

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0010248	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/03/2026
NAME OF PROVIDER OR SUPPLIER BIRCHWOOD APARTMENTS		STREET ADDRESS, CITY, STATE, ZIP CODE 1600 BIRCHWOOD DRIVE BALDWIN, WI 54002		
(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
U 000	INITIAL COMMENTS On 09/02/2026, Surveyor began an abbreviated licensure survey at Birchwood Apartments. Data was collected through 09/03/2026. One violation was identified. Census: 20	U 000		
U 138	89.23(5) SERVICES DOCUMENTATION. A residential care apartment complex shall document that the requirements for provider qualifications have been met. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure that documentation of service provider requirements was maintained for 2 of 2 staff members sampled. Required training or experience for RA A and RA B was not documented in either employee's training record until years after their start dates. Findings include: On 09/02/2026, Surveyor reviewed records for Resident Assistant (RA) A, hired on 08/14/2019; and RA B, hired on 07/01/2020. Neither staff member's training records included documentation of training in the facility's emergency plan. Neither staff member's initial training records included documentation of training in the purpose and philosophy of assisted living. Both RAA's and RA B's records included	U 138		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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U 138	Continued From page 1 continuing education for 2025 and 2026 which included a training on long-term care settings. At approximately 1:00 PM, Surveyor interviewed Apartment Manager (AM) C. AM C stated s/he could not find RAA's and RA B's original new-hire training. AM C stated both employees had been hired prior when s/he started, and the filing system was different. At approximately 1:17 PM, AM C stated s/he assumed there was original training documented somewhere. On 09/03/2026, at approximately 7:53 AM, Surveyor received an email from Administrator D. The email read, in part, "Upon reviewing our records, it seems that the initial orientation was not completed with the staff [RA A and RA B] when they first started. As part of a noncompliance plan, the staff had to attend an 8-hour orientation to fulfill this requirement..." The email included a training agenda which was dated 01/22/2026 and was signed by RAA and RA B. The training agenda included training on abuse, neglect, resident choices, "Disaster/Fire" training, and "What is an RCAC [residential care apartment complex]." The provider did not ensure training requirements for all service providers was documented. Two of 2 employee training records sampled were missing original required training documentation.	U 138		