

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0015967	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED R-C 04/28/2025
NAME OF PROVIDER OR SUPPLIER ROSEWOOD OAKWOOD COTTAGE			STREET ADDRESS, CITY, STATE, ZIP CODE 7711 BIG BEND RD WATERFORD, WI 53185		
(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 04/28/2025, Surveyor completed a standard survey, a verification visit, and 1 complaint investigation at Rosewood Oakwood Cottage. Statement of Deficiency FWHG12 was corrected, and 2 new deficiencies were identified. One complaint was unsubstantiated. Census: 25	{N 000}			
N 532	83.47(4)(b) Fire extinguishers: locations. A fire extinguisher shall be mounted on a wall or a post or in an unlocked wall cabinet used exclusively for that purpose. Fire extinguishers shall be clearly visible. The route to the fire extinguisher shall be unobstructed and the top of the fire extinguisher shall not be over 5 feet high. The extinguisher shall not be tied down, locked in a cabinet or placed in a closet or on the floor. Fire extinguishers on upper floors shall be located at the top of each stairway. Extinguishers shall be located so the travel distance between extinguishers does not exceed 75 feet. The extinguisher on the kitchen floor level shall be mounted in or near the kitchen. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure 2 of 2 fire extinguishers were clearly visible, and the routes to the fire extinguishers were unobstructed. Findings include: On 04/16/2025, at approximately 12:10 PM, Surveyor toured the facility with Community Relations Director Q and observed the following: The facility had 2 residential kitchens located	N 532			

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

TITLE

(X6) DATE

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N 532	Continued From page 1 within each of the cottages. There was no fire extinguisher clearly visible from either of the kitchen areas. Fire extinguishers were located through a doorway from the kitchen areas into a passthrough pantry area. The route to both fire extinguishers was obstructed by doorways, which were propped open during the survey. Surveyor needed to pass through the open doorways and around the propped doors to locate the fire extinguishers. On 04/16/2025, at approximately 12:30 PM, Surveyor interviewed Community Relations Director Q and Chef R. Community Relations Director Q walked around looking for a fire extinguisher and was unable to locate any visible from the kitchen. Chef R also looked around and was unable to locate a fire extinguisher visible from the kitchen. Chef R stated s/he recently had extra fire extinguishers installed in the main kitchen. On 04/17/2025, at approximately 2:15 PM, Surveyor walked through the facility with Maintenance Director S. Surveyor inquired about the fire extinguishers for the kitchen areas. Maintenance Director S confirmed the fire extinguishers were not visible from the kitchen areas and were obstructed by the door/doorway. Maintenance Director S reported s/he would have new fire extinguishers placed so they are visible from the kitchen and easily accessible. On 04/28/2025, at 10:00 AM, Surveyor interviewed Administrator A. Administrator A reported they were in the process of obtaining more fire extinguishers and will have this corrected.	N 532		

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N 551	Continued From page 2	N 551			
N 551	83.48(6)(b) Integrated heat detector in attached garage. CBRFs shall have at least one heat detector integrated with the smoke detection system at all of the following locations or in accordance with the heat detector manufacturer ' s specifications: Attached garage. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure at least 1 heat detector integrated with the smoke detection system or in accordance with the heat detector manufacturer's specifications was located in 1 of 1 attached garage. Findings include: On 04/16/2025, at 12:10 PM, Surveyor toured the facility with Community Relations Director Q and observed the following: The facility is split into 2 cottages, Rosewood Cottage and Oakwood Cottage, and they are interconnected by a hallway. Off the interconnected hallway is an attached garage. The attached garage did not have a smoke or heat detector. Community Relations Director Q confirmed Surveyor's observations. On 04/17/2025, at approximately 1:50 PM, Surveyor toured the facility with Maintenance Director S. Surveyor inquired about the attached garage and Maintenance Director S confirmed it did not contain a smoke or heat detector. Maintenance Director S stated, "that's not like [Licensee T] to miss that." On 04/22/2025, at 4:54 PM, Administrator A	N 551			

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N 551	Continued From page 3 contacted Surveyor via email. The email stated, " . . . Also, the detector for the Oakwood/Rosewood garage is on the inner hallway wall just outside the garage. When the hallway was built that wall was originally inside the garage. We are having it moved into the garage. . . . " On 04/28/2025, at 10:00 AM, Surveyor interviewed Administrator A. Administrator A reported they were working on getting a heat detector placed inside the attached garage. Administrator A reported a walk-through of the facility by an inspector will be conducted to verify all required smoke and heat detectors are properly placed.	N 551		