STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018278	A. BUILDING: _____ B. WING _____	03/23/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AUTUMN LEAF ASSISTED LIVING LLC	12850 WEST EUCLID AVENUE NEW BERLIN, WI 53151

(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 03/19/2026, with information gathered through 03/23/2026, the Bureau of Assisted Living, Southern Regional Office conducted a standard licensing survey at Autumn Leaf Assisted Living, LLC located at 12850 West Euclid Avenue in New Berlin, WI. Four citations of noncompliance were issued. Census: 8	N 000		
N 526	83.47(2)(e) Other evacuation drills. Other evacuation drills. Tornado, flooding, or other emergency or disaster evacuation drills shall be conducted at least semi-annually. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure other evacuation drills were conducted at least semi-annually in 2024 and 2025, as required. The findings include: On 03/19/2026, Caregiver C and Surveyor reviewed the facility's other evacuation drill records for 2024 and 2025. The other evacuation drill documentation for 2024 did not include an other evacuation drill was conducted during the second half of that year. The other evacuation drill documentation for 2025 did not include an other evacuation drill was conducted during the second half of that year. On 03/19/2026 at approximately 1:30 P.M., Facility Nurse B told Surveyor an other evacuation drill was not conducted during the	N 526		

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

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N 526	Continued From page 1 second half of 2024 and 2025 because s/he was not aware of this requirement. Facility Nurse B told Surveyor s/he would discuss this noncompliance with Licensee/Administrator/Owner A and would ensure all other evacuation drills would be conducted and documented, as required, moving forward.	N 526		
N 538	83.48(3)(a) Fire detection systems inspected annually. After the first year following installation, fire detection systems shall be inspected, cleaned and tested annually by certified or trained and qualified personnel in accordance with the specifications in NFPA 72 and the manufacturer ' s specifications and procedures. This Rule is not met as evidenced by: Based on observation, interview, and record review, the provider did not ensure the facility's fire protection system was inspected, cleaned, and tested annually in 2024 and 2025, as required. The findings include: On 03/26/2026 at approximately 11:00 A.M., Caregiver C and Surveyor observed the facility's east side basement. During this observation, Surveyor heard the smoke detector system alarming intermittently, which was confirmed by Caregiver C. Caregiver C called Licensee/Administrator/Owner (Licensee) A on the phone and placed him/her on speaker phone to discuss the smoke detector system in the east side basement. Licensee A told Surveyor s/he had changed the battery in the smoke detector	N 538		

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N 538	Continued From page 2	N 538		

last week and did not know why it continued to alarm intermittently. Licensee A said s/he was out of town during this interview and told Surveyor s/he would check the faulty smoke detector when s/he returned to the facility.

On 03/19/2026, Caregiver C told Surveyor s/he was unable to locate documentation to provide evidence of any annual inspection, cleaning, and testing of the facility's fire protection system completed in 2024 and 2025.

On 03/19/2026 at approximately 1:30 P.M., Facility Nurse B told Surveyor s/he would look for and/or possibly contact the facility's fire protection company to request documentation of inspection reports for 2024 and 2025. Facility Nurse B said s/he would provide the documentation or an explanation to Surveyor on 03/20/2026. Surveyor informed Facility Nurse B of the alarming smoke detector within the facility's east basement.

On 03/20/2026 at 1:29 P.M., Surveyor received an email from Facility Nurse B including, "Unfortunately the sprinkler system, smoke detectors, and heat detectors haven't [sic] been serviced since 2023. [Licensee A] took over this responsibility when [his/her] partner had a stroke. [Licensee A] didn't [sic] realize there were two fire service companies so [s/he] assumed the company servicing the fire extinguishers was also handling the other items. [Licensee A] has United Fire Protection scheduled to inspect and service smoke detectors, heat detectors and sprinklers on 03/24/2026. [Licensee A] apologizes in advance."

Cross Reference:
N0558 DHS 83.48(8)(b) Sprinkler System Installation and Maintenance

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N 558	83.48(8)(b) Sprinkler system installation and maintenance Installation and maintenance. 1. All sprinkler systems shall be installed by a state licensed sprinkler contractor. All sprinkler systems shall be maintained, inspected and tested at least annually or at intervals determined by the requirements in NFPA 25. 2. In facilities with sprinklers, sprinkler heads shall be placed at the top of each linen or trash chute and in the rooms where the chutes terminates. 3. The sprinkler system flow alarm shall be connected to the CBRF ' s fire alarm system. This Rule is not met as evidenced by: Based on observation, interview, and record review, the provider did not ensure the facility's sprinkler system was maintained, inspected, and tested annually in 2024 and 2025, as required. The findings include: On 03/26/2026 at approximately 11:00 A.M., Caregiver C and Surveyor toured the facility during which Surveyor observed the facility included a sprinkler system. During the observation of the east side basement, Surveyor heard the smoke detector system alarming intermittently, which was confirmed by Caregiver C. Caregiver C called Licensee/Administrator/Owner (Licensee) A on the phone and placed him/her on speaker phone to discuss the smoke detector system in the east side basement. Licensee A told Surveyor s/he had changed the battery in the smoke detector last week and did not know why it continued to alarm intermittently. Licensee A said s/he was out of town during this interview and told Surveyor s/he would check the faulty smoke detector when	N 558		

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N 558	Continued From page 4 s/he returned to the facility. On 03/19/2026, Caregiver C told Surveyor s/he was unable to locate documentation to provide evidence of any annual maintenance, inspection, and testing of the facility's sprinkler system completed in 2024 and 2025. On 03/19/2026 at approximately 1:30 P.M., Facility Nurse B told Surveyor s/he would look for and/or possibly contact the facility's sprinkler system inspection company to request documentation of inspection reports for 2024 and 2025. Facility Nurse B said s/he would provide the documentation or an explanation to Surveyor on 03/20/2026. Surveyor informed Facility Nurse B of the alarming smoke detector within the facility's east basement. On 03/20/2026 at 1:29 P.M., Surveyor received an email from Facility Nurse B including an attached sprinkler system inspection report dated 10/25/2023. The report documentation included, "Deficiencies: There are two sprinklers in the east side basement that have some corrosion near the seal of the sprinkler. One is in the center of the open area and the other is in the northeast corner room." Facility Nurse B's email included, "Unfortunately the sprinkler system, smoke detectors, and heat detectors haven't [sic] been serviced since 2023. [Licensee A] took over this responsibility when [his/her] partner had a stroke. [Licensee A] didn't [sic] realize there were two fire service companies so [s/he] assumed the company servicing the fire extinguishers was also handling the other items. [Licensee A] has United Fire Protection scheduled to inspect and service smoke detectors, heat detectors and sprinklers on 03/24/26. [Licensee A] apologizes in advance."	N 558		

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N 558	Continued From page 5 Cross Reference: N0538 DHS 83.48(3)(a) Fire Detection Systems Inspected Annually	N 558		