

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0018079	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/28/2026
NAME OF PROVIDER OR SUPPLIER ELIZABETH II		STREET ADDRESS, CITY, STATE, ZIP CODE 518 ELIZABETH STREET WATERFORD, WI 53185		
(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 08/28/2026, Surveyor conducted an abbreviated survey at Elizabeth II. Two deficiencies were identified. Census: 4	M 000		
M 424	88.06(3)(f) REVIEW OF ISP The individual service plan shall be reviewed at least once every 6 months by the licensee, the resident or the resident's guardian, the service coordinator, if any, the designated representative, if any, the placing agency with the resident participating in a manner appropriate for the resident's level of understanding and method of communication. This review is to determine continued appropriateness of the plan and to update the plan as necessary. A plan shall be updated, in writing, whenever the resident's needs or preferences change substantially or when requested by the resident or the resident's guardian. This Rule is not met as evidenced by: Based on record review and interview, the provider did not update the Individual Service Plan (ISP) for 1 of 1 resident (Resident 1) when the resident's needs or preferences changed. Resident 1 was admitted on 05/04/2021.	M 424		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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M 424	Continued From page 1 Resident 1 utilized a bed bar. Resident 1's ISP was not updated to reflect s/he was using durable medical equipment (DME), a bed bar, to transfer in and out of his/her bed. Findings Include: On 08/28/2026 at approximately 9:40 a.m., Surveyor toured the facility with Lead Caregiver (LCG) B. Surveyor observed a bed bar on Resident 1's bed. Surveyor checked the stability of the bed bar and observed that it moved from side to side. On 08/28/2026 at approximately 9:41 a.m., LCG B stated, "That's loose." On 08/28/2026 at 9:42 a.m., LCG B stated Resident 1 received the bed within the past six months, and his/her family wanted the bed bar for Resident 1's safety. LCG B stated the bed bar helped Resident 1 get in and out of bed. LCG B confirmed Resident 1 had a walker and a wheelchair. On 08/28/2026 at approximately 10:32 a.m., Surveyor interviewed Administrator A, who stated Resident 1 had gotten the bed within the past six months, and his/her family wanted the bed bar for Resident 1's safety. On 08/28/2026 at 10:35 a.m., Surveyor and Administrator A reviewed Resident 1's current ISP in Resident 1's electronic medical record, with the search dates from 08/28/2025 to 08/28/2026. Administrator A confirmed s/he could not locate a physician's order for the bed bar/DME. Administrator A also confirmed that the bed bar/DME was not in Resident 1's ISP.	M 424		

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M 570	Continued From page 2	M 570		
M 570	88.10(3)(I) 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 interviews, the provider did not ensure the resident's right to a safe physical environment. The dryer was vented with semi-rigid material. There was a fold up mattress/bed within approximately 9 inches of the furnace. Findings include: On 08/28/2026 at 9:40a.m., Surveyor toured the physical environment with Lead Caregiver (LCG) B and observed the following: DRYER TUBING On 08/28/2026 at 9:44 a.m., Surveyor observed the dryer's vent was made of semi-rigid material approximately 6-inches long. According to FEMA (Federal Emergency Management Agency), "Facts about home	M 570		

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M 570	Continued From page 3 clothes dryer fires...2,900 home clothes dryer fires are reported each year and cause an estimated 5 deaths, 100 injuries, and \$35 million in property loss...Maintenance-Inspect the venting system behind the dryer to ensure it is not damaged or restricted. Put a covering on outside wall dampers to keep out rain, snow, and dirt. Make sure the outdoor vent covering opens when the dryer is on. Replace coiled-wire foil or plastic venting with rigid, non-ribbed metal duct. (Source: https://www.usfa.fema.gov/statistics/reports/fire-causes/ (Retrieval date 08/28/2026))" OBJECTS NEAR FURNACE On 08/28/2026 at 9:44 a.m., Surveyor toured the furnace room and observed a fold up mattress/bed within approximately 9 inches of the furnace. On 08/28/2026 at 9:45 a.m., Surveyor interviewed LCG B, who confirmed that there was a fold up mattress/bed within approximately 9 inches of the furnace. LCG B stated one of the caregivers worked three full days in a row, so s/he brought in a mattress to sleep on. LCG B stated, "That's where s/he stores it. I don't like it there. It's too close to the furnace. But I don't know where else s/he would put it." On 08/28/2026 at 11:55 p.m., Surveyor shared above observations with Administrator A. Administrator A acknowledged the semi-rigid dryer vent was not in compliance. Administrator A stated the maintenance man misunderstood the kind of ridged vented material that was required on the dryer units. Administrator A stated s/he would work with maintenance to get that corrected immediately. Administrator A stated s/he would have the mattress moved from the	M 570		

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M 570	Continued From page 4 furnace area as soon as possible.	M 570			