STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0014859	A. BUILDING: _____ B. WING _____	08/14/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WIND POINT VILLA ADULT FAMILY HOME	**314 JONSUE LANE RACINE, WI 53402**

(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 08/14/2026, Surveyor concluded an abbreviated survey at Wind Point Villa Adult Family Home. Two deficiencies were identified. Census: 4	M 000		
M 262	88.05(2)(a) DIFFICULTY WALKING If a resident is not able to walk at all or able to walk only with difficulty, or only with the assistance of crutches, a cane, or walker or is unable to easily negotiate stairs without assistance: 1. The exits from the home shall be ramped to grade with a hard surfaced pathway with handrails. 2. All entrance and exit doors and interior doors serving all common living areas and all bathrooms and bedrooms used by a resident not able to walk at all shall have a clear opening of at least 32 inches. 3. Toilet and bathing facilities used by a resident not able to walk at all shall have enough space to provide a turning radius for the resident's wheelchair and provide accessibility appropriate to the resident's needs. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure that there were two ramped to grade exits from the facility for 3 of 4 residents who utilized canes and walkers for mobility. The	M 262		

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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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WIND POINT VILLA ADULT FAMILY HOME	314 JONSUE LANE RACINE, WI 53402

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M 262	Continued From page 1 side exit door that contained a ramp that led down to the garage floor. The ramp did not have handrails. At the end of the ramp, residents would walk to a side door to exit the garage and the facility. The side door had a 1-inch rise to exit the facility. The exit was not ramped to grade. Findings include: On 08/14/2026, at 10:35 a.m., Surveyor toured the facility with Caregiver B and observed the following: - Resident 1 had a cane in his/her room. - Resident 2 had a wheeled walker sitting next to him/her, in his/her bedroom. - Resident 3 had a cane in his/her room. On 08/14/2026, at 10:45 a.m., Surveyor toured the facility with Licensee A and observed the following: The facility had 2 emergency exits. The following was identified: - One exit door, located through the living room, led to a ramp in the garage. - The ramp measured 5-foot, 5-inches from the beginning of the slope to where the ramp met the floor of the garage. - The ramp did not have handrails. - At the end of the ramp, the second exit door was approximately 18 feet to the outside door of the garage. The door was not ramped to grade. Surveyor observed approximately a 1-inch rise at the threshold of the exit door. On 08/14/2026, at 10:35 a.m., Resident 2 confirmed s/he utilized a wheeled walker to ambulate.	M 262		

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WIND POINT VILLA ADULT FAMILY HOME	314 JONSUE LANE RACINE, WI 53402

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M 262	Continued From page 2 On 08/14/2026, at 10:40 a.m., Caregiver B confirmed that Resident 1 utilized a wheeled walker, Resident 2 utilized a cane and Resident 3 utilized a cane. On 08/14/2026, at 10:50 a.m., Licensee A confirmed that the exit door, located through the living room, that led to a ramp in the garage, and out the side door, was one of the emergency exits. On 08/14/2026, at 1:20 p.m., Surveyor discussed the survey results with Licensee A. Licensee A was unaware of the specific code requirements regarding the ramp needing handrails. Licensee A stated s/he would resolve the exit concerns immediately.	M 262		
M 278	88.05(3)(b) FREE OF HAZARDS The home shall be free from hazards and kept uncluttered and free of dangerous substances, insects and rodents. This Rule is not met as evidenced by: Based on observation and interview, the provider did not safeguard residents who cannot fully guard themselves from environmental hazards. The clothes dryer was not completely vented with rigid metal tubing. Findings include:	M 278		

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M 278	Continued From page 3 On 08/14/2026 at 11:15 a.m., Surveyor toured the facility. While touring the provider's laundry room, Surveyor observed a flexible aluminum foil duct for dryer vent tubing. On 08/14/2026 at 11:18 a.m., Surveyor interviewed Licensee A and asked if the dryer had recent repairs. Licensee A stated s/he purchased a new dryer unit in February, and his/her maintenance person did the installation. On 08/14/2026 at 1:22 p.m., Surveyor showed Licensee A the flexible aluminum foil duct tubing. Licensee A confirmed the dryer contained flexible aluminum foil duct for dryer vent tubing. Licensee A stated when s/he had the dryer replaced s/he specifically requested rigid metal tubing. Licensee A was unaware that his/her maintenance person did not vent the dryer with rigid metal tubing.	M 278		