STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0019532	A. BUILDING: _____ B. WING _____	C 09/10/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SUNSET WOODS SENIOR LIVING	2900 S MOORLAND RD 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 09/10/2025, Surveyor conducted 1 complaint investigation at Sunset Woods Senior Living. One deficiency was identified. The complaint was substantiated. Census: 40	N 000		
N 396	83.36(1)(a) Adequate staff to meet resident needs. The CBRF shall provide employees in sufficient numbers on a 24-hour basis to meet the needs of the residents. This Rule is not met as evidenced by: Based on record review and interview, employees in sufficient numbers were not available on a 24-hour basis to meet the needs of the residents. From 10:45 PM on 07/12/2025 to 12:01 AM on 07/13/2025 (76 minutes total) when facility census was 39, including 4 residents requiring 2 assist transfers, Medication Aide G worked alone. Findings include: On 07/15/2025, the Department received a complaint regarding staffing. On 09/10/2025 at 9:14 AM, Surveyor interviewed Clinical Director E and Wellness Coordinator F. Wellness Coordinator F stated Resident 1, Resident 2, Resident 3, and Resident 4 each required 2 staff assist with transfers since admission. On 09/10/2025, Surveyor reviewed the staff	N 396		

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

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N 396	Continued From page 1	N 396		

schedule and staff's time sheets dated 07/11/2025-07/13/2025.
Medication Aide G and Caregiver H were scheduled to work the night shift 07/12/2025 10:00 PM to 7/13/2025 6:00 AM.
Medication Aide G punched in on 07/12/2025 at 4:56 PM and out on 07/13/2025 at 6:19 AM.
Caregiver H called in.
On 07/12/2025, Medication Aide I worked the PM shift, punching out at 10:45 PM. On 07/13/2025, s/he punched in at 12:01 AM and out at 6:00 AM.

On 09/10/2025 at 10:38 AM and 12:22 PM, Surveyor interviewed Wellness Director C who, at 10:38 AM stated s/he did not know what time Caregiver H called in on 07/12/2025, but staff were expected to call-in at least 2 hours prior to start of shift if they were not able to work. Wellness Director C stated Medication Aide G and Medication Aide I started calling for coverage for Caregiver I at 10:46 PM and stopped calling at 11:05 PM. Wellness Director C stated the manager on call was expected to come in to cover for the call-in within 1 hour of being notified there was a call in if staff could not find coverage, however, since Medication Aide I returned at 12:01 AM, Former Wellness Coordinator J (manager on call) did not come in. Wellness Director C stated after 07/13/2025, staff were reeducated to start calling for coverage earlier when there are call-ins. At 12:22 PM, Wellness Director C stated Medication Aide G worked alone on 07/12/2025 at 10:45 PM to 12:01 AM on 07/13/2025.

On 09/10/2025, Surveyor reviewed the census log dated 07/01/2025-07/31/2025. Census on 07/12/2025 and 07/13/2025 was 39.

On 09/10/2025, Surveyor reviewed the resident

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N 396	Continued From page 2 roster: Resident 1 was admitted 11/06/2024. Resident 2 was admitted 10/15/2024. Resident 3 was admitted 03/23/2024. Resident 4 was admitted 06/26/2025. On 09/10/2025 at 12:56 PM, Surveyor interviewed Executive Director A and Operations Manager D. Executive Director A stated they had no policy regarding staffing and employee phone numbers were posted in the medication and break rooms for staff to immediately start calling for coverage. Executive Director A stated staff get a 6-minute grace period at start of shift and then on-call is notified. Executive Director A stated Caregiver I was an on-call employee that's why Medication Aide J called him/her to come back. Operations Manager D stated s/he lived closed to facility and staff knew they could call him/her also and s/he would come in. Operations Manager D stated s/he did not remember if s/he was called on 07/12/2025. On 09/10/2025 at 1:05 PM, Surveyor discussed concern of adequate staffing with Executive Director A, Administrator B, Wellness Director C, Operations Manager D and Clinical Director E. Executive Director A stated none of the residents who required 2 assist transfers got up at night because they were all incontinent and were checked and changed in bed. Wellness Director C stated the residents were already in bed at 10:45 PM when Medication Aide I left, and Medication Aide G worked alone only for a short time. Executive Director A stated the PM shift and night shift conduct a walk through before the PM shift leaves followed by night shift does rounds every 2 hours. When Surveyor asked what 1 staff would do if there was a fire, Executive Director A stated they would call the fire department.	N 396		

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N 396	Continued From page 3 Executive Director A stated they want 2 staff working but staffing issues happened.	N 396		