STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	525327	A. Building B. Wing	05/21/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Clement Manor Health Care Center	3939 S 92nd St Greenfield, WI 53228

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0610 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Respond appropriately to all alleged violations. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility did not ensure all alleged violations involving abuse, neglect, exploitation, or mistreatment were thoroughly investigated for 1 (regarding R33) of 3 allegations reviewed. *R33 reported concerns of misappropriation that were not investigated thoroughly, no like resident interviews were conducted. Findings include: The Facility Policy and Procedure titled Freedom from Abuse, Neglect, Exploitation, Misappropriation of Property last revised 3/2025, documents (in part): Policy: 1.Residents will not be subjected to abuse by anyone including, but not limited to, facility staff; other residents; consultants or volunteers; staff of other agencies; family members; legal guardians; friends; or other individuals. V. and VI. Investigation and Reporting: All incidents of mistreatment, suspected abuse, including resident to resident, neglect, exploitation, misappropriation and incidents of unknown etiology are investigated immediately (around the clock, and on any day of the week), utilizing the following format: ***Note: A thorough investigation may include: . Interviewing alleged victim(s) and witness(es) Interviewing accused individual(s) (including staff, visitors, resident's relatives, etc.) allegedly responsible for mistreatment, or suspected of causing an injury of unknown source Interviewing other residents to determine if they have been abused or mistreated Interviewing staff who worked the same shift as the accused to determine if they ever witnessed any mistreatment by the accused Interviewing staff who worked previous shifts to determine if they were aware of an injury. (continued on next page)

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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

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F 0610 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	R33 was admitted to the facility on [DATE] with diagnosis that include Parkinson's disease and Type 2 diabetes. R33's admission Minimum Data Set (MDS) assessment dated [DATE] documents R33 is cognitively intact. On 5/12/26 at 10:05 AM, Surveyor interviewed R33. R33 informed Surveyor R33 was overwhelmed by a situation that recently happened. R33 informed Surveyor that fraudulent charges were made on R33's bank account. R33 stated it had been a nightmare. Surveyor reviewed the facility reported incident (FRI) regarding R33's alleged misappropriation. R33's Misconduct incident report dated 4/13/26 documents, in part: On 4/13/26, the facility [Chief Operating Officer] COO-DD was notified by [R33's] bank of suspected fraudulent activity involving the credit card of [R33], who currently resides in the Health Center. The bank reported concerns regarding unauthorized transactions, indicating possible misappropriation of the resident's credit card. Additionally, [R33's] family contacted the facility to report the suspected fraud and expressed concern that the activity may involve a staff member. Law enforcement was notified. The facility summary of the investigation documented, in part: [COO-DD] received a phone call from [the bank] . reporting suspected misappropriation of [R33's] credit card. The bank identified multiple unauthorized transactions made . The name associated with the transaction was reported . and [facility] has no employee by that name . Both Social Workers were notified immediately and initiated an internal investigation . The [Police Department] was notified and an officer responded . to interview [R33] . On 5/13/26 at 10:24 AM, Surveyor interviewed COO-DD. COO-DD confirmed COO-DD spoke to R33's bank multiple times on 4/13/26. R33's bank staff informed COO-DD that R33's family suspected the fraudulent spending on R33's debit card could have been done by a staff member at the facility. The bank gave multiple names to COO-DD as possible people involved. COO-DD stated the names given to COO-DD were then taken to the facility Human Resources and Scheduling department. None of the names given to COO-DD by the bank were employed anywhere on the facility campus. COO-DD stated that the facility Social Workers were aware of the alleged misappropriation concern and were completing other parts of the investigation. The facility investigation included staff interviews from all staff that worked in the shifts prior to and during the alleged misappropriation. Surveyor noted there were no resident interviews included in the investigation. Surveyor noted facility staff did not interview other residents to see if any other resident had a credit card missing or missing money. Surveyor noted staff education to prevent misappropriation was not documented as completed after this allegation of misappropriation. On 5/13/26 at 8:32 AM, Surveyor interviewed Social Worker (SW)-EE stated R33's family called SW-EE on 4/13/26 to make SW-EE aware that multiple fraudulent charges were placed on R33's credit card and R33's family stated it could be a staff member at the facility. SW-EE stated SW-EE notified Campus Administrator (CA)-CC right away. SW-EE and Director of Social Work (DOSW)-FF (continued on next page)

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F 0610 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	started an investigation. SW-EE stated R33 did not have the credit card at the facility. According to R33's family, R33 had written the credit card number down on paper. SW-EE searched R33's room for the card number and did not find it. SW-EE stated R33 does do a lot of online shopping. The police were called and came to interview R33. Police also searched R33's room and did not find any written credit card number. The police informed SW-EE they believed it was more of a bank investigation. SW-EE stated the team completed a full investigation and were not convinced that it happened at the facility. Surveyor asked if any resident interviews were completed. SW-EE stated SW-EE typically completes 3 resident interviews, but SW-EE would have to look back and see. On 5/13/26 at 9:06 AM, Surveyor interviewed Director of Social Work (DOSW)-FF. DOSW-FF stated SW-EE came and got DOSW-FF and they went to interview R33 together. DOSW-FF called the police immediately and they came to the facility. DOSW-FF stated the police made it sound like this was going to be handled between R33 and R33's bank. Police were thinking this was computerized fraud. DOSW-FF created a questionnaire document for any staff that were working at the facility during the specific time frame would fill out. The unit managers then were responsible for getting the staff statements. Surveyor asked if any resident interviews were completed. DOSW-FF stated DOSW-FF was not asked to complete any resident interviews and is typically directed by the Administrator if resident interviews are needed. DOSW-FF stated there were no other missing items reported at that time from other residents and no other resident has or uses a credit card like R33. On 5/13/26 at 9:22 AM, Surveyor interviewed Campus Administrator (CA)-CC who was responsible for submitting and investigating the allegation of misappropriation. CA-CC stated CA-CC was made aware of the allegation, and an investigation immediately began. Police were called. HR and Scheduling were involved to investigate any name given to the facility by R33's bank. CA-CC stated Social Workers were collecting statements from any staff that worked. Surveyor asked if any resident interviews were completed. CA-CC stated Social Work was handling that when gathering all the other information. Surveyor informed CA-CC of the concern other residents were not interviewed after an allegation of misappropriation. CA-CC understood the concern. On 5/13/26 at 3:16 PM, Surveyor informed Director of Nursing (DON)-B, Nursing Home Administrator (NHA)-A, CA-CC, and COO-DD of the concern that a thorough investigation was not completed into R33's allegation of misappropriation. The investigation did not include any resident interviews to identify the potential scope of the concern.