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
	0017977	A. BUILDING: _____ B. WING _____	R-C 04/03/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BETHEL RIPON NORTH	530 NORTH UNION STREET RIPON, WI 54971

(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
{N 000}	Initial Comments A verification visit was conducted at Bethel Ripon North on 03/31/2025 with additional information gathered through 04/03/2025. As a result of this visit the previous deficiencies were corrected and two new deficiencies were identified during the visit. Per state statutes a $200.00 revisit fee was assessed. Census: 7	{N 000}		
N 427	83.38(1)(c) Leisure time activities. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the resident ' s highest level of functioning. In addition to the assessed needs as determined under s. DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Leisure time activities. The CBRF shall provide a daily activity program to meet the interests and capabilities of the residents. Employees shall encourage and promote resident participation in the activity program. The CBRF shall develop and post the activity schedule in an area available to residents. This Rule is not met as evidenced by: Based on observation and interviews, the provider did not ensure leisure time activities were provided to meet the needs of the residents. Findings include: On 03/31/2025, Surveyor observed a December	N 427		

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

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N 427	Continued From page 1 2024 activity calendar posted on a bulletin board located outside the kitchen area. No other activity calendar or schedule was located or posted within the facility. On 03/31/2025 from 8:45 AM until 12:00 PM Surveyor made observations while in the facility. Observations showed no activities were offered to the residents. On 03/31/2025 at 10:30 AM, Surveyor interviewed Resident 3. Resident 3 was sitting in her/his bedroom. Resident 3 stated, "There's nothing to do here. A lot of the staff sit around on their cell-phones or watch TV...When [Former Caregiver F] was here [s/he] would do activities with us, but [s/he] quit working here." Resident 3 said s/he would participate in activities if the facility offered them. Surveyor then asked if there was an activity schedule available to inform residents of activities occurring. Resident 3 stated, "I haven't seen a current activity schedule or calendar." On 03/31/2025 at 10:45 AM, Surveyor interviewed Resident 2 regarding the activity program. Resident 2 stated, "We don't do any activities here. I will ask [Resident 4] to play cards with me, but I want to do something else other then play cards." Resident 2 verified facility staff to not initiate, promote of encourage residents to participate in activities. Resident 2 stated, "A volunteer comes on Tuesdays around 1:00 PM to play games, but that's it...I want to do other things." Resident 2 said s/he would participate in activities if the facility offered them. Surveyor then asked if there was an activity schedule available to inform residents of activities occurring. Resident 2 stated, "No, I haven't seen an activity schedule."	N 427		

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N 427	Continued From page 2 On 03/31/2025 at 11:35 AM, Surveyor interviewed Caregiver G regarding the facility's activity program. Caregiver G was unaware where the facility's activity calendar/schedule was located or if one was posted. Surveyor pointed out an activity calendar dated December 2024 was posted outside the kitchen area. Caregiver G verified the activity calendar posted was from December 2024 and there was no current activity calendar/schedule posted. Caregiver G stated, "I will do activities with the residents once in a while...There was a caregiver that used to work here that would initiate activities with the residents, but [s/he] stopped working here over a month ago." On 04/03/2025 at 11:05 AM, Surveyor shared the above information with Administrator A. Administrator A indicated s/he did find a volunteer to come to the facility on Tuesdays to play games with the residents and stated, "I will be doing an all staff in-service on activities."	N 427		
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 intended use of the room. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure a living environment that was safe, clean, comfortable and homelike for residents.	N 481		

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N 481	Continued From page 3 Findings include: On 03/31/2025 at approximately 10:15 AM, Surveyor toured the facility and observed the following: *The living room and dining room had marred/scuffed walls *Heavy dust accumulation on two ceiling vents (one outside the kitchen area and one outside the shower room) *The main bath/shower room toilet bowl was stained *A linen closet located across from the main bath/shower room was broken *The handrail across from the mechanical room was loose and peeling away from the wall *Resident 3's toilet bowl was stained *Resident 4's closet door was broken *Resident 5's toilet bowl was stained *Resident 5's toilet seat was broken and cracked with sharp edges On 03/31/2025 at 10:30 AM, Surveyor interviewed Resident 3. Resident 3 stated, "My toilet bowl is filthy. Staff haven't cleaned it in months." On 03/31/2025 at 11:30 AM, Surveyor shared the above information with Caregiver G. Caregiver G acknowledged the above information and indicated s/he has informed management about the closet doors and Resident 5's toilet seat. On 03/31/2025 at approximately 11:15 AM, Surveyor spoke with Administrator A and shared the above information. Administrator A indicated the toilet bowl staining was due to a lime build up and the facility has been dealing with the lime	N 481		

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N 481	Continued From page 4 since they purchased the building. On 04/02/2025 at 12:02 PM, Surveyor received an email from Administrator A with a correspondence email between Administrator A and Licensee H. Licensee H wrote the following to Administrator A on 04/02/2025 at 10:27 AM, "Since the weather is a little bearable, I have directed the maintenance crew to give Bethel Assisted Living North & South Ripon a facelift...painting the walls. Some closet doors will be replaced. The renovation should take about one week. No resident will be displaced while the renovation is taking place."	N 481		