STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017028	A. BUILDING: _____ B. WING _____	R 05/27/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PECAN HOUSE	**2406 PECAN STREET GREEN BAY, WI 54311**

(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 05/21/2026 with additional information gathered through 05/27/2026, Surveyors conducted a verification visit at Pecan House. One (1) of 2 previous deficiencies was corrected. One (1) of 2 was a repeat violation for a third time. See Statement of Deficiency (SOD) TPK612, dated 09/03/2025; and TPK613, dated 01/07/2026. Under statutory provisions of WI Stat. Ch. 50 a $200 revisit fee is being assessed. Census: 3	{M 000}		
{M 410}	88.06(3)(d) INDIVIDUAL SERVICE PLAN The individual service plan shall contain at least the following: This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 3 of 3 residents (Resident 1, Resident 2 and Resident 3) individual service plans (ISP) included all of the following: 1. A description of the services the licensee will provide to meet assessed needs. 2. Identification of the level of supervision required in the home and community. 3. A description of services provided by outside agencies. 4. Identification of who will monitor the plan. 5. Signed statement of agreement.	{M 410}		

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

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{M 410}	Continued From page 1 Resident 1 admitted to the home in 2020 and his/her ISP did not contain all of the required information. Resident 2 admitted to the home on 07/02/2025 and his/her ISP did not contain all of the required information. Resident 3 had an unknown admission date and his/her ISP did not contain all of the required information. This requirement is being cited for the third time. See Statement of Deficiency (SOD) TPK612, dated 09/03/2025; and TPK613, dated 01/07/2026. Findings include: The provider is licensed to care for up to 4 residents in the client groups of developmentally disabled, advanced age and emotionally disturbed/mental illness. On 05/21/2026 at 9:40 AM, Surveyors attempted to conduct a verification visit at the home. Upon arrival, Surveyors were met by House Manager (HM) A who immediately stated, "I don't have time for this today. I'm leaving for a bunch of appointments." Surveyors entered the home and explained to HM A and Administrator (ADM) C who was sitting in the living room along with Resident 1, Resident 2 and Resident 3 that a verification visit was being conducted to verify compliance with the previous deficiencies. Administrator (ADM) C stated, "We really don't have time for this today. They all have appointments. Can you come back today at 1:00 PM?" ADM C then stated, "Wait, I won't be	{M 410}		

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{M 410}	Continued From page 2	{M 410}		

available at 1:00 PM either." Surveyors explained visits to the home are not scheduled and ADM C acknowledged s/he knew that. ADM C reported s/he had all of the required documentation but did not have the information with him/her. Surveyors explained to ADM C that Surveyor will send an email with the requested documentation. ADM C provided his/her updated email address and phone number to contact him/her.

(Surveyor note: Surveyors were unable to fully access the home due to HM A and ADM C's statements indicating they did not have time and were leaving with all residents for appointments.)

On 05/21/2026 at 1:20 PM, Surveyor sent an email to ADM C requesting documentation to include Resident 1, Resident 2 and Resident 3's ISPs. Surveyor requested the documentation be emailed by 05/21/2026 at 4:30 PM.

As of 4:30 PM on 05/21/2026, no information was received from ADM C.

On 05/22/2026 at 8:10 AM, Surveyor contacted ADM C via phone. Surveyor inquired about the email that was sent to him/her on 05/21/2026 at 1:20 PM with the requested documentation. ADM C acknowledged s/he received the email and stated, "I was busy." Surveyor inquired about an email s/he sent to Surveyor on 03/13/2026 at 1:45 PM with attachments titled "SIX-MONTH PROGRESS REVIEW" for Resident 1 and Resident 2 with handwritten dates of "Jan 2026" and "Jan 1, 2026." ADM C confirmed the reviews are Resident 1 and Resident 2's ISPs that are currently in place as of Surveyor's onsite visit. S/he stated, "That is what we use for ISPs." S/he reported s/he emailed them back in March 2026 in response to the previous deficiencies from

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{M 410}	Continued From page 3 01/17/2026. ADM C verified Resident 1 and Resident 2 have a managed care organization (MCO) and legal guardian. S/he acknowledged Resident 1 and Resident 2's ISPs did not contain signatures from all parties involved in developing the plan. ADM C stated, "I did not know they needed to sign them." ADM C also confirmed Resident 2 continues to go out into the community unsupervised and stated, "[S/he] is allowed to go wherever. We just have [him/her] sign out." Surveyor requested Resident 3's ISP be emailed by 12:00 PM on 05/22/2026. As of 12:00 PM on 05/22/2026, no information was received from ADM C. On 05/26/2026 at 10:44 AM, Surveyor attempted to contact ADM C via phone but was unsuccessful. On 05/26/2026 at 10:51 AM, Surveyor sent a follow up email to ADM C requesting documentation be emailed by 05/26/2026 at 12:00 PM. As of 12:00 PM on 05/26/2026, no information was received from ADM C. On 05/26/2026 at 3:04 PM, Surveyor sent an additional email to ADM C requesting an exit conference on 05/27/2026 at 9:00 AM. Surveyor also requested remaining documentation be emailed by the end of the day on 05/26/2026. At 4:19 PM, Surveyor contacted ADM C via phone. S/he confirmed s/he received Surveyor's email and stated, "I've been on the go all day with appointments. I am on my last one now." When Surveyor inquired about Resident 3's ISP, ADM C stated his/her "ISP is just like [Resident 1] and	{M 410}		

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{M 410}	Continued From page 4 [Resident 2's] and do not contain signatures." Surveyor requested Resident 3's ISP be emailed by 05/26/2026, end of day. As of the end of day on 05/26/2026, no information was received from ADM C. On 05/27/2026 at 9:00 AM, Surveyor interviewed ADM C. When Surveyor inquired about the requested information, ADM C stated "I texted you the photos early this morning." Surveyor informed ADM C no information was received. ADM C resent the documentation to include Resident 3's "SIX-MONTH PROGRESS REVIEW." Review of facility documentation titled, "SIX-MONTH PROGRESS REVIEW" for Resident 1 and Resident 2 emailed to Surveyor on 03/26/2026 by ADM C included the following: RESIDENT 1 Resident 1's ISP was "prepared by" ADM C with a "Six-month review date" of "Jan 2026" and included the following: - "Medical/Medication Changes: At time of review no medical changes." - "Behavioral Concerns or Changes: [Resident 1] continues to "talk" to people at [his/her] window in the middle of the night." - "Daily Schedule/Routine Changes: No changes to [his/her] routine." - "Other Changes/Concerns: None at this time." - "Review Goal Summary/Performance Outcome Objectives - Comment on average percentage of accomplishment and any needs for changes/modifications: [Resident 1] still needs reminders to shower, do laundry, clean [his/her]	{M 410}		

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{M 410}	Continued From page 5 room. This is ongoing and no new changes. Staff will continue to do reminders every day." - "Plans for ISP Revisions/Modifications: At time of this review no revisions." RESIDENT 2 Resident 2's ISP was "prepared by" ADM C with a "Six-month review date" of "Jan 1, 2026" and included the following: - "Medical/Medication Changes: There have been no changes." - "Behavioral Concerns or Changes: [Resident 2] has had several fines and court days come in the mail when [s/he] stays at [his/her] [Family's]. Robert yells and swears at people on phone calls for which [s/he] has received court dates for intent to harm others." - "Daily Schedule/Routine Changes: Once a week [Resident 2] goes to DVR to help [him/her] find a job." - "Other Changes/Concerns: None." - "Review Goal Summary/Performance Outcome Objectives - Comment on average percentage of accomplishment and any needs for changes/modifications: [Resident 2's] goal is to maintain [his/her] room and [his/her] hygiene without reminders. [S/he] has not met these very often. [S/he] still needs staff to remind [him/her] to shower, brush [his/her] teeth and clean [his/her] room daily." - "Plans for ISP Revisions/Modifications: At this time staff will continue with reminders." RESIDENT 3 Review of Resident 3's "SIX-MONTH PROGRESS REVIEW" provided by ADM C on 05/27/2026 reflected the following:	{M 410}		

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{M 410}	Continued From page 6 Resident 3's ISP was "prepared by" ADM C with a "Six-month review date" of "Jan 2026" and included the following: - "Medical/Medication Changes: No medical/med changes." - "Behavioral Concerns or Changes: Wetting [his/herself] as this is behavioral. Refusing to answer staff. These are being worked on with [his/her] counselor. Staff is helping to remind [him/her]." - "Daily Schedule/Routine Changes: No changes." - "Other Changes/Concerns: No changes." - "Review Goal Summary/Performance Outcome Objectives - Comment on average percentage of accomplishment and any needs for changes/modifications: To walk more so [s/he] can go to the Kroc [sic] Center. Staff to help with reminders." - "Plans for ISP Revisions/Modifications: Will continue to help with reminders." IN SUMMARY: Resident 1, Resident 2 or Resident 3's ISPs did not include a description of services the licensee will provide to meet the assessed need, level of supervision required in the home and community, services provided by outside agencies, identification of who will monitor the plan and a statement of agreement with the plan and signed by all persons involved in developing the plan. Additionally, Resident 1, Resident 2 and Resident 3's ISPs did not identify all their needs and abilities in the areas of activities of daily living, medications, health, recreational, social and transportation.	{M 410}		

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{M 410}	Continued From page 7 On 05/27/2026 at 11:28 AM, Surveyor interviewed ADM C who acknowledged Resident 1, Resident 2 and Resident 3's ISPs did not include all of the required information.	{M 410}		