STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017768	A. BUILDING: _____ B. WING _____	R-C 06/10/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LEGACY OF DEFOREST (THE)	6639 PEDERSON CROSSING BLVD DE FOREST, WI 53532

(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 06/10/2025, Surveyor conducted a standard licensing survey, verification visit and complaint investigation at Legacy of DeForest, a CBRF located in DeForest, WI. As a result of the survey, 3 violations of Chapter DHS 83 were issued. One violation was a repeat violation from previous Statement of Deficiency (SOD) 2YBI13 dated 10/11/2024. The complaint was substantiated. Census: 19	N 000		
N 219	83.17(1) Licensee conduct caregiver background check Caregiver background check. At the time of hire, employment or contract and every 4 years after, the licensee shall conduct and document a caregiver background check following the procedures in s. 50.065, Stats., and ch. DHS 12. A licensee shall not employ, contract with or permit a person to reside at the CBRF if the person has been convicted of the crimes or offenses, or has a governmental finding of misconduct, found in s. 50.065, Stats., and ch. DHS 12, Appendix A, unless the person has been approved under the department ' s rehabilitation process as defined in ch. DHS 12. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that a caregiver	N 219		

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

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N 219	Continued From page 1 background check was conducted for Caregiver L. There was no documented caregiver background check in Caregiver L's file. Findings include: On 06/10/2025 at 9:00 AM, Surveyor reviewed Caregiver L's employee file. Caregiver L was hired 03/21/2025. There was no documented background check in Caregiver L's file. On 06/10/2025 at 9:30 AM, Surveyor interviewed Executive Director A. Executive Director A acknowledged that background checks must be conducted for each employee at date of hire. Executive Director A acknowledged that there was no documented background check for Caregiver L. Executive Director A stated, "We must have missed that one, but we will get it done as soon as possible."	N 219		
N 247	83.22(1)-(4) Task specific training. The CBRF shall provide, obtain or otherwise ensure adequate training for employees performing job duties in all of the following: Assessment of residents. All employees responsible for resident assessment shall successfully complete training in the assessment of residents prior to assuming these job duties. Specific training topics shall include: assessment methodology, assessment of changes in condition, sources of assessment information, and documentation of the assessment. Individual service plan development. All employees responsible for service plan development shall successfully complete training in individual service plan development prior to assuming these job duties. Specific training	N 247		

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N 247	Continued From page 2 topics shall include: identification of the resident ' s needs and desired outcomes, development of goals and interventions, service plan evaluation and review of progress. Provision of personal care. All employees responsible for providing assistance with activities of daily living shall successfully complete training prior to assuming these job duties. Specific training topics shall include, as appropriate: bathing, eating, dressing, oral hygiene, nail and foot care, toileting and incontinence care, positioning and body alignment, and mobility and transferring. Dietary training. All employees performing dietary duties shall complete dietary training within 90 days after assuming these job duties. Specific training topics shall include: determining nutritional needs, menu planning, food preparation and food sanitation. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that Caregiver L was trained in personal cares and dietary. There was no documented training in Caregiver L's employee file for personal cares or dietary. Findings include: On 06/10/2025 at 9:00 AM, Surveyor reviewed Caregiver L's employee file to ensure compliance. Caregiver L was hired 03/21/2025. There was no documented training indicating Caregiver L was trained in personal cares or dietary. There was no evidence in Caregiver L's file to indicate Caregiver L was exempt from this	N 247		

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N 247	Continued From page 3 training. Surveyor checked the Wisconsin Nurse Aide Registry, Caregiver L was not on the Wisconsin Nurse Aide Registry for Certified Nursing Assistant (CNA). On 06/10/2025 at 9:30 AM, Surveyor interviewed Executive Director A. Executive Director A acknowledged that all employees must be trained in personal cares and dietary prior to performing those tasks. Executive Director A confirmed that Caregiver L works at the facility and assists residents with personal cares and serves meals. Executive Director A confirmed that Caregiver L is able to work alone and is not in training. Executive Director A stated, "We do not have documented training for Caregiver L, but s/he will be trained on his/her next work day prior to assisting residents."	N 247		
N 431	83.38(1)(g) Health monitoring. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the resident ' s highest level of functioning. In addition to the assessed needs as determined under s. DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Health monitoring. 1. The CBRF shall monitor the health of residents and make arrangements for physical health, oral health or mental health services unless otherwise arranged for by the resident. Each resident shall have an annual physical health examination completed by a physician or an advanced practice nurse as defined in s. N 8.02(1), unless seen by a physician or an advanced practice nurse as defined in s. N	N 431		

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N 431	Continued From page 4 8.02(1) more frequently. 2. When indicated, a CBRF shall observe residents ' food and fluid intake and acceptance of diet. The CBRF shall report significant deviations from normal food and fluid intake patterns to the resident ' s physician or dietician. 3. The CBRF shall document communication with the resident ' s physician and other health care providers, and shall record any changes in the resident ' s health or mental health status in the resident ' s record. This Rule is not met as evidenced by: Based on record review and interview, the provider did not monitor the health of Resident 3. Resident 3 is on supplemental oxygen and his/her Individual Service Plan (ISP) directs staff to monitor oxygen levels at each shift. This is a repeat violation from previous Statement of Deficiency (SOD) 2YBI12 dated 06/05/2024 and 2YBI13 dated 10/11/2024. Findings include: On 06/11/2025 at 9:00 AM, Surveyor reviewed Resident 3's medical record. Resident 3 was admitted 07/17/2020 with diagnoses that include but are not limited to: Hypoxemia. Resident 3 requires supplemental oxygen at 2 liters per minute via nasal cannula. Resident 3's ISP dated 06/19/2024 directs staff to check Resident 3's oxygen levels each shift. On 06/11/2025 at 9:30 AM, Surveyor reviewed documentation provided by Executive Director A that documented Resident 3's oxygen level checks. Documentation indicated that Resident	N 431		

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N 431	Continued From page 5 3's oxygen levels were checked on the following dates: 06/01/2025 at 2:29 PM 85% 06/01/2025 at 5:25 PM 93% 06/04/2025 at 7:11 AM 93% On 06/11/2025 at 10:00 AM, Surveyor interviewed Executive Director A. Executive Director A stated that although it is indicated in Resident 3's ISP to check Resident 3's oxygen levels each shift, it does not come up as a task on the Medication Administration Record (MAR) so staff may not know to conduct the oxygen checks. Surveyor asked Executive Director A if Resident 3's oxygen levels are a concern. Executive Director A stated yes, Resident 3's oxygen levels can get low at times, that is why we monitor them. Executive Director A acknowledged Resident 3's ISP directs staff to monitor Resident 3's oxygen level at each shift and acknowledged that there is no documentation to confirm staff are monitoring Resident 3's oxygen levels.	N 431		