STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0015337	A. BUILDING: _____ B. WING _____	C 02/04/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ASTER ASSISTED LIVING OF CLINTONVILLE	38 N MAIN ST CLINTONVILLE, WI 54929

(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
U 000	INITIAL COMMENTS On 02/03/2026, Surveyor conducted 2 complaint investigations and a standard survey at Aster Assisted Living of Clintonville. Additional information was gathered through 02/04/2026. The complaints were unsubstantiated. As a result of the survey, 1 deficient practice was identified. Census: 64	U 000		
U 134	89.23(4)(d)1. SERVICES PROVIDER QUALIFICATIONS. Staff training. All facility staff shall have training in safety procedures, including fire safety, first aid, universal precautions and the facility's emergency plan, and in the facility's policies and procedures relating to tenant rights. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 caregivers (Caregiver B and C) received all required training and had documentation to verify the training was completed within their employee files. Findings include: On 02/03/2026 at 12:00 PM, Surveyor interviewed Administrator A. Administrator A stated any training related to fire safety and emergency plans was completed by Maintenance D onsite and would have been documented on a	U 134		

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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U 134	Continued From page 1	U 134		

checklist Maintenance D filled out and signed once complete.

Administrator A stated tenant rights training was provided on 11/13/2025 and verified Caregiver B attended the training.

On 02/03/2026, Surveyor reviewed Caregiver B's employee file. Caregiver B was hired on 07/16/2024. Caregiver B's employee file contained medication training and RN delegation documentation. Caregiver B's training record had a checklist of training titled "New Team Member Checklist" and "New Hire Checklist" that had Caregiver B's name and the date of hire filled out but was otherwise left blank. The document had no dates of completion, content of training, or signatures of the employee or trainer. There was no evidence Caregiver B received training in safety procedures, including fire safety, first aid, universal precautions and the emergency plan. Surveyor reviewed Caregiver B's record contained a checklist for fire safety and emergency plan that had his/her name and the date of hire filled out but had no dates of completion or signatures of the employee or trainer.

On 02/03/2026, Surveyor reviewed Caregiver C's employee file. Caregiver C was hired on 11/14/2025. Caregiver C's training record was comprised of a checklist of training titled "Resident Care Training." The checklist did not address the required training in safety procedures, including fire safety, first aid, universal precautions and the emergency plan, and in policies and procedures relating to tenant rights.

On 02/03/2026 at 12:00 PM, Surveyor

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U 134	Continued From page 2 interviewed Administrator A. Administrator A stated s/he could not verify if Caregiver B and Caregiver C received the required training. Administrator A stated s/he was not employed at the time Caregiver B was hired and stated s/he believed Caregiver C's checklist was completed. Upon review of the code requirements and the content of the training list "Resident Care Training" in Caregiver C's file, Administrator A acknowledged the training did not meet the criteria for training in safety procedures, including fire safety, first aid, universal precautions and the emergency plan, and in policies and procedures relating to tenant rights. Administrator A stated s/he would take immediate steps to ensure each employee was trained and had completed documentation to verify the training in their employee files. On 02/04/2026 Surveyor interviewed CEO E and Director of Operations F. CEO E and Director of Operations F reviewed the records of Caregiver B and Caregiver C training and confirmed each staff was supposed to have all of the training lists, filled out, signed, and completed, in their employee files to provide verification that training was completed. CEO E and Director of Operations F stated they would take immediate steps to ensure each employee was trained and had completed documentation to verify the training in their employee files.	U 134		