

Wisconsin Department of Health Services

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>0019532</b>                 | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING: _____                                                   | (X3) DATE SURVEY<br>COMPLETED<br><br><b>R-C<br/>05/19/2026</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>SUNSET WOODS SENIOR LIVING</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>2900 S MOORLAND RD<br/>NEW BERLIN, WI 53151</b> |                                                                                                                          |                                                                |
| (X4) ID<br>PREFIX<br>TAG                                              | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ID<br>PREFIX<br>TAG                                                                         | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY) | (X5)<br>COMPLETE<br>DATE                                       |
| {N 000}                                                               | Initial Comments<br><br>On 05/19/2026, Surveyor conducted 1 verification visit and 1 complaint investigation.<br><br>Two deficiencies were identified.<br><br>Eight of 8 deficiencies from Statement Of Deficiency (SOD) 8X212, dated 01/28/2026 were substantially corrected.<br><br>The complaint was substantiated.<br><br>Under statutory provisions of Wis. Stat. Ch. 50, a \$200 revisit fee is being assessed.<br><br>Census: 30                                                                                                                                                                                                                                                                                                                                                                                         | {N 000}                                                                                     |                                                                                                                          |                                                                |
| N 448                                                                 | 83.41(2)(a) Nutrition: diet.<br><br>Diets. 1. The CBRF shall provide each resident with palatable food that meets the recommended dietary allowance based on current dietary guidelines for Americans and any special dietary needs of each resident. 2. The CBRF shall provide a therapeutic diet as ordered by a resident ' s physician.<br><br>This Rule is not met as evidenced by:<br>Resident 12's physician ordered diet was not followed when s/he Resident 12 was not served a double portion of protein. Resident 13's speech therapy recommended diet was not followed when his/her pieces of chicken were cut too big and not sufficiently moistened, his/her cake was not moistened, and staff were not encouraging him/her to eat the cake with a fork or spoon, including putting the fork or spoon down between | N 448                                                                                       |                                                                                                                          |                                                                |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Wisconsin Department of Health Services

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| NAME OF PROVIDER OR SUPPLIER<br><br><b>SUNSET WOODS SENIOR LIVING</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>2900 S MOORLAND RD<br/>NEW BERLIN, WI 53151</b> |                                                                                                                          |                                                               |
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| N 448                                                                 | <p>Continued From page 1</p> <p>each bite.</p> <p>Findings include:</p> <p>The facility is licensed as a Class CNA (nonambulatory CBRF) able to serve up to 50 residents within the client groups of irreversible dementia/Alzheimer's, emotionally disturbed/mental illness, terminally ill, advanced aged and developmentally disabled.</p> <p>On 04/01/2026, the Department received a complaint alleging physician ordered diets were not followed.</p> <p>On 05/19/2026 at 9:56 AM, Surveyor interviewed Resident 12 who stated s/he was to receive double portions of protein and single portion of carbohydrates at each meal.</p> <p>On 05/19/2026 at approximately 10:45 AM, Surveyor reviewed caregiver assignment sheets identifying Resident 12's diet was double protein and Resident 13's diet was mechanical soft.</p> <p>On 05/19/2026 at 12:07 PM, Surveyor observed Resident 12 in the dining room. S/he had not yet started eating and on his/her plate was 1 serving of chicken cut in bite sized pieces, 1 serving of pasta and 1 serving of broccoli. Resident 12 stated to Surveyor that s/he would not eat all the noodles.</p> <p>On 05/19/2026 at 12:11 PM, Surveyor observed Resident 13 in the dining room. Surveyor observed approximately 7 pieces of pasta and 4 cut up bites of chicken cut in approximately ¾ inch x ¾ inch pieces with a small amount of barbeque sauce on the surface of each piece on his/her plate. Surveyor observed same amount of</p> | N 448                                                                                       |                                                                                                                          |                                                               |

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| N 448                                                                 | <p>Continued From page 2</p> <p>barbeque sauce other resident's chicken.<br/>Resident 13 was eating a piece of crumbly<br/>unmoistened cake from a small bowl without a<br/>fork or spoon.</p> <p>On 05/19/2026 at approximately 12:12 PM,<br/>Surveyor interviewed Nurse N and Cook O in the<br/>dining room and showed them Resident 12's and<br/>Resident 13's plates. Nurse N stated Resident<br/>13's chicken needed to be cut smaller and<br/>moistened with extra sauce or gravy and the cake<br/>needed to be moistened. Cook O stated s/he<br/>thought Resident 12 was also receiving a protein<br/>shake and Resident 12 did not have the appetite<br/>to eat double portions of meat.</p> <p>On 05/19/2026, Surveyor reviewed Resident 12's<br/>and Resident 13's records.</p> <p>Example 1- Resident 12<br/>Resident 12 was admitted 07/30/2025. Diagnoses<br/>included type 2 diabetes mellitus with other<br/>specified complications.<br/>Physician order dated 07/30/2025 stated double<br/>portions of protein with meals.<br/>Individual service plan (ISP) dated 03/22/2026:<br/>In the area of Nutrition/Eating- "...Double portions<br/>of protein with meals ..."<br/>Intake Form- an intake form dated<br/>04/30/2026-05/06/2026 identified Resident 12<br/>received double protein portions on 04/30/2026 at<br/>lunch and dinner and 05/01/2026 at breakfast,<br/>lunch and dinner. From 05/02/2026 breakfast<br/>through 05/06/2026 dinner the form was blank.</p> <p>Example 2- Resident 13<br/>Resident 13 was admitted 06/02/2026. Diagnoses<br/>included dysphagia, unspecified type.<br/>After Visit Summary dated 02/03/2026 "</p> | N 448                                                                       |                                                                                                                          |  |                                                                |

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| N 448                                                                 | <p>Continued From page 3</p> <p>...Caregivers note patient with more frequent coughing and choking with solids, will change to soft diet today and consult speech therapy to assess ..."</p> <p>Speech Therapy note dated 03/27/2026- " ...Diet: Level 6 soft chopped Moist: Add Broth, condiments, mayo, dips ...Every bite remind [Resident 13] to put fork/spoon down and chew bite in [his/her] mouth" The note contained a hand drawn square measuring ½ inch x ½ inch with "(No bigger)" written next to it.</p> <p>According to the International Dysphagia Diet Standardization Initiative, a level 6 diet consists of " ...Meat cooked tender and chopped so pieces are no bigger than 1.5cm x 1.5cm lump size. If cannot serve soft and tender, serve as Minced and Moist ... For safety, AVOID these food textures that pose a choking risk for adults who need Level 6 Soft &amp; Bite-Sized Food ...Crumbly bits Dry cake crumble, dry biscuits (add sauce to make these suitable) ...(Source: <a href="https://www.iddsi.org/images/Publications-Resources/PatientHandouts/English/Adults/6_soft_bite_sized_adult_consumer_handout_30jan2019.pdf">https://www.iddsi.org/images/Publications-Resources/PatientHandouts/English/Adults/6_soft_bite_sized_adult_consumer_handout_30jan2019.pdf</a> (Retrieval date 05/10/2026)).</p> <p>ISP dated 05/11/2026:<br/>In the area of Nutrition/Eating- " ...Follow special diet daily: Regular diet, chopped-soft and moist, thin liquids ...Remind to put silverware down and chew bit in [his/her] mouth ..."</p> <p>On 05/19/2026 at 2:52 PM, Surveyor discussed concern of not following physician ordered diets with Nurse N, Interim Executive Director A, and Wellness Coordinator P. Nurse N stated they would retrain staff.</p> | N 448                                                                                       |                                                                                                                          |                                                               |

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| N 450                                                                 | Continued From page 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | N 450                                                                                       |                                                                                                                          |                                                                |
| N 450                                                                 | <p>83.41(2)(c) Nutrition: menus.</p> <p>Menus. 1. The CBRF shall make reasonable adjustments to the menu for individual resident ' s food likes, habits, customs, conditions and appetites. 2. The CBRF shall prepare weekly written menus and shall make menus available to residents. Deviations from the planned menu shall be documented on the menu.</p> <p>This Rule is not met as evidenced by:<br/>Based on observation and interview, the provider did not ensure weekly written menus were available to residents and deviations from the planned menu were documented on the menu.</p> <p>Menus posted in the north dining room wall were for the wrong week and inaccessible to residents when posted above a table and chairs on the dining room wall, menus in 2 of 2 resident's rooms were for the wrong weeks, and the only menu posted on the south side was on refrigerator in the kitchen and inaccessible to residents.</p> <p>Findings include:</p> <p>The facility is licensed as a Class CNA (nonambulatory CBRF) able to serve up to 50 residents within the client groups of irreversible dementia/Alzheimer's, emotionally disturbed/mental illness, terminally ill, advanced aged and developmentally disabled.</p> <p>On 04/01/2026, the Department received a complaint alleging menus were unavailable.</p> <p>On 05/19/2026 at 9:56 AM, Surveyor interviewed</p> | N 450                                                                                       |                                                                                                                          |                                                                |

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| N 450                                                                 | <p>Continued From page 5</p> <p>Resident 12 who stated more than a month ago, staff stopped posting menus and providing menus to residents.</p> <p>On Tuesday 05/19/2026 at 10:18 AM, Surveyor observed 2 weeks' worth of menus post on the north dining room wall above a table and chairs. The 1st menu was labeled Week 3 Spring/Summer 2026. At the bottom of the menu it listed dates of 04/26/2026, 05/31/2026, 08/09/2026 ... The Tuesday lunch menu consisted of honey baked ham, Dijon scalloped potatoes, cascade blend vegetables, banana cream pie and milk. The 2nd menu was labeled Week 4 Spring/Summer 2026. Dates listed on the bottom of the menu were 05/03/2026, 06/07/2026, 07/12/2026 ... Tuesday lunch menu consisted of French dip, French fries, creamy cucumber salad, ice cream and milk.</p> <p>On 05/19/2026 at 10:25 AM, Surveyor interviewed Med Tech F who stated the current menus are in the resident's rooms. Med Tech F retrieved the menus from room 4 and room 9. Room 4's menu was dated 03/08/2026-03/14/2026 and room 9's menu was dated 05/24/2026.</p> <p>On 05/19/2026 at 10:28 AM, Surveyor interviewed Cook O who showed Surveyor the menu posted in the south side's kitchen on the refrigerator. The menu was labeled Week 1 Spring/Summer 2026 Dates listed on the bottom of the menu were 04/12/2026, 05/17/2026 ... identifying it as the current week's menu. The Tuesday lunch menu consisted of glazed pork loin, baked yam, cauliflower with cheese, bread/margarine, twisted strawberry short cake and milk. Cook O stated residents were not allowed in the kitchen and therefore had no</p> | N 450                                                                                       |                                                                                                                          |  |                                                                |

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| N 450                                                                 | <p>Continued From page 6</p> <p>access to the menu. Cook O stated because the pork loin was still frozen, s/he was making barbequed chicken, alfredo pasta broccoli and strawberry short cake for lunch.</p> <p>On 05/19/2026 at 11:48, Business Office Manager D showed Surveyor s/he had posted Week 1 menus in a wall file pocket on the wall near the south side's kitchen.</p> <p>On 05/19/2026 at 2:52 PM, Surveyor discussed concern regarding menus with Nurse N, Interim Executive Director A, and Wellness Coordinator P. Interim Executive Director A stated they would ensure the correct menu was posted and updated with any changes in the menu.</p> | N 450                                                                                       |                                                                                                                          |                                                               |