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
	110435	A. BUILDING: _____ B. WING _____	R-C 06/26/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SPRING HOUSE	404 PINE ST MINERAL POINT, WI 53565

(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 On 06/26/2023, Surveyor completed a verification visit at Spring House, a CBRF in Mineral Point. One deficiency was identified. The deficiency is a repeat deficiency - See Statement of Deficiency (SOD) WKNR11, dated 09/20/2022 and SOD WKNR12, dated 03/13/2023. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 6	{N 000}		
{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 the environment was safe, clean and comfortable. Surveyor observed broken tile in the bathroom, trim near the floor and around doorways with gashes, rusted registers and a bedroom with drywall missing and trim pulling off the wall. This is a repeat deficiency. See Statement of Deficiency (SOD) WKNR11, dated 09/20/2022 and SOD WKNR12, dated 03/13/2023. Findings Include:	{N 481}		

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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{N 481}	Continued From page 1 On 06/26/2023 at approximately 8:30 a.m., Surveyor toured the provider's facility. Surveyor observed the following concerns and discussed them with House Lead B: - Bathroom tile, on the wall parallel the sink, had broken tile (Photo 1). House Lead B stated s/he was unaware of the broken tile. - Trim near the floor and around doorways throughout the provider's home had gashes (Photo 3 and Photo 4). House Lead B stated maintenance had made some repairs, but s/he wasn't sure where they were at with other repairs. - The floor registers throughout the facility were rusted (Photo 5). House Lead B stated some registers had been changed out, but not all. - Resident 6's bedroom wall was missing drywall and had trim pulling off (Photo 2). House Lead B stated s/he would complete a repair list for maintenance. At approximately 9:00 a.m., House Lead B stated the person in charge of maintenance had 5 houses to maintain, but s/he put all the observed concerns on one repair list for him/her to address.	{N 481}		