STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0015659	A. BUILDING: _____ B. WING _____	R-C 08/31/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
REM WISCONSIN INC PHEASANT RUN	1260 PHEASANT RUN NEW RICHMOND, WI 54017

(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 08/31/2026, Surveyor conducted a complaint investigation and a verification visit at REM Wisconsin Inc Pheasant Run. Two of 4 complaints were substantiated. One repeat violation was identified. See Statement of Deficiencies (SOD) 9XMC11, dated 08/26/2025. Under statutory provisions of Wis. Stat. ch. 50, a $200 revisit fee is being assessed. Census: 4	{M 000}		
{M 548}	88.10(3)(a) Fair Treatment Fair treatment. To be treated with courtesy, respect and full recognition of the resident's dignity and individuality. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure residents were treated with dignity and respect when staff used their personal cell phones at work and restricted Resident 1's soda intake. This is a repeat violation. See Statement of Deficiencies (SOD) 9XMC11, dated 08/26/2025. Findings include: The provider is licensed to care for 4 residents in the client groups developmentally disabled, traumatic brain injury, and physically disabled.	{M 548}		

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

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{M 548}	Continued From page 1 On 07/19/2026 and 07/21/2026, the Department received 2 complaints related to staff's phone usage and lack of interaction with residents. On 08/31/2026, at approximately 11:05 AM, Surveyor interviewed Program Supervisor (PS) A. Surveyor asked if the violation from the previous survey had been corrected, which was for staff not treating residents with respect by using their personal cell phones while working. PS A stated the provider was still having problems with Caregiver B being on his/her phone while working. PS A stated it was a constant issue. PS A stated s/he was working on getting Caregiver B off of the work schedule. PS A stated Caregiver B would acknowledge that s/he had been on his/her phone when it was addressed with him/her by PS A. PS A stated the staff at the home needed to have their phones on them while working because there was something like a 2-factor authentication system to use the electronic charting system. PS A stated the staff's phones would "ping" to give them access to the computer. At approximately 11:40 AM, Surveyor interviewed Program Director (PD) C. PD C stated there was still an issue with staff being on their phones while working. At approximately 11:59 AM, Surveyor reviewed resident records. Surveyor observed a note on Resident 1's file which read, "[Resident 1] can only have pop [soda] once a day when [s/he] gets a case." Surveyor reviewed Resident 1's individual service plan (ISP), last updated on 06/08/2026. The ISP did not include any documentation of dietary restrictions or indication why Resident 1's soda intake would be limited to 1 per day.	{M 548}		

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{M 548}	Continued From page 2 At approximately 12:05 PM, Surveyor interviewed PD C again. PD C stated the reason for reducing Resident 1's soda intake was because s/he would get an upset stomach if s/he had too much soda. At approximately 12:56 PM, Surveyor interviewed PS A again. PS A stated s/he had to talk to Caregiver B on nearly every one of his/her shifts about his/her phone use. PS A stated it was a constant issue. PS A stated s/he would come to the home unannounced while Caregiver B was working and had witnessed him/her on his/her phone. PS A stated s/he had made a flyer to address the staff phone usage and had posted it on a bulletin board. At 1:15 PM, PS A stated Resident 1's soda restriction was also due to his/her risk of having seizures. Surveyor reviewed the phone usage flyer referenced by PS A. The phone usage flyer was dated 08/25/2026, and read, in part, "WE ARE HERE TO WORK! WE DO NOT GET PAID TO SIT ON OUR PHONES OR WATCH TV! DO THE CLEANING LIST AND PAY ATTENTION TO THE [residents]! I will be doing write ups [sic] for schedule [sic] not being fallowed [sic] and phones as well. You only need phone to Ping [sic] in. We DO NOT sit on phones and play on them. The [residents] do rat you out on that. WE NEED TO FALLOW [sic] DAY AND NIGHT SCHEDULE TO KEEP [residents] ON SCHEDULE..." The flyer was signed by Caregiver B. At approximately 1:32 PM, Surveyor interviewed Resident 1. Resident 1 stated Caregiver B would often be on his/her phone while working. Resident 1 stated Caregiver B had been on his/her phone while working just the day prior. Resident 1 stated Caregiver B would go on social	{M 548}		

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{M 548}	Continued From page 3 media applications on his/her phone. Resident 1 stated Caregiver B was on his/her phone nearly every time s/he worked. The provider did not ensure residents were treated with dignity and respect.	{M 548}		