STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0009274	A. BUILDING: _____ B. WING _____	C 06/23/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LAUREL GROVE ASSISTED LIVING	**1308 S 22ND ST MANITOWOC, WI 54220**

(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 06/23/2025, Surveyor conducted a standard survey and 1 complaint investigation at Laurel Grove Assisted Living in Manitowoc. One (1) of 1 complaint was unsubstantiated. As a result of the survey, 1 deficiency will be issued. Census: 90	N 000		
N 277	83.25 Continuing education The administrator and resident care staff shall receive at least 15 hours per calendar year of continuing education beginning with the first full calendar year of employment. Continuing education shall be relevant to the job responsibilities and shall include, at a minimum, all of the following: (1) Standard precautions; (2) Client group related training; (3) Medications; (4) Resident rights; (5) Prevention and reporting of abuse, neglect and misappropriation; (6) Fire safety and emergency procedures, including first aid. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 2 employees (Caregiver B) received at least 15 hours of continuing education per calendar year which included standard precautions, resident rights, and preventing and reporting of abuse, neglect and misappropriation. Caregiver B was hired on 10/25/2021. Caregiver	N 277		

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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N 277	Continued From page 1 B's employee record did not contain 15 hours of continuing education in 2024 including education in standard precautions, resident rights, and preventing and reporting of abuse, neglect and misappropriation. Findings Include: On 06/23/2025, Surveyor conducted an employee record review as part of the standard survey process. A sample of employees was selected, including the employee record of Caregiver B. Caregiver B was hired on 10/25/2021. Surveyor noted Caregiver B's employee file did not include any continuing education in 2024 related to standard precautions, resident rights, and preventing and reporting of abuse, neglect and misappropriation.. On 06/23/2025 at approximately 2:45 PM, Surveyor interviewed Director of Nursing A regarding continuing education training for Caregiver B. Director of Nursing A indicated the facility provided training in 2024 for standard precautions, resident rights and abuse, however, Caregiver B did not attend the trainings.	N 277		