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 |
|---|---|---|---|
| | 0021195 | A. BUILDING: _____ B. WING _____ | C 06/23/2026 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| PINEVIEW | 219 LAWRENCE ST FREDONIA, WI 53021 |

| (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 |
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| N 000 | Initial Comments<br><br>On 06/23/2026, Surveyor conducted one (1) complaint investigation at Pineview. As a result of the survey 1 complaint was substantiated, resulting in 2 deficiencies.<br><br>Census: 8 | N 000 | | |
| N 219 | 83.17(1) Licensee conduct caregiver background check<br><br>Caregiver background check. At the time of hire, employment or contract and every 4 years after, the licensee shall conduct and document a caregiver background check following the procedures in s. 50.065, Stats., and ch. DHS 12. A licensee shall not employ, contract with or permit a person to reside at the CBRF if the person has been convicted of the crimes or offenses, or has a governmental finding of misconduct, found in s. 50.065, Stats., and ch. DHS 12, Appendix A, unless the person has been approved under the department ' s rehabilitation process as defined in ch. DHS 12.<br><br>This Rule is not met as evidenced by:<br>Based on record review and interview, the provider did not ensure 1 out of 1 employees (Caregiver B) reviewed had been approved under the department's rehabilitation process prior to employing him/her.<br><br>Findings include:<br><br>The facility is licensed to provide services for up to 8 residents who may be advanced aged, physically disabled, traumatic brain injury, | N 219 | | |

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

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| N 219 | Continued From page 1<br>developmentally disabled and/or emotionally disturbed/mental illness. The census at time of survey was 8.<br><br>According to The Wisconsin Caregiver Program Manual (P-00038), Wis. Stat. ch. 50, and Wis. Admin. Code ch. 12, a complete criminal background check (CBC), at minimum, consists of:<br>1) A completed DHS form F-82064, Background Information Disclosure (BID);<br>2) A response from the Department of Justice (DOJ);<br>3) A "Response to Caregiver Background Check" letter from the Department of Health Service, also referred to as the Government Findings Report (GFR).<br><br>On 05/19/2026, the Bureau received a complaint alleging staff working in the facility with misconduct findings.<br><br>On 06/23/2026 at 10:30 AM, Surveyor requested Caregiver B's BID, DOJ and GFR, from Manager A.<br><br>Caregiver B was hired October 11, 2024. Caregiver B had a completed BID dated 10/30/2024 and the facility ran the DOJ and GFR on 10/14/2024. Surveyor observed on the GFR a finding dated 09/24/2019 with misappropriation, under DHS rehabilitation review findings it stated "No Rehabilitation Review findings were found for: [Caregiver B]"<br><br>On 06/23/2026 at 10:50 AM, Surveyor interviewed Manager A. Manager A was unaware of the findings and reached out to Licensee C. Manager A acknowledged Caregiver B was currently working in the facility. Surveyor | N 219 | | |

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| N 219 | Continued From page 2<br>observed the current posted 2 week schedule and Caregiver B worked: 06/14/2026, 06/16/2026, and 06/17/2026; and was scheduled for: 06/24/2026, 06/25/2026 and 06/27/2026. Manager A stated s/he will remove Caregiver B from the schedule.<br><br>On 06/23/2026 at 11:16 AM, Surveyor interviewed Licensee C. Licensee C stated his/her Human Resource person quit. Licensee C stated "I don't know" how Caregiver B was hired without a letter that s/he had completed the rehabilitation review. Licensee C stated s/he would work on finding out the answer and would let Surveyor know by the end of the day.<br><br>As of 11:00 AM, 06/25/2026, Surveyor had received no additional information from Licensee C or Manager A.<br><br>The provider did not ensure 1 out of 1 employee reviewed had been approved under the department's rehabilitation process prior to employing him/her. | N 219 | | |
| N 355 | 83.32(3)(k) Rights of Residents: Self-determination<br><br>In addition to the rights under s. 50.09, Stats., each resident shall have all of the following rights: Self-determination. Make decisions relating to care, activities, daily routines and other aspects of life which enhance the resident ' s self reliance and support the resident ' s autonomy and decision making.<br><br>This Rule is not met as evidenced by:<br>Based on observation and interview, the provider | N 355 | | |

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| N 355 | Continued From page 3 | N 355 | | |

did not ensure 1 of 1 resident reviewed had the freedom to make decisions related to activities, daily routines and other aspects of life which enhance the resident's self-reliance and support the resident's autonomy and decision making.

Resident 1 was not given the freedom to make decisions related to daily routines.

Findings include:

On 06/23/2026 at 10:35 AM, Surveyor interviewed Resident 1. Resident 1 has resided at the facility for about 7 months. Resident 1 stated s/he likes to walk outside and that s/he was only able to walk to the local grocery store. Resident 1 stated Manager A would not let him/her take a taxi when s/he wants. Resident 1 stated s/he had missed his/her taxi when s/he was out and after that Manager A stated s/he could no longer go out with the taxi. Resident 1 confirmed s/he was his /her own person and makes his/her own decisions. Resident 1 stated s/he is bored and that there was not a lot to do at the facility. Surveyor observed a can by Resident 1's bed and Resident 1 stated s/he needed to get rid of the can as Manager A does not allow residents to eat/drink anywhere besides in the kitchen. Resident 1 stated s/he likes to lay in his/her bed and watch TV and likes to have drinks in his/her room. Resident 1 stated s/he goes to the gas station and will buy stuff to make a sandwich, but some staff will not allow him/her to make a sandwich.

On 06/23/2026 at 1055 AM, Surveyor interviewed Manager A. Manager A confirmed Resident 1 went out be taxi, but was not at the location s/he was supposed to be at when the taxi was there to pick up. Surveyor asked if there was an

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| N 355 | Continued From page 4<br><br>assessment completed or if the was any documentation regarding this incident. Manager A stated s/he had not updated the individual service plan (ISP), completed an investigation or charted any notes. Manager A confirmed Resident 1 is his/her own person and his/her decision maker. Manager A confirmed Resident 1 was not an elopement risk and that Resident 1 leaves the facility and walks to the gas station. (Surveyor mapped the gas station to be approximately 1.2 miles from the facility.) Manager A stated s/he saw Resident 1 at a diner in town a couple of days ago at lunch time. Manager A stated residents are required to eat/drink in the dining room because they do not want rodents in the facility. Manager A acknowledged the house rules do not allow residents to eat/drink in their rooms. Manager A acknowledged s/he understood the concerns with not allowing Resident 1 to make his/her own decisions, but when Resident 1 didn't show for the taxi, s/he thought by restricting taxi rides, it would keep Resident 1 safe. Manager A stated s/he will talk with Resident 1 and update his/her ISP with Resident 1's preferences. Manager A stated s/he would review the house rules to ensure they do not violate resident rights. Manager A stated s/he was having a staff meeting this week and s/he would talk to staff about resident rights and allowing Resident 1 to make a sandwich if s/he chooses to.<br><br>The provider did not ensure residents had the freedom to make decisions related to activities, daily routines and other aspects of life which enhance the resident's self-reliance and support the resident's autonomy and decision making. | N 355 | | |