STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	525685	A. Building B. Wing	07/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Plymouth Health Services	916 E Clifford St Plymouth, WI 53073

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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility did not ensure a resident area remained at a safe, comfortable, and home-like temperature for 4 residents (R) (R5, R1, R4, and R6) of 8 sampled residents. On 6/12/26, the rooftop air conditioner that cooled R5, R1, R4 and R6's wing stopped working which resulted in room temperatures that were above 81 degrees Fahrenheit (F).Findings include: The facility's Safe and Homelike Environment Policy, dated 6/16/22, indicates: .Comfortable and safe temperature levels mean the ambient temperature should be in a relatively narrow range that minimizes residents' susceptibility to loss of body heat and risk of hypothermia/hyperthermia, and is comfortable for residents .7. The facility will maintain comfortable and safe temperature levels .The facility should strive to keep the temperature in common resident areas between 71 and 81 degrees Fahrenheit. The facility's Emergency Operations Plan (EOP) related to Extreme Weather-Heat (page 23) indicates: Initial actions: Activate facility's EOP and appoint a facility Incident Commander (IC) if warranted. Assess residents for signs of distress and/or discomfort. Consider relocating residents to a cooler part of the facility. If the outdoor temperature is not cooler, keep the windows closed and shades drawn. (Note: It may be necessary to increase security to accommodate open windows, etc.) Provide cool washcloths and cooling fans for air circulation. Encourage residents to drink fluids to maintain hydration. On 6/25/26, the United States (US) National Weather Service [NAME] Bay, Wisconsin (WI) Facebook page indicated a warning related to .increasing heat and humidity expected early next week with a potential prolonged period of 90 degree plus temperatures and heat indices reaching 100 degrees F. On 6/26/26, a post indicated: Temperatures gradually increase into the weekend, becoming hot and humid much of next week. Heat indices may near or reach 100 degrees F. The National Weather Service Historical Temperature for the National Weather Service [NAME] Bay, WI indicates the high temperatures during this time period were: (Note: The temperatures below were actual temperatures, not feels-like temperatures which take in acount humidty. Feels-like temperatures were predicted to be over 100 degrees on the hottest days.) ~ 6/25/26 - 72 degrees F~ 6/26/26 - 75 degrees F~ 6/27/26 - 77 degrees F~ 6/28/26 - 79 degrees F~ 6/29/26 - 91 degrees F~ 6/30/26 - 91 degrees F~ 7/1/26 - 91 degrees F~ 7/2/26 - 89 degrees F~ 7/3/26 - 86 degrees F~ 7/4/26 - 77 degrees F R5 was admitted to the facility on [DATE] and had diagnoses including congestive heart failure (CHF) and atrial fibrillation. A Comprehensive Minimum Data Set (MDS) assessment, dated 6/30/26, stated R5 had a Brief Interview for Mental Status (BIMS) score of 15 out of 15, indicating intact cognition. R1 was admitted to the facility on [DATE] and had diagnoses including multiple sclerosis, anxiety, and obesity. A Comprehensive MDS asssessment, dated 5/6/26, stated R1 had a BIMS score of 15 out of 15, indicating intact cognition. A progress note, dated 6/30/26 at 2:14 AM, indicated R1 had panicked feelings due to the heat and was offered and refused cool washcloths and ice water. A progress note at 8:53 PM, indicated R1 was tearful about the heat and was offered a temporary room change to another hallway. R1 refused and stated it would take forever. Staff offered an ice bag. R1 declined and stated they would think about it. R1 was smiling and not tearful. R4 was admitted to the facility on [DATE] and had diagnoses including schizoaffective (continued on next page)

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

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F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	disorder and obstructive sleep apnea. A Quarterly MDS assessment, dated 6/8/26, stated R4 had a BIMS score of 15 out of 15, indicating intact cognition. R6 was admitted to the facility on [DATE] and had diagnoses including chronic obstructive pulmonary disease (COPD) and CHF. A Comprehensive MDS assessment, dated 7/2/26, stated R6 had a BIMS score of 15 out of 15, indicating intact cognition. On 7/1/26 at 9:25 AM, Surveyor used an infrared temperature gun to obtain temperatures in hallways and resident rooms on the second floor of the facility where all residents resided. Surveyor walked toward R5, R1, R4, and R6's unit and observed 2 portable air conditioning units in the hallway. Surveyor noted the temperature was warmer in their hallway. On 7/1/26 at 9:30 AM, Surveyor entered R5's room. R5 was sitting in front of a fan eating breakfast and indicated it was warm in their room. Surveyor obtained a temperature of 81.5 degrees F. R5 stated it was generally hot all of the time, but it was terrible in their room and horrible without the fan. R5 stated they got the fan from therapy staff the day before and were thankful to have it. R5 stated they usually woke up just drenched but actually slept the night before. R5 stated everyone knew the hot weather was coming, fans should have been offered to all residents, and the facility should have been more prepared. R5 stated staff put two portable air conditioners in the hallway yesterday which made a difference if R5 was in the hallway, however, R5 had to leave their door open which was not their usual practice. On 7/1/26 at 10:47 AM, Surveyor interviewed Physical Therapist (PT)-H who indicated it was hot and stifling during a care conference in R5's room on 6/30/26. PT-H stated they saw R5 for therapy prior to the care conference. It was hot at that time and PT-H told R5 they would try to find them a fan. PT-H indicated the fan came from the activities department. On 7/1/26 at 9:35 AM, Surveyor interviewed R1 in their room. The door was partially open and a portable air conditioner was outside the room. R1 was in bed facing the door. A bedside table in front of R1 contained a computer and multiple stacked boxes that formed a wall in front of R1. Surveyor could see the top of R1's head from the doorway. The temperature of R1's room was 84.4 degrees F. R1 had a cooling noodle around their neck and a fan that kitchen staff provided. R1 indicated the air conditioning had not been running for more than a week and it got progressively warmer in the facility over the weekend. R1 stated they spoke to Maintenance Director (MD)-D last week because R1 had multiple sclerosis (MS). R1's symptoms were exacerbated by heat because their body had a hard time regulating temperature. R1 stated they knew the heat wave was coming and the air conditioning was broken so they asked staff to ensure something was in place before the heat wave arrived. MD-D informed R1 that coils were out on the air conditioner and they were waiting for parts to arrive. MD-D stated the facility had portable units they could use if the air conditioning was not fixed before the weekend. R1 stated there were no portable units on Friday (6/26/26). Portable units in the hallway were not installed until Monday (6/29/26). R1 stated if they put ice on their face, it helped for 2 seconds, however, they had an overwhelming deep feeling of pain in their bones and their skin felt sunburned like there was a fire with embers burning that wouldn't go out. R1 stated they also experienced sensations of lightning bolts shooting down their legs, increased Charlie horses, cramping, and leg pains and felt dizzy and like they had to throw up. R1 also felt disoriented, couldn't find their words, and was terrified something would happen. R1 stated the heat made their anxiety worse and it felt like they were living in a crockpot. R1 opened their window over the weekend and monitored the outside temperature via thermometer and a computer. When it was 10 degrees cooler outside, R1 opened the window to get cool air. R1 stated a nurse entered their room on the morning of 6/28/26 and told them to close their window because they were causing the whole facility to heat up and there was a hot stream of air coming from their room. R1 stated the facility installed portable units on 6/29/26 and told residents they had to close their windows. R1 stated it was 84 degrees in their room for 8 hours and their roommate (R4) did not get out of bed much. R1 stated they did not have a privacy curtain and preferred to keep their door closed, however, they had to keep the door open due to the heat which affected R1's anxiety and made it difficult to have a bowel movement. R1 stated staff brought water and offered popsicles. R1 asked for a fan to be put in their doorway but had not received one. A progres note, dated 7/1/26 at 10:46 AM, (continued on next page)

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F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	indicated R1 and Nursing Home Administrator (NHA)-A discussed the heat in R1's room and the hallway. NHA-A explained to R1 and their family that the facility was doing all they could and had 2 units in the hallway. NHA-A indicated R1 could not keep their window open, however, R1 stated it was cooler outside which is why they opened it. NHA-A stated the air conditioning units were working overtime and iced up when windows were open. R1 and their family did not agree with NHA-A. A progress note at 12:19 PM, indicated maintenance staff and NHA-A discussed a window unit with R1 who stated they would wait for the new units to arrive. When asked if staff could position the unit and blow cool air into their room, R1 agreed. Ice water, ice bags, and popsicles were offered but R1 declined. R1 was offered a room that was cooler but declined. The note indicated R1 was a hoarder and there was little room for air exchange in their room. On 7/1/26 at 1:35 PM, Surveyor and MD-D entered R1's room. The temperature which was 80 degrees F according to MD-D's temperature gauge. R1 had a wet washcloth draped over their head. A portable air conditioner in the doorway was blowing cool air into the room. R1 asked MD-D for a fan pointing out of the room. R1 told MD-D that R1 felt abandoned and asked MD-D not to leave that day without doing something. MD-D exited the room. Surveyor interviewed R1 who indicated the air conditioner was put in the doorway approximately 45 minutes ago. When Surveyor asked if R1 was offered a room change, R1 stated a nurse offered to move R1 and R4 to a different room at 9:00 PM the night before. R1 stated with the amount of things they need and have, it would take hours to move. R1 also chose not to move because have anxiety which exacerbates MS symptoms and they were told the air would be fixed the next day. R1 stated if they knew if would take 3 weeks to fix the air conditioning, they might have changed rooms. R1 stated they had been asking MD-D about a fan for 1 or 2 days and was told NHA-A was going to buy fans. R1 did not feel staff treated the heat like an emergency since no one had taken R1's temperature. R1 stated some nurses offered ice and popsicles. On 7/1/26 at 3:55 PM, Surveyor returned to R1's room and noted the portable air conditioner was in the hallway and no longer in the room. The temperature in R1's room was 83.5 degrees F. R1 indicated they were told different air conditioning units were arriving that day and they would receive a fan. R1 still had not seen the fan and worried staff would leave again at the end of the day without doing anything. On 7/1/26 at 11:15 AM, Surveyor obtained temperatures on the unit with MD-D and noted the following: ~ At 11:21 AM, R6's room was 85.7 degrees F. R6 stated they wake up sweating every night. MD-D noted R6's heating unit was turned on and turned it off. ~ At 11:24 AM, R4's room was 86.8 degrees F. A fan was on in the room. In an earlier interview at 10:02 AM, R4 was resting in bed with an ice towel on their forehead and a fan was on. R4 indicated they had trouble sleeping the night before due to the heat and took melatonin to help. R4 stated portable air conditioning units in the hallway shut off when they are full and have to be emptied. R4 stated maintenance staff moved a fan to the other end of the hallway yesterday afternoon and R4 did not get any air. When R4 declined their shower because there was no air circulation in the shower room, staff offered a cold shower. R4 stated they heard on 6/26/26 that MD-D ordered parts to fix the air conditioner and the air conditioner would be fixed that today. R4 stated they previously opened their window at night which helped, however, it no longer helped due to the humidity. Staff told R4 to keep the window shut and blinds closed. R4 felt sick the day before due to the heat and had diarrhea. At 2:13 PM, Surveyor completed a follow-up interview with R4 who stated they were not offered a room change and would not have taken one if offered.On 7/1/26 at 10:49 AM, Surveyor interviewed MD-D who stated there were 5 air conditioning units on the roof. One of the larger units that cooled the 300 and 400 wings went out early last week and it took a while to get parts. MD-D stated the 100/200 wings, nursing area, and dining room felt cooler because the air conditioning units were working. MD-D stated the air conditioning usually just cools the hallways because there are no air conditioning vents in resident rooms. MD-D stated the facility bought portable air conditioning units that were installed (in the hallway) on 6/29/26, however, the units were not effective and the company was delivering 4 higher efficiency units that day. MD-D showed Surveyor that a local company was asked to evaluate the broken rooftop air conditioner on 6/12/26. (continued on next page)

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