVY11 dated 07/24/2024.

Findings include:

On 01/09/2025 at 11:15 AM, Surveyor toured the physical environment of the home and observed the following:

The deck at the back of the house was badly deteriorated. The deck boards were significantly warped, and the wood was visibly rotten.

The metal ramp leading from the patio door to the deck was rusted and contained several holes approximately .5 inches by .5 inches.

The ramp at the side of the house used as an emergency exit was deteriorated and contained boards that were damaged due to use and weather.

On 01/09/2025 at 11:30 AM, Surveyor interviewed Program Director A who stated that the deck was not used by residents because it was too damaged. Program Director A acknowledged that both the exit ramp and the deck were in need of repair. Program Director A stated there was a purchase order completed for materials to repair the deck, but an inspector from the City of Madison told facility to stop repairs and apply for a permit before continuing work. Surveyor asked Program Director A for documentation of the order to get a permit. Program Director A stated s/he would have to see if it existed.

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{M 570}	Continued From page 2 Surveyor gave Program Director A until 01/10/2025 at 12:00 PM to provide documentation. As of 01/10/2025 at 12:00 PM no further information was provided.	{M 570}		