STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016374	A. BUILDING: _____ B. WING _____	R-C 02/04/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LAKE SHORE CEDAR LODGE	12440 WARPATH LN MINOCQUA, WI 54548

(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
{U 000}	INITIAL COMMENTS On 02/03/2026, Surveyor conducted a verification visit and complaint investigation (x4) at Lake Shore Cedar Lodge. Data collection continued through 02/04/2026. The deficiency identified in statement of deficiency (SOD) MZ3711, dated 09/18/2025, was not corrected. Three of 4 complaints were substantiated. Three deficiencies were identified. Two of 3 deficiencies were repeat violations, see SOD JFKQ11, dated 12/21/2023 and SOD MZ3711, dated 09/18/2025. Under statutory provisions of Wis. Stat. ch. 50. a $200 revisit fee is being assessed. Census: 14	{U 000}		
U 116	89.23(2)(a)2.a SERVICES SUFFICIENT SERVICES. Minimum required services. A residential care apartment complex shall have the capacity to provide all of the following services to all tenants, either directly or under contract: a. Supportive services: meals, housekeeping in tenants' apartments, laundry service and arranging access to medical services. In this subparagraph, "access" means	U 116		

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

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U 116	Continued From page 1 arranging for medical services and transportation to medical services. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure tenants received transportation for medical and shopping services. This is a repeat deficiency (cited for the 2nd time). See Statement of Deficiency (SOD) JFKQ11, dated 12/21/2023. Findings include: The provider is licensed to care for 21 tenants. Between 10/15/2025 and 01/26/2026, the Department received 4 complaints alleging concerns with training, staffing and transportation. On 02/03/2026 at approximately 9:49 AM, Surveyor interviewed Tenant 1. Surveyor asked about transportation. Tenant 1 stated, "Transportation is a big problem." Tenant 1 reported that the provider did not have a working van and tenants could not depend on the provider for transportation to medical appointments or shopping. Tenant 1 indicated that staff members have used their personal vehicles in the past to transport tenants to medical appointments and shopping. Tenant 1 commented that transportation has been a problem for the past four months. On 02/03/2026 at approximately 10:34 AM, Surveyor interviewed Tenant 3. Surveyor asked about transportation. Tenant 3 reported, "When I came here, they had a van. I don't think that is the	U 116		

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U 116	Continued From page 2	U 116		

case now. I usually make my own transportation arrangements to appointments. I don't think the van is working."

On 02/03/2026 at approximately 2:00 PM, Surveyor interviewed Tenant 2. Surveyor asked about transportation. Tenant 2 stated, "We are in another transition; there is no van." Tenant 2 indicated that the van has not been working for several months. Tenant 2 commented that tenants have had shopping trips and medical appointments canceled because the van was not working.

On 02/03/2026 at approximately 2:24 PM, Surveyor interviewed Team Lead (TL) B. Surveyor asked about transportation. TL B reported that transportation had been down for at least four months. TL B indicated that staff have used their personal vehicles occasionally to take tenants to medical appointments and shopping. TL B commented that there were not a lot of transportation resources available to tenants, especially over the weekends. TL B reported that shopping trips and medical appointments have been canceled over the past four months due to not having available transportation.

On 02/03/2026 at approximately 9:15 PM, Surveyor interviewed Caregiver D via telephone. Surveyor asked about transportation. Caregiver D stated, "They don't have transportation." Caregiver D indicated that the van that used to provide transportation to medical appointments and shopping was not working. Caregiver D commented, "I have heard tenants complain about not having transportation." Caregiver D indicated that there were not a lot of transportation resources available, especially on the weekends.

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U 116	Continued From page 3 On 02/04/2026, Surveyor reviewed service agreements for Tenant 1 and Tenant 3. Tenant 1 was admitted on 08/30/2017. Tenant 3 was admitted on 07/28/2024. Both service agreements, read in part, "The Community [sic] will provide a program of planned activity opportunities for Community participation and services designed to meet your physical, social and spiritual needs. A weekly tea/coffee sociable. Weekly shopping, times and dates for shopping may be revised due to the need of medical transport, weather, holidays and other circumstances. Additional fees may be charged depending on the type of activity...The Community will provide transportation for the Tenant in order to meet necessary medical needs, however if the Community is unable to provide transportation due to the vehicle already being utilized [sic] the Community will arrange for an alternative transportation. Additional charges may apply." On 02/04/2026 at approximately 10:40 AM, Surveyor interviewed Care Manager (CM) E via telephone. CM E verified working with tenants as a care manger through Lakeland Managed Care Organization (MCO). Surveyor asked about transportation. CM E indicated, "Transportation has been a problem for the past several months." CM E stated that tenants have had to miss medical appointments and shopping outings due to not having transportation. CM E reported that CM E had arranged transportation for tenants on occasion, but the provider was ultimately responsible for providing and/or arranging transportation for tenants. On 02/04/2026 at approximately 1:00 PM, Surveyor interviewed ED A and TL B via	U 116		

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U 116	Continued From page 4 telephone. Surveyor asked about transportation. Both ED A and TL B verified the facility van had been broken down for approximately four months and tenants have missed medical appointments and shopping trips. ED A and TL B reported that it was the provider's responsibility to provide and/or arrange transportation for tenants. ED A and TL B both agreed that it would be ideal to have a working facility van with a designated driver. The provider did not ensure tenants received transportation for medical and shopping services.	U 116		
U 120	89.23(2)(b)1. SERVICES SUFFICIENT SERVICES. Staff to meet tenant needs. 1. The number, assignment and responsibilities of staff shall be adequate to provide all services identified in the tenants' service agreements. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure sufficient services to meet the care needs of Tenants. Findings include: The facility serves up to 21 tenants and is connected to a community based residential facility (CBRF). Both facilities share caregivers	U 120		

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U 120	Continued From page 5 during two 12-hour shifts (7 AM to 7 PM; 7 PM to 7 AM). Between 10/15/2025 and 01/26/2026, the Department received 4 complaints alleging concerns with staffing and care concerns. On 02/03/2026 at approximately 9:49 AM, Surveyor interviewed Tenant 1. Surveyor asked about cares and staffing. Tenant 1 reported, "We have one caregiver on at night for the entire building sometimes." Tenant 1 indicated that caregivers worked between the [RCAC (Residential Care Apartment Complex)] and [CBRF]. Tenant 1 stated, "Tenants get ignored." Tenant 1 stated, "We ring for help and staff don't come to help at times. I use my call light at 10:00 PM sometimes and staff don't respond." Tenant 1 commented, "[Tenant 3] doesn't always get help at night." On 02/03/2026 at approximately 10:38 AM, Surveyor interviewed Tenant 3. Surveyor asked about cares and staffing. Tenant 3 commented, "I think my needs are met; There are times at night when I have to wait to get changed and sometimes I wait until the morning." Tenant 3 stated that s/he may have to wait several hours for help on occasion, depending on how many staff were working. Tenant 3 stated that staff were doing the best they could. Tenant 3 reported that there was usually one staff working the 7:00 PM to 7:00 AM shift and covering both RCAC and CBRF. On 02/03/2026 at approximately 11:40 AM, Surveyor interviewed Executive Director (ED) A. Surveyor asked about staffing and cares. ED A reported the following: Caregivers worked between the RCAC and CBRF, two caregivers	U 120		

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U 120	Continued From page 6	U 120		

worked 7:00 AM to 7:00 PM and two caregivers and sometimes one caregiver worked 7:00 PM to 7:00 AM. ED A indicated that Caregiver D worked the night shift alone at least four nights per week. ED A stated that s/he was working on finding a partner for Caregiver D. ED A commented that Tenant 3 used his/her call pendant on average 20 times a day. ED A indicated that they were working with Tenant 3's family and assessing Tenant 3 for CBRF placement. ED A reported that call lights do not always get answered timely depending on how busy the staff were.

On 02/03/2026 at approximately 2:24 PM, Surveyor interviewed Team Lead (TL) B. Surveyor asked about staffing and Tenant 3's cares. TL B reported, "Staffing could be better." TL B stated, "At times, the whole building (RCAC and CBRF) was staffed with one caregiver. TL B indicated that Caregiver D worked alone on average four nights per week. TL B stated that call lights were not always answered timely. TL B stated, "[Tenant 3] needs more help and sometimes [his/her] call light doesn't get answered because there is only one staff working." TL B commented, "Ideally, there should be two caregivers in the CBRF and one caregiver in the RCAC at all times."

On 02/03/2026, Surveyor reviewed Tenant 3's record. Tenant 3 was admitted on 07/28/2024. Tenant 3's diagnoses included: Dementia and Left leg amputee (due to car accident). Tenant 3's individual service plan (ISP) noted that in regards to Mobility Assist, Tenant 3 required "Stand by Assist (of) 2" and in regards to Transfer Assist, Tenant 3 required "Assist (of) 2." According to observation notes, dated 01/26/2026, "Resident is becoming harder to transfer with one staff member. [S/He] is starting to need 2 persons [sic]

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assist. Resident does not make the attempt to help transfer will call [his/her] Provider [sic]. Will calll family and notify them." Observation notes, dated 01/22/2026, reported, "Resident needing more transfer assistance then normal. Resident stated [his/her] shoulder and knee are always hurting. Resident called at least 5 times today for writer to put lotion then pain cream on shoulder and knee. Residents [sic] right shoulder is very irritated from all the different pain creams and patches resident has writer and caregivers put on [him/her] throughout the day and night."

On 02/03/2026, Surveyor reviewed the schedule (December 2025 to January 2026). Per the schedule, caregivers worked 12-hour shifts (7:00 AM - 7:00 PM; 7:00 PM - 7:00 AM). The schedule depicted 2 caregivers worked 7:00 AM to 7:00 PM and covered both RCAC and CBRF. The schedule noted that 2 caregivers and sometimes 1 caregiver (on at least two occassions) worked 7:00 PM to 7:00 AM and covered both RCAC and CBRF.

On 02/03/2026 at approximately 9:15 PM, Surveyor interviewed Caregiver D via telephone. Surveyor asked about staffing. Caregiver D reported that s/he was hired on 12/31/2025. Caregiver D indicated that s/he did not have a work partner and Caregiver D worked alone at least four nights per week. Caregiver D commented that s/he worked the 7:00 PM to 7:00 AM shift and s/he spent most of the shift on the CBRF side, but would make rounds every 2 hours or so on the RCAC side. Caregiver D commented, "They are looking for a partner for me, but generally, I work alone." Surveyor asked about Tenant 3's cares. Caregiver D stated, "I can't get to [Tenant 3] a lot when [s/he] rings because of the needs of [CBRF] residents. Lately,

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U 120	Continued From page 8 it's been hard to make it to the [RCAC] side." Caregiver D commented, "The [CBRF] should have 2 staff at all times and the [RCAC] should have 1 staff at all times." On 02/04/2026 at approximately 1:00 PM, Surveyor interviewed ED A and TL B via telephone. Surveyor asked about staffing. ED A reported that since becoming the Executive Director on 01/08/2026, ED A had been working on hiring and training new caregivers. Both ED A and TL B confirmed that Caregiver D worked alone at least four nights a week and covered the entire building (both CBRF and RCAC). Both ED A and TL B commented that they were trying to hire more staff and ideally, the CBRF needed 2 caregivers per shift and the RCAC needed 1 caregiver per shift and a full-time housekeeper. The provider did not ensure sufficient services to meet the care needs of Tenants.	U 120		
{U 134}	89.23(4)(d)1. SERVICES PROVIDER QUALIFICATIONS. Staff training. All facility staff shall have training in safety procedures, including fire safety, first aid, universal precautions and the facility's emergency plan, and in the facility's policies and procedures relating to tenant rights. This Rule is not met as evidenced by:	{U 134}		

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{U 134}	Continued From page 9 Based on record review and interview, the provider did not ensure 1 of 3 staff reviewed completed training in fire safety. This is a repeat deficiency (cited for the 3rd time). See Statement of Deficiency (SOD) JFKQ11, dated 12/21/2023 and SOD MZ3711, dated 09/18/2025. Findings include: The provider is licensed to care for 21 tenants. Between 10/15/2025 and 01/26/2026, the Department received 4 complaints alleging concerns with training, staffing and transportation. On 02/03/2026, Surveyor reviewed Caregiver C's file. Caregiver C was hired on 07/25/2025. Caregiver C's file did not contain documentation to indicate s/he completed the following required training: fire safety. On 02/03/2026, at approximately 3:17 PM, Surveyor interviewed Executive Director (ED) A. Surveyor asked about trainining records for Caregiver C. ED A verified Caregiver C's hire date and confirmed Caregiver C did not complete fire safety training. On 02/04/2026, Surveyor reviewed the UW Green Bay training registry. The training registry did not indicate Caregiver C completed fire safety training. On 02/04/2026 at approximately 1:00 PM, Surveyor interviewed ED A and Team Lead (TL) B via telephone. ED A and TL B verified that all training records were provided to Surveyor and Caregiver C did not complete fire safety training.	{U 134}		

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{U 134}	Continued From page 10 ED A indicated that ED A was working with staff to complete all required training. The provider did not ensure 1 of 3 staff reviewed completed training in fire safety.	{U 134}		