| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 0017133 | A. BUILDING: _____ B. WING _____ | C 07/21/2025 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **ARBOR VIEW MEMORY CARE** | **34111 ARBOR LN BURLINGTON, WI 53105** |

| (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 |
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| N 000 | Initial Comments<br><br>On 07/21/2025, Surveyor conducted 2 complaint investigations at Arbor View Memory Care, a CBRF located in Burlington, WI.<br><br>As a result of the survey, 2 violations of Chapter DHS 83 were issued.<br><br>One complaint was substantiated.<br><br>One complaint was unsubstantiated.<br><br>Census: 8 | N 000 | | |
| N 239 | 83.20(2)(a)-(d) Department-approved training courses.<br><br>Standard Precautions. All employees who may be occupationally exposed to blood, body fluids or other moist body substances, including mucous membranes, non-intact skin, secretions, and excretions except sweat, whether or not they contain visible blood shall successfully complete training in standard precautions before the employee assumes any responsibilities that may expose the employee to such material.<br>Fire safety. Within 90 days after starting employment, all employees shall successfully complete training in fire safety.<br>First aid and choking. Within 90 days after starting employment, all employees shall successfully complete training in first aid and procedures to alleviate choking.<br>Medication administration and management. Any employee who manages, administers or assists residents with prescribed or over-the-counter medications shall complete training in medication administration and management prior to assuming these job duties. | N 239 | | |

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

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| N 239 | Continued From page 1 | N 239 | | |

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure that 3 of 3 employees reviewed completed training in CBRF Approved Trainings. Caregiver B, C and D did not have completed training in first aid and choking.

Findings include:

On 07/21/2025 at 10:00 AM, Surveyor requested the employee files for Caregiver B, Caregiver C and Caregiver D to ensure compliance with Department Approved Training.

On 07/21/2025 at 10:30 AM, Surveyor reviewed Caregiver B's file. Caregiver B was hired 01/10/2025. Caregiver B's file did not include evidence that Caregiver B had completed training in first aid and choking. There was no evidence in Caregiver B's file of an exemption that would exempt Caregiver B from training in first aid and choking.

On 07/21/2025 at 10:30 AM, Surveyor reviewed Caregiver C's file. Caregiver C was hired 02/12/2024. Caregiver C's file did not include evidence that Caregiver C had completed training in first aid and choking. There was no evidence in Caregiver C's file of an exemption that would exempt Caregiver C from training in first aid and choking.

On 07/21/2025 at 10:30 AM, Surveyor reviewed Caregiver D's file. Caregiver D was hired 02/19/2025. Caregiver D's file did not include evidence that Caregiver D had completed training

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| N 239 | Continued From page 2<br>in first aid and choking. There was no evidence in Caregiver D's file of an exemption that would exempt Caregiver D from training in first aid and choking.<br><br>On 07/21/2025 at 11:15 AM Surveyor checked the Wisconsin Community Based Care and Treatment Registry and confirmed that Caregiver B, Caregiver C nor Caregiver D was not on the registry for first aid and choking.<br><br>On 07/21/2025 at 1:15 PM, Surveyor discussed the above concern with Administrator A. Administrator A acknowledged that all employees must complete training in first aid and choking within 90 days of hire. Administrator A acknowledged that Caregiver B, Caregiver C and Caregiver D do not appear on the Wisconsin Community Based Care and Treatment Registry for first aid and choking. Administrator A stated that Caregiver B, Caregiver C and Caregiver D would be in the next training class for first aid and choking which is at the end of July 2025. | N 239 | | |
| N 452 | 83.41(3)(b) Food safety.<br><br>Food safety. Whether food is prepared at the CBRF or off-site, the CBRF shall store, prepare, distribute and serve food under sanitary conditions for the prevention of food borne illnesses, including food prepared off-site, according to all of the following: 1. The CBRF shall refrigerate all foods requiring refrigeration at or below 40°F. Food shall be covered and stored in a sanitary manner. 2. The CBRF shall maintain freezing units at 0°F or below. Frozen foods shall be packaged, labeled and dated. 3. The CBRF shall hold hot foods at 140°F or above and shall hold cold foods at 40°F or below until | N 452 | | |

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| N 452 | Continued From page 3<br>serving.<br><br>This Rule is not met as evidenced by:<br>Based on observation and interview, the provider did not ensure that food was stored in a sanitary manner. There were numerous food items that were not labeled in the refrigerator.<br><br>Findings include:<br><br>On 07/21/2025 at 9:30 AM, Surveyor observed the facility kitchen.<br><br>OBSERVATIONS:<br><br>There was a bowl of rice that was not labeled with a date.<br><br>There was a pan of diced chicken that was not labeled.<br><br>There was a bowl of chicken wings that was not labeled.<br><br>There was a Tupperware container of mixed vegetables that was not labeled.<br><br>There was an open package of deli meat that was not labeled.<br><br>There was a Tupperware container of unknown meat that was not labeled. | N 452 | | |

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| N 452 | Continued From page 4<br>There was a Tupperware container of mashed potatoes that was not labeled.<br><br>On 07/21/2025 at 11:00 AM, Surveyor interviewed Administrator A. Administrator A acknowledged that food items stored in the refrigerator must be labeled with a date. Administrator A could not determine how long the food items listed above had been in the refrigerator and the facility had no system set up to ensure old food was not served to residents. Administrator A stated that all unlabeled food items would be removed, and staff would be retrained on food safety. | N 452 | | |