STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018581	A. BUILDING: _____ B. WING _____	C 04/20/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NEW DAY GERMANTOWN	**N109 W17525 VIRGINIA AVE GERMANTOWN, WI 53022**

(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 04/15/2026, Surveyor conducted one (1) complaint investigation and a standard survey. Additional information gathered through 04/20/2026. As a result of the survey 1 complaint was unsubstantiated, 2 deficiencies identified during the standard survey. Census: 23	N 000		
N 230	83.19 Orientation Before an employee performs any job duties, the CBRF shall provide each employee with orientation training which shall include all of the following: (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. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 employees obtained orientation training which shall include the following: Job Responsibilities; Prevention and reporting of resident abuse, neglect and misappropriation of resident property; information regarding assessed needs and individual services for each resident for whom the employee is responsible; emergency and disaster plan and evacuation procedures under s. HFS 83.47(2);	N 230		

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

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N 230	Continued From page 1 CBRF (Community Based Residential Facility) policies and procedures; and recognizing and responding to resident changes of condition. Findings include: On 04/15/2026 at 8:00 AM, Surveyor requested Caregiver B and Caregiver C's orientation from Administrator (ADM) A. Caregiver B was hired on 11/14/2024 - Caregiver B's record did not have documentation s/he had completed job responsibilities; prevention and reporting of resident abuse, neglect and misappropriation of resident property; information regarding assessed needs and individual services for each resident for whom the employee is responsible; emergency and disaster plan and evacuation procedures under s. HFS 83.47(2); CBRF policies and procedures; and recognizing and responding to resident changes of condition. Caregiver C was hired on 12/29/2025 - Caregiver C's record did not have documentation s/he had completed prevention and reporting of resident abuse, neglect and misappropriation of resident property; information regarding assessed needs and individual services for each resident for whom the employee is responsible; emergency and disaster plan and evacuation procedures under s. HFS 83.47(2); and recognizing and responding to resident changes of condition. On 04/15/2026 at 12:20 PM, Surveyor interviewed ADM A. ADM A acknowledged Caregiver B and Caregiver C were currently on the schedule and working in the facility. ADM A acknowledged s/he did not have documentation Caregiver B and Caregiver C had completed the required orientation training prior to assuming the	N 230		

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N 230	Continued From page 2 job responsibilities and being added to the schedule. Surveyor informed ADM A s/he could send information obtained to Surveyor by the end of the day. As of 04/15/2026 at 5:00 PM, Surveyor did not receive any documentation from ADM A. The provider did not ensure employees obtained orientation training before performing any job duties.	N 230		
N 243	83.21(1)-(3) All employee training. The CBRF shall provide, obtain or otherwise ensure adequate training for all employees in all of the following: 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. 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	N 243		

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N 243	Continued From page 3 shall be completed within 90 days after starting employment. Client Group. In a CBRF serving more than one client group, employees shall receive training for each client group. 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. 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 training as required within 90 days after starting employment. Findings include: The provider is licensed to provide care and services to residents within the client groups of advanced aged, irreversible dementia/Alzheimer's, physically disabled, emotionally disturbed/mental illness and/or terminally ill. On 04/15/2026 at 8:00 AM, Surveyor requested Caregiver B and Caregiver C's record from Administrator (ADM) A. Surveyor observed: Caregiver B was hired on 11/14/2024 - Caregiver	N 243		

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N 243	Continued From page 4 B's record did not contain evidence of training or evidence of meeting an exemption for training in resident rights; recognizing, preventing, managing and responding to challenging behaviors; and client groups. Caregiver C was hired on 12/29/2025 - Caregiver C's record did not contain evidence of training or evidence of meeting an exemption for training in resident rights. On 04/15/2026 at 12:20 PM, Surveyor interviewed ADM A. ADM A acknowledged s/he did not have all employee training for Caregiver B and Caregiver C. Surveyor informed ADM A s/he could send information obtained to Surveyor by the end of the day. As of 04/15/2026 at 5:00 PM, Surveyor did not receive any documentation from ADM A. The provider did not ensure 2 of 2 employees reviewed, obtained training as required within 90 days after starting employment.	N 243		