| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 0018838 | A. BUILDING: _____ B. WING _____ | C 08/13/2026 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| CHERRY COVE ASSISTED LIVING AND MEMORY CAF | 1610 GEORGIA STREET STURGEON BAY, WI 54235 |

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| N 000 | Initial Comments<br><br>On 08/12/2026 with additional information gathered through 08/13/2026, Surveyor conducted a complaint investigation at Cherry Cove Assisted Living and Memory Care 3. As a result, 1 of 1 complaint was unsubstantiated and 3 new deficiencies were identified.<br><br>Census: 18 | N 000 | | |
| N 230 | 83.19 Orientation<br><br>Before an employee performs any job duties, the CBRF shall provide each employee with orientation training which shall include all of the following:<br>(1) Job responsibilities; (2) Prevention and reporting of resident abuse, neglect and misappropriation of resident property; (3) Information regarding assessed needs and individual services for each resident for whom the employee is responsible; (4) Emergency and disaster plan and evacuation procedures under s. HFS 83.47(2); (5) CBRF policies and procedures; (6) Recognizing and responding to resident changes of condition.<br><br>This Rule is not met as evidenced by:<br>Based on record review and interview, the provider did not ensure 2 of 2 employees received orientation training in all required topics prior to performing job duties.<br><br>Resident Assistant A and Resident Assistant B did not have training in job responsibilities; prevention and reporting of resident abuse, neglect and misappropriation; assessed needs of residents; emergency and disaster plan and evacuation; | N 230 | | |

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

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| N 230 | Continued From page 1 | N 230 | | |

recognizing and responding to resident changes of condition; and CBRF policies and procedures prior to performing work duties.

Findings include:

On 08/12/2026 at approximately 10:45 AM, Surveyor reviewed Resident Assistant (RA) A and Resident Assistant (RA) B's employee records to verify compliance with orientation requirements. The following was identified:

The record for RA-A, hired on 03/22/2026, did not contain evidence of orientation training in 6 of 6 required topics. Training was not documented for job responsibilities; prevention and reporting of resident abuse, neglect and misappropriation; assessed needs of residents; emergency and disaster plan and evacuation; recognizing and responding to resident changes of condition; and CBRF policies and procedures.

The record for RA-B, hired on 03/09/2026, did not contain evidence of orientation training in 6 of 6 required topics. Training was not documented for job responsibilities; prevention and reporting of resident abuse, neglect and misappropriation; assessed needs of residents; emergency and disaster plan and evacuation; recognizing and responding to resident changes of condition; and CBRF policies and procedures.

On 08/12/2026 at 11:10 AM, Surveyor interviewed Assistant Director (AD) C regarding RA-A and RA-B's missing orientation training. AD-C explained that when staff are hired they are expected to review the employee handbook, their policies and procedures, best practices and resident rights. S/he stated they also watch 5 videos pertaining to mental health, challenging

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| N 230 | Continued From page 2<br>behaviors, infection control, fire safety and approaches to care. AD-C acknowledged s/he could not confirm RA-A or RA-B completed the required orientation training as there was no documentation in their employee records. AD-C stated s/he would check their records for any additional documentation they may have and will follow up with Surveyor. Surveyor requested additional documentation be provided no later than 4:30 PM on 08/12/2026.<br><br>As of 4:30 PM on 08/12/2026, no additional documentation was received.<br><br>On 08/13/2026 at 1:35 PM, Surveyor interviewed AD-C and Executive Director (ED) D via phone who verified they did not have any additional orientation training documentation for RA-A and RA-B. ED-D reported RA-A and RA-B watched the videos and read their policies and procedures, but s/he did not have documentation. S/he stated, "I need to add them to the training tracker. It's my fault. That's on me."<br><br>Cross Reference:<br>N0239 DHS 83.20(2)(a)-(d) Department Approved Training Course<br>N0243 DHS 83.21(1)-(3) All Employee Training | N 230 | | |
| N 239 | 83.20(2)(a)-(d) Department-approved training courses.<br><br>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 training in standard precautions before the | N 239 | | |

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| N 239 | Continued From page 3 | N 239 | | |

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 interview and record review, the provider did not ensure 2 of 2 employees obtained all department approved training as required.

Resident Assistant A did not have training in standard precautions within 90 days after starting employment.

Resident Assistant B did not have training in fire safety and first aid and choking within 90 days after starting employment.

Findings include:

On 08/12/2026 at approximately 10:45 AM, Surveyor reviewed Resident Assistant (RA) A and Resident Assistant (RA) B's employee records to verify compliance with department approved

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| N 239 | Continued From page 4<br>training requirements. The following was identified:<br><br>The record for RA-A, hired on 03/22/2026, did not contain evidence of training or evidence of meeting an exemption for standard precautions.<br><br>The record for RA-B, hired on 03/09/2026, did not contain evidence of training or evidence of meeting an exemption for fire safety and first aid and choking.<br><br>On 08/12/2026, Surveyor verified RA-A was not on the CBCT (Community-Based Care and Treatment) training registry for standard precautions and RA-B was not on the training registry for fire safety or first aid and choking.<br><br>On 08/12/2026 at 11:10 AM, Surveyor interviewed Assistant Director (AD) C who confirmed RA-A did not complete standard precautions and RA-B did not complete fire safety and first aid and choking. AD-C stated RA-A was signed up to complete standard precautions on 06/01/2026 but missed the class. S/he stated RA-A has been rescheduled to take the class on 08/14/2026. AD-C also acknowledged s/he needed to have RA-B complete fire safety and first aid and choking.<br><br>Cross Reference:<br>N0230 DHS 83.19 Orientation<br>N0243 DHS 83.21(1)-(3) All Employee Training | N 239 | | |
| N 243 | 83.21(1)-(3) All employee training.<br><br>The CBRF shall provide, obtain or otherwise ensure adequate training for all employees in all of the following: | N 243 | | |

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| N 243 | Continued From page 5<br>Resident rights. Training shall include general rights of residents including rights as specified under s. DHS 83.32(3). Training shall be provided as applicable under ss. 50.09 and 51.61 and chs. 54, 55, and 304, Stats., and ch. DHS 94, depending on the legal status of the resident or service the resident is receiving. Specific training topics shall include house rules, coercion, retaliation, confidentiality, restraints, self-determination, and the CBRF ' s complaint and grievance procedures. Residents ' rights training shall be completed within 90 days after starting employment.<br>Client Group. Training shall be specific to the client group served and shall include the physical, social and mental health needs of the client group. Specific training topics shall include, as applicable: characteristics of the client group served, activities, safety risks, environmental considerations, disease processes, communication skills, nutritional needs, and vocational abilities. Client group specific training shall be completed within 90 days after starting employment.<br>Client Group. In a CBRF serving more than one client group, employees shall receive training for each client group.<br>Recognizing, preventing, managing, and responding to challenging behaviors. Specific training topics shall include, as applicable: elopement, aggressive behaviors, destruction of property, suicide prevention, self-injurious behavior, resident supervision, and changes in condition. Challenging behaviors training shall be completed within 90 days after starting employment. | N 243 | | |

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| N 243 | Continued From page 6 | N 243 | | |

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure 2 of 2 employees reviewed obtained all training within 90 days after starting employment.

Resident Assistant A did not have training in resident rights, client groups, and recognizing, preventing, managing, and responding to challenging behaviors within 90 days of starting employment.

Resident Assistant B did not have training in client groups and recognizing, preventing, managing and responding to challenging behaviors within 90 days after starting employment.

Findings include:

The provider is licensed to provide care for 20 residents with developmental and physical disabilities, traumatic brain injuries, advance age, mental illness and/or irreversible dementia/Alzheimer's.

On 08/12/2026 at approximately 10:45 AM, Surveyor reviewed Resident Assistant (RA) A and Resident Assistant (RA) B's employee records to verify compliance with all employee training requirements. The following was identified:

The record for RA-A, hired on 03/22/2026, did not contain evidence of training in resident rights, client groups and challenging behaviors within 90 days of hire, or evidence of meeting an exemption for the training.

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| N 243 | Continued From page 7<br><br>The record for RA-B, hired on 03/09/2026, did not contain evidence of training in client groups and challenging behaviors within 90 days of hire, or evidence of meeting an exemption for the training.<br><br>On 08/12/2026 at 11:10 AM, Surveyor interviewed Assistant Director (AD) C regarding RA-A and RA-B's training in client group, challenging behaviors and resident rights. AD-C explained that when staff are hired they are expected to review the employee handbook, their policies and procedures, best practices and resident rights. S/he stated they also watch 5 videos pertaining to mental health, challenging behaviors, infection control, fire safety and approaches to care. AD-C acknowledged s/he could not confirm RA-A or RA-B completed the required training as there was no documentation in their employee records. AD-C stated s/he would check their records for any additional documentation they may have and will follow up with Surveyor. Surveyor requested additional documentation be provided no later than 4:30 PM on 08/12/2026.<br><br>As of 4:30 PM on 08/12/2026, no additional documentation was received.<br><br>On 08/13/2026 at 1:35 PM, Surveyor interviewed AD-C and Executive Director (ED) D via phone who verified they did not have any additional training documentation for RA-A and RA-B. ED-D reported RA-A and RA-B watched the videos and read their policies and procedures, but s/he did not have documentation. S/he stated, "I need to add them to the training tracker. It's my fault. That's on me."<br><br>Cross Reference:<br>N0230 DHS 83.19 Orientation | N 243 | | |

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| N 243 | Continued From page 8<br>N0239 DHS 83.20(2)(a)-(d) Department Approved Training Course | N 243 | | |