STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0009795	A. BUILDING: _____ B. WING _____	08/01/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HIL WILLOW COURT	575 BLACKHAWK DR FORT ATKINSON, WI 53538

(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 07/29/2025, with information obtained through 08/01/2025, the Bureau of Assisted Living, Southern Regional Office, conducted a standard licensing survey at HIL Willow Court, a community-based residential facility located in Fort Atkinson, WI. As a result of the survey, 1 deficiency was identified. Census: 7	N 000		
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 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.	N 239		

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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N 239	Continued From page 1 This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that 1 of 3 employees reviewed obtained all department-approved training as required. Caregiver C did not have training in first aid and choking within 90 days after starting employment. Findings include: On 07/29/2025, Surveyor conducted a review of 3 employees to verify compliance with department-approved training requirements. Surveyor requested training records from Client Services Manager B for Caregiver C. The record for Caregiver C, hired 01/28/2025, did not contain evidence of training or evidence of meeting an exemption for first aid and choking. At approximately 2:45 p.m., Surveyor interviewed Administrator A and Client Services Manager B. Administrator A reported s/he thought that Caregiver C was maybe exempt from first aid and choking training due to being a certified nursing assistant. Surveyor reviewed the training exemption regulations with Administrator A and Client Services Manager B. Administrator A reported s/he would look for any evidence of Caregiver C either completing first aid and choking training or meeting an exemption for the training. On 07/29/2025, Surveyor verified Caregiver C was not on the Community-Based Care and Treatment training registry for first aid and choking.	N 239		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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N 239	Continued From page 2 On 07/30/2025, at approximately 1:04 p.m., Surveyor received an e-mail from Administrator A which confirmed that Caregiver C had not received first aid and choking training. Administrator A reported that staff signed up Caregiver C to complete the training on 08/11/2025.	N 239		