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
	0016620	A. BUILDING: _____ B. WING _____	C 10/29/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
1 VILLARD STREET MANOR	5277 N 29TH STREET APT 1 MILWAUKEE, WI 53208

(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 10/29/2025, Surveyors completed a complaint survey at 1 Villard Street Manor. As a result, 3 deficiencies were identified. One complaint was substantiated. Census: 3	M 000		
M 204	88.03(8)(a) MONITORING OF HOME The licensee shall comply with all department and licensing agency request for information about residents, services or operation of the home. This Rule is not met as evidenced by: Based on observation and interview, the provider did not comply with Department requests for information during the survey process. Licensee A refused to provide Surveyors with Resident 3's records. Findings include: On 10/29/2025, at approximately 10:00 AM, Surveyors observed a bedroom in the facility with Resident 3's belongings and his/her door containing physician appointment after visit summaries. On 10/29/2025, at approximately 10:10 AM, Surveyors spoke with Licensee A, on speakerphone, while at the facility. Surveyors requested the complete resident record for Resident 3. Licensee A reported s/he would not be providing the record for Resident 3 and explained Resident 3 did not live in the facility.	M 204		

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

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M 204	Continued From page 1 Licensee A reported Resident 3 lived in his/her certified apartment upstairs. Licensee yelled and screamed at the Surveyors. Licensee A stated, "[Resident 3] does not live there that is not his/her home. S/he lived upstairs, and s/he had problems walking so I have him/her stay downstairs." Surveyor then asked why Resident 3 had clothing in the drawers and documents on the front of the room door with Resident 3's name on it. Licensee A became upset and yelled, "That is not his/her home, s/he did not live there, s/he lived in the certified home upstairs." Surveyor informed Licensee A that s/he could not move residents from a certified home to a state licensed facility without giving notice. Licensee A became upset and stated, "Get out of my facility right now before I call the cops on you." Surveyor then responded with, "So what I hear you saying is that you will not be providing the entire record for Resident 3." Licensee stated, "No, I'm not giving you anything and you can get out right now before I call the cops on you." Surveyor then advised Licensee A s/he was impeding the survey process as the impeding the survey process could lead to the facility's license being revoked. Surveyor then asked Caregiver C if s/he had provided cares for Resident 3 in the licensed facility, apartment 1. Caregiver C responded with a head nod with the motion of up/down, which indicated yes. Licensee A remained on the speakerphone and advised Caregiver C not to answer the Surveyors' questions. Licensee A continued to raise his/her voice loudly and stated, "Get out! Get out! Get out right now, before I call the cops on you." Surveyors exited the facility.	M 204		
M 276	88.05(3)(a) Homelike Environment An adult family home shall be safe,	M 276		

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M 276	Continued From page 2 clean and well-maintained and shall provide a homelike environment. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure a safe, clean, and well maintained homelike environment for 3 of 3 residents in the home. Resident 1's, Resident 2's and Resident 3's bedrooms contained grey/black matter similar to dust and mold on all the walls, baseboards, and ceiling fans. The kitchen oven contained brown rust-like matter similar to burnt food, yellow and brown sticky substance on the walls similar to grease and black matter on the baseboards similar to dirt. Findings include: On 08/15/2025, the department received a complaint regarding concerns of the cleanliness of the home. On 10/29/2025, at approximately 9:40 AM, Surveyors toured the facility and observed the following: Surveyors observed approximately 7 black bags filled with clothing sitting in the dining room area against the wall. Resident 1's bedroom: -The front of the door was missing the trim and contained chipped paint that was approximately	M 276		

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M 276	Continued From page 3	M 276		

12 inches in length and 3 1/8 inches in width.
-The room door handle had black stains on the front and back of the door.
-The vent above the door contained a black matter similar to mold.
-Behind the room door, the trim was missing.

Resident 2's bedroom:
-The trim was missing from the door frame on the inside of the room.
-The surface of the door contained black and brown matter similar to dirt.
-The white ceiling fan contained a dark grey matter similar to dust.
-The blinds on the window above the bed contained broken blind slats.
-The room closet contained 6 cardboard boxes piled on top of the Resident 2's personal items.

Resident 3's bedroom:
-The window to the left of the room was broken and contained a t-shirt and towel in the window seal.
-The window ledged contained dark black matter similar to mold.
-The blinds on the window contained a light brown matter similar to feces.
-Approximately 8 window blind slats were broken.
-All four walls and ceiling contained yellow and brown splatters.
-The baseboards in the room were full of black and brown stains similar to dirt and dust.
-The room door contained black stains on the front and back of the door.
-The vent above the room door contained a dark grey matter similar to dust spreading to the surface of the wall.
-The closet door to the room did not close and the closet smelled of urine.
-The linen closet located in Resident 3's room

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M 276	Continued From page 4 contained a blue bag full of linen on the floor of the closet and loose linen laying directly on the floor. -There was a hole in the wall by the closet measuring approximately 3 inches in length and approximately 1 ¼ inches in width with exposed wires. -The wall on the right side of the bed contained a dented vent with black and brown stains. -The wall at the head of the bed contained chipped paint. -The blind slats on the window near the closet were broken. Kitchen: -Inside the bottom of the oven was a brown rust like material similar to burnt food. -The front of the oven door contained a large brown sticky substance similar to grease. -All of the walls in the kitchen were full of yellow, black, and brown matter similar to grease. -The baseboards in the kitchen were full of grey matter similar to dust. -The ceiling fan in the kitchen was full of a grey matter similar to dust. -The kitchen cabinet door under the sink area does not close. -The lower cabinet unit contained an empty space where the drawer should have been. Medication Closet: -The medication closet door contained several holes on the front of the door. On 10/29/2025, at approximately 10:10 AM, Licensee A verbally instructed Surveyors to leave the facility and declined to respond to Surveyors' requests for information.	M 276		

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M 550	Continued From page 5	M 550		
M 550	88.10(3)(b) Privacy Privacy. To have physical and emotional privacy in treatment, living arrangements and in caring for personal needs, including toileting, bathing and dressing. The resident, the resident's room, any other area in which the resident has reasonable expectation of privacy, and the personal belongings of a resident shall not be searched without the resident's permission or permission of the resident's guardian except when there is reasonable cause to believe that the resident possesses contraband. The resident shall be present for the search. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure 3 of 3 residents had physical privacy in their home. Surveyors observed face sheets and after visit summaries on the front of Resident 1's, Resident 2's, and Resident 3's doors. Findings Include: On 10/29/2025, at approximately 9:40 AM, Surveyors observed a face sheet in a black bin attached to Resident 1's door. The face sheet contained a picture of Resident 1 along with Resident 1's date of birth, date of admission and diagnoses. Surveyors observed a face sheet for Resident 2. The face sheet resided in a black bin that was attached to the front of Resident 2's door. The face sheet contained a picture of Resident 2 along with Resident 2's date of birth, date of admission, and diagnoses. Surveyors	M 550		

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M 550	Continued From page 6 observed Resident 3's door to contain multiple after visit summaries sitting in a black bin attached to the front of Resident 3's door. The after visit summaries contained Resident 3's name, hospital service dates, diagnoses, and treatments surrounding the visits. On 10/29/2025, at approximately 10:00 AM, Surveyors interviewed Licensee A regarding the documents on Resident 1's , Resident 2's, and Resident 3's doors. Licensee A declined to discuss the findings with Surveyors. Licensee A yelled at Surveyors and instructed Surveyors to leave his/her facility.	M 550		