STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018262	A. BUILDING: _____ B. WING _____	R-C 07/13/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AZURA MEMORY CARE OF FOX POINT	7770 NORTH PORT WASHINGTON RD FOX POINT, WI 53217

(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 07/13/2026, Surveyor conducted a standard survey, verification visit, and 1 complaint investigation at Azura Memory Care of Fox Point. As a result, SOD 9NTP13 was corrected, 2 new deficiencies were identified, and 1 complaint was unsubstantiated. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee will be assessed. Census: 75	{N 000}		
N 220	83.17(2)(a) Employees screened for communicable disease. The CBRF shall obtain documentation from a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse indicating all employees have been screened for clinically apparent communicable disease including tuberculosis. Screening for tuberculosis shall be conducted using centers for disease control and prevention standards. The screening and documentation shall be completed within 90 days before the start of employment. The CBRF shall keep screening documentation confidential, except the department shall have access to the screening documentation for verification purposes. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure all employees have been screened for clinically apparent communicable disease including tuberculosis (TB), within 90 days before the start of employment for 2 of 2 staff reviewed (Caregiver GG and Caregiver HH). Caregiver GG's TB test was 8 days after her/his	N 220		

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

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N 220	Continued From page 1 date of hire. Caregiver HH's TB test was completed 10 days after her/his date of hire. Findings include: On 04/08/2026, at approximately 11:00 AM, Surveyor reviewed staff files and identified the following: Caregiver GG was hired on 05/13/2025. Caregiver GG's record contained a TB test, dated 05/21/2025, 8 days after her/his start date. Caregiver HH was hired on 02/23/2024. Caregiver HH's Bs record contained a TB test, dated 03/04/2024, 10 days after her/his date of hire. On 07/13/2026, at 12:30 PM, Surveyor interviewed Executive Director (ED) FF. ED FF confirmed the requirement for a TB test and communicable disease screening to be completed within 90 days before the start of employment. ED FF reported s/he was unaware the Caregiver GG's and Caregiver HH's TB tests were completed late. ED A reported s/he believed it was an oversight. ED FF reported s/he would retrain human resources staff on TB test code requirements.	N 220		
N 239	83.20(2)(a)-(d) Department-approved training courses. Standard Precautions. All employees who may be occupationally exposed to blood, body fluids or other moist body substances, including mucous membranes, non-intact skin, secretions, and excretions except sweat, whether or not they contain visible blood shall successfully complete	N 239		

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N 239	Continued From page 2 training in standard precautions before the employee assumes any responsibilities that may expose the employee to such material. Fire safety. Within 90 days after starting employment, all employees shall successfully complete training in fire safety. First aid and choking. Within 90 days after starting employment, all employees shall successfully complete training in first aid and procedures to alleviate choking. Medication administration and management. Any employee who manages, administers or assists residents with prescribed or over-the-counter medications shall complete training in medication administration and management prior to assuming these job duties. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 caregiver (Caregiver GG) obtained all Department approved training as required. Caregiver GG, who had responsibilities that would create exposure to blood, body fluids, or other moist body substances, did not have training in standard precautions prior to assuming her/his duties. Findings include: On 04/08/2026, at approximately 11:00 AM, Surveyor reviewed Caregiver GG's record. Caregiver GG was hired on 05/13/2025. Caregiver GG's record contained a Community-Based Care and Treatment training registry certificate for standard precautions, dated	N 239		

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N 239	Continued From page 3 05/23/2025, 10 days after her/his start date. On 07/13/2026, at approximately 12:30 PM, Surveyor interviewed Executive Director (ED) FF. ED FF confirmed the requirement for staff members who had responsibilities that would create exposure to blood, body fluids or other moist body substances, required training in standard precautions prior to assuming these duties. ED FF confirmed Caregiver GG began working with residents with potential for exposure on 05/15/2025 and did not complete standard precaution training until 05/23/2025.	N 239		