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
	0016387	A. BUILDING: _____ B. WING _____	R-C 03/18/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OPEN ARMS 20 LLC GREAT ELMS	3519 GREAT ELMS LN RACINE, WI 53405

(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 03/18/2026, Surveyor completed a verification visit and a standard licensure at Open Arms 20 LLC Great Elms. Statement of deficiency 76SB12 was corrected. Three new deficiencies were identified. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee will be assessed. Census: 4	{M 000}		
M 332	88.05(4)(a) FIRE SAFETY-FIRE EXTINGUISHERS Fire extinguishers. Every adult family home shall be equipped with one or more fire extinguishers on each floor. Each required fire extinguisher shall have a minimum 2A, 10-B-C rating. All required fire extinguishers shall be mounted. A fire extinguisher is required at the head of each stairway and in or near the kitchen except that a single fire extinguisher located in close proximity to the kitchen and the head of a stairway may be used to meet the requirement for an extinguisher at each location. Each required fire extinguisher shall be maintained in readily usable condition and shall be inspected annually by the authorized dealer or the local fire department and have an attached tag showing the date of the last dealer or fire department inspection. This Rule is not met as evidenced by:	M 332		

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

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M 332	Continued From page 1 Based on observation and interview, the provider did not ensure 1 of 3 required fire extinguishers was in the home and did not ensure 1 of 3 fire extinguishers in the home was inspected annually. The home did not have a fire extinguisher at the head of the stairway to the basement. The fire extinguisher in the basement was tagged inspected November 2024. Findings include: On 03/18/2026, at approximately 1:00 PM, Surveyor toured the home with Administrator D and observed the following: There were 2 fire extinguishers in the home; one mounted in the kitchen and the other mounted in the basement. The kitchen was not within close proximity to the head of the stairway. A fire extinguisher was not located near the head of the stairway. The fire extinguisher mounted in the basement was tagged inspected November 2024. During the tour, Surveyor interviewed Administrator D, and the following was reported: Administrator D was responsible for having the fire extinguishers in the home inspected annually and confirmed the requirement. S/He was unaware the basement fire extinguisher had not been inspected in 2025 and was not sure how it was missed. S/He contacted Maintenance Person G to have the fire extinguisher inspected and replaced. Administrator D was unaware of the requirement to have a fire extinguisher at the head of the stairway. S/He confirmed understanding of a fire extinguisher required on each level of the home. Administrator D reported	M 332		

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M 332	Continued From page 2 Maintenance Person G would add the required fire extinguisher to the head of the stairway.	M 332		
M 334	88.05(4)(b)1 FIRE SAFETY-SMOKE DETECTORS Every adult family home shall be equipped with one or more single station battery operated, electrically interconnected or radio signal emitting smoke detectors on each floor level. Required smoke detectors shall be located in each habitable room except the kitchen and bathroom and specifically in the following locations: at the head of each open stairway, at the door leading to every enclosed stairway, on the ceiling of the living room or family room, on the ceiling of each sleeping room and in the basement. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure 1 of 7 required smoke detectors were in the home. The home did not have smoke detectors at the door leading to the enclosed stairway. Findings include: On 03/18/2026, at approximately 1:00 PM, Surveyor toured the home with Administrator D and observed the following: The door leading to the enclosed basement stairway did not have a smoke detector.	M 334		

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M 334	Continued From page 3 During the tour of the home, Surveyor interviewed Administrator D, and the following was reported: Administrator D was unaware the home did not have a smoke detector at the door to the enclosed stairway. Administrator D contacted Maintenance Person G and requested for smoke detectors to be added to these areas.	M 334		
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 observation and interview, the provider did not ensure each required smoke detector was working for 2 of 7 smoke detectors in the home. Smoke detectors in 2 resident bedrooms did not have batteries. Findings include: On 03/18/2026, at approximately 1:00 PM, Surveyor toured the home with Administrator D, and observed the following: Two of the 4 residents' bedrooms smoke detectors battery compartments were open and	M 336		

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M 336	Continued From page 4	M 336		

no batteries were inside. Administrator D attempted to test the smoke detectors and discovered they were not working. Administrator D contacted Maintenance Person G, who came to the home to check the smoke detectors.

During the tour Surveyor interviewed Administrator D and Maintenance Person G, and the following was reported:

Some of the smoke detectors in the home were interconnected and some were not. Administrator D reported staff likely removed the batteries from the smoke detectors so they would not have to hear the constant beeping. Maintenance Person G reported s/he learned that with the interconnected systems, the smoke detectors all need to be the same brand otherwise they do not operate correctly. Maintenance Person G replaced batteries in the smoke detectors and tested them. One of the smoke detectors in the home was still not working and Maintenance Person G contacted an electrician, who came to the home during the survey to rewire and replace any non-working smoke detectors. Administrator D reported s/he would follow-up with the house manager on the testing and maintenance of the smoke detectors in the home.