STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0009718	A. BUILDING: _____ B. WING _____	01/13/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CURTIS HALL	36100 GENESEE LAKE RD OCONOMOWOC, WI 53066

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N 000	Initial Comments On 01/13/2026, Surveyor conducted an abbreviated survey at Curtis Hall. Five deficiencies were identified. Census: 6	N 000		
N 346	83.32(3)(b) Rights of Residents: Confidentiality In addition to the rights under s. 50.09, Stats., each resident shall have all of the following rights: Confidentiality. Confidentiality of health and personal information and records, and the right to approve or refuse release of that information to any individual outside the CBRF, except when the resident is transferred to another facility or as required by law or third-party payment contracts and except as provided in s.146.82(2) and (3), Stats. The CBRF shall make the record available to the resident or the resident ' s legal representative for review. Copies of the record shall be made available within 30 days, if requested in writing, at a cost no greater than the cost of reproduction. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure the resident's right to confidentiality when confidential information regarding each of the 6 residents residing in the home was openly displayed in the kitchen area. Findings include: The facility is licensed as a Class AA (ambulatory) CBRF able to serve up to 7 residents within the	N 346		

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

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N 346	Continued From page 1 client group of developmentally disabled. Census on 01/13/2026 was 6. The kitchen, dining room and living room areas were combined into an open concept floor plan. On 01/13/2026 at 9:13 AM, Surveyor observed a large white board hung in the kitchen area. Six squares (1 for each resident) were taped off on the white board (Photo 1). Confidential information regarding the resident was displayed designated their square: Example 1- Resident 1 "Hello, I'm [Resident 1's first name] and I like to swing and go for walks. Talking to me with a low tone or whisper helps keep me regulated. If I start hitting myself, I need you to place your hand on top of my head and I'll stop. I also like to talk about my favorite foods (pancakes). Please don't repeat Friday with me because I like to work myself up." Example 2- Resident 2 "Hi, I'm [Resident 2's first name] and I like to listen to music on my green or blue cell phone. Tacos are my favorite food, If I seem like I might become dysregulated Takis will help. If I give you a thumbs up, then we're cool and I'm in a good mood. If I say go [sic], see dad [sic] before Saturday just remind me that maybe tomorrow [sic] I'll go see dad." Example 3- Resident 3 "Hey [sic] what's up, [sic] I'm [Resident 3's first name] and I like to help wherever I can. Sometimes I need a small reminder to let staff handle staff tasks. I like to draw and listen to music on YouTube sometimes. I like sensory drives and sonic [sic]. If I become dysregulated and shut down just give some space or a change	N 346		

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N 346	Continued From page 2 of face so that I can talk about how I'm feelings [sic]." Example 4- Resident 4 "Hi, I'm [Resident 4's first name] and I love to talk about different brands such as LG and Samsung. I like to play on my walkie talkie and pretend we're talking. I also like to watch my shows on tv and can find them myself with the remote. It helps me when you remind me to go to the restroom and that I am an adult. Please pay attention to me while eating so that I don't stuff my mouth." Example 5- Resident 5 "Well Hellooo [sic] there, I'm [Resident 5's first name] and sometimes I need to be reminded that everything is ok and that I'm safe. When prompting me to do hygiene I need you to hang around to make sure, [sic] I don't lay back down especially on school days. I prefer the flavor toothpaste when brushing my teeth. I like to listen to music in my room." Example 6- Resident 6 "Hey, how's it goin [sic] ! [sic] I'm [Resident 6's name], like curious George. I love pizza and a good burger. I also like sonic [sic] and Mario video games and I'm pretty good at handing in my devices by 9p [sic]. I struggle with trying new foods and needs reminders to at least try it. Remember to take my time and not stuff my mouth so I don't choke. At times I get off track and need to be reminded to think and say positive things." On 01/13/2026 at 12:42 PM, Surveyor discussed displaying confidential information with Program Coordinator A and Program Manager B. Program Coordinator A stated s/he would take it down.	N 346		

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N 359	Continued From page 3	N 359		
N 359	83.33(1)(a) Grievance procedure: information required A resident or any individual on behalf of the resident may file a grievance with the CBRF, the department, the resident ' s case manager, if any, the board on aging and long term care, Disability Rights Wisconsin, Inc., or any other organization providing advocacy assistance. The resident and the resident ' s legal representative shall have the right to advocate throughout the grievance procedure. The written grievance procedure shall include the name, address and phone number of organizations providing advocacy for the client groups served, and the name, address and phone number of the department ' s regional office that licenses the CBRF. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure the written grievance procedure included the name, address and phone number of organizations providing advocacy for the client groups served, and the name, address and phone number of the department's regional office that licensed the CBRF. Findings include: The facility is licensed as a Class AA (ambulatory) CBRF able to serve up to 7 residents within the client group of developmentally disabled. On 01/13/2026 at approximately 12:00 PM while touring the facility with Program Coordinator A,	N 359		

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N 359	Continued From page 4 Surveyor observed a posted combined resident rights/grievance procedure. The procedure outlined the provider's internal formal grievance resolution process but did not contain contact information for the Bureau of Assisted Living's Southern Region or developmentally disabled advocacy group(s). On 01/13/2026 at 1:20 PM, Surveyor reviewed the grievance procedure provided to each resident and/or their legal representative prior to or at time of admission with Program Coordinator A. The procedure matched the posted combined resident rights/grievance procedure. On 01/13/2026 at 12:42 PM, Surveyor discussed concern with grievance procedure with Program Coordinator A and Program Manager B and provided the name, address and phone number for the Bureau of Assisted Living's Southern Region: DQA/BAL SOUTHERN Region Office 201 E. Washington Ave, Rm E300 Madison, WI 53703 Phone: 608-264-9888 Fax: 608-264-9889 Email: DHSDQABALSRO@dhs.wisconsin.gov Program Coordinator A stated they would update the grievance procedure as soon as possible.	N 359		
N 481	83.43(1) Environment safe, clean, and comfortable Environment. The CBRF shall provide a living environment that is safe, clean, comfortable, and homelike. All common dining and living areas shall contain furnishings appropriate to the	N 481		

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N 481	Continued From page 5 intended use of the room. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure the living environment was clean and homelike. Findings include: The facility is licensed as a Class AA (ambulatory) CBRF able to serve up to 7 residents within the client group of developmentally disabled. On 10/13/2026 at 11:31 AM, Surveyor toured facility with Program Coordinator A and observed: Example 1- Resident 2's room -Approximately 13 smears of varying length and width of brownish-red substance, 2 rectangular shaped areas (approximately 10 inches long by 3 inches high and 4 inches long by 3 inches high of chipped paint and a curved line approximately 8 inches long of patches of a black substance on the wall where side of bed met the wall. Example 2- Resident 5's room -Approximately 12 areas of chipped paint varying in shape and size (from dime-sized to 50 cent piece sized), a cluster (approximately 8 inches in diameter) of 40 plus small holes, and 4 lines of numbers (containing 9-12 digits each) written in black marker on the wall where side of bed met the wall (Photo 3). Program Coordinator A stated Resident 5 picked at the paint, made the holes and wrote on the wall when s/he was in bed.	N 481		

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N 481	Continued From page 6 Example 3- 2nd floor bathroom -Walk-in shower's sliding door consisted of 2 sliding glass panels. The door's bottom track was covered with gray/greenish substance leading to a heavier amount of black substance middle of track where the 2 shower door's panels overlapped (Photo 4) -Rim of shower floor and corners of shower walls were soiled and discolored amber - dark brown (Photo 5) -3 strips double sided gray tape, (each approximately 2" wide and approximately 6", 10" and 12" in length), adhered to bathroom wall between door and toilet tank (Photo 6). -Bathroom ceiling vent was heavily covered with dust (Photo 7). Program Coordinator A stated resident's used the bathroom including the shower. On 01/13/2026 at 12:42 PM, Surveyor discussed concern regarding homelike environment with Program Coordinator A and Program Manager B. Program Manager B stated a week prior to 01/13/2026 Resident 2 picked at his/her lips causing them to bleed then probably smeared the blood on his/her bedroom wall. Program Coordinator A stated s/he was in Resident 2's room "not too long ago" and had not seen the marks on wall. Program Coordinator A stated quality assurance observations were conducted in the home monthly. Cross Reference: N0670 DHS 83.60(3) Habitable Room Window Coverings	N 481		

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N 507	Continued From page 7	N 507		
N 507	83.46(1)(f) Combustibles. Combustible materials shall not be placed within 3 feet of any furnace, boiler, water heater, fireplace or other similar equipment. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure combustible materials were not placed within 3 feet of the furnace. Findings include: The facility is licensed as a Class AA (ambulatory) CBRF able to serve up to 7 residents within the client group of developmentally disabled. On 01/13/2026 at 11:53 AM while touring the basement with Program Coordinator A, Surveyor observed the furnace. A chair with padded seat and back, a strip of wood trim and 4 plastic storage totes containing Christmas decorations were set within 3 feet of the furnace (Photos 10 and 11). On 01/13/2026 at 11:53 AM, Surveyor interviewed Program Coordinator A who stated the Christmas items were brought down to basement a couple of days prior to 01/13/2026 and s/he did not know how long the chair and trim had been there. On 01/13/2026 at 12:42 PM, Surveyor discussed concern regarding combustibles stored within 3 feet of the furnace with Program Coordinator A and Program Manager B. Program Coordinator A stated the items would be moved right away and quality assurance observations were conducted in the home monthly.	N 507		

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N 670	Continued From page 8	N 670		
N 670	83.60(3) Habitable room window coverings Window coverings. Every habitable room shall have shades, drapes or other covering material or device that affords privacy and light control. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure each resident bedroom's windows were covered with shades, drapes or other material to afford privacy and light control. Bedroom window coverings were missing from windows in 2 of 6 bedrooms observed. Findings include: The facility is licensed as a Class AA (ambulatory) CBRF able to serve up to 7 residents within the client group of developmentally disabled. On 01/13/2026 at 11:31 AM, Surveyor toured facility with Program Coordinator A and observed: -Resident 2's room-Window covering missing from 1 of 2 windows (Photo 8). -Resident 4's room- Window covering missing from 1 of 3 windows (Photo 9). On 01/13/2026 at 11:47 AM, Surveyor interviewed Program Manager B who stated Resident 4 took the curtains down a couple of days prior to 01/13/2026 so s/he [Program Manager B] put the curtains in the hallway closet next to Resident 4's room. Program Manager B showed Surveyor the curtains in the hallway closet. On 01/13/2026 at 12:42 PM, Surveyor discussed concern regarding missing window coverings with Program Coordinator A and Program Manager B.	N 670		

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N 670	Continued From page 9 Program Coordinator A stated s/he had been in Resident 2's room "not too long ago" and had not seen the curtains off the window. Program Coordinator A stated quality assurance observations were conducted in the home monthly. Cross Reference: N0481 DHS 83.43(1) Environment Safe, Clean, and Comfortable	N 670		