Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0015199	A. BUILDING: _____ B. WING _____	R-C 04/07/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NEW PERSPECTIVE SUN PRAIRIE	LIGHTHOUSE OF SUN PRAIRIE SUN PRAIRIE, WI 53590

(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 04/07/2026, the bureau of assisted living southern regional office conducted a verification visit at New Perspectives Sun Prairie, a CBRF located in Sun Prairie, WI. As a result of this survey, 1 violation of DHS Chapter 83 was issued. Six violations from previous Statement of Deficiency (SOD) QRT911 were corrected. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed.	{N 000}		
{N 239}	83.20(2)(a)-(d) Department-approved training courses. 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. Fire safety. Within 90 days after starting employment, all employees shall successfully complete training in fire safety. First aid and choking. Within 90 days after starting employment, all employees shall successfully complete training in first aid and procedures to alleviate choking. 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 1 of 3 employees reviewed had completed training in Fire Safety. Caregiver K did not have documented completed training in Fire Safety.

This is a repeat violation from previous Statement of Deficiency (SOD) 9PKX11 dated 01/10/2023 and SOD QRT911 dated 12/02/2025.

Findings include:

Fire Safety

On 04/07/2026, Surveyor reviewed Caregiver K's employee file. Caregiver K was hired 12/29/2025. There was no evidence that Caregiver K had completed training in Fire Safety. There was no evidence found in the file indicating that Caregiver K was exempt from this training.

On 04/07/2026, Surveyor verified Caregiver K was not on the Community-Based Care and Treatment training registry for Fire Safety.

On 04/07/2026 at approximately 11:00 AM, Surveyor asked Administrator J if Caregiver K would have to respond to fire emergencies. Administrator J stated yes, Caregiver K would have to respond to fire emergencies should they occur. Surveyor asked Administrator J if there was any documentation indicating that Caregiver K had completed training in Fire Safety. Administrator J stated that s/he thought that

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{N 239}	Continued From page 2 Caregiver K had already taken the course in Fire Safety. Administrator J checked the class roster for Fire Safety and stated that Caregiver K had called in sick the day that Fire Safety training was conducted. Administrator J acknowledged that all employees must be trained in Fire Safety within 90 days of hire and that Caregiver K had not completed training in Fire Safety as required. Administrator J stated, "We will get Caregiver K signed up for that training as soon as possible."	{N 239}		