STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0019122	A. BUILDING: _____ B. WING _____	C 12/17/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DENMARK FAMILY LIVING HOUSE 2	N1148 IRISH RD DENMARK, WI 54208

(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
M 000	INITIAL COMMENTS On 12/16/2025, with information gathered through 12/17/2025, Surveyor conducted a standard survey and 1 complaint investigation at Denmark Family Living House 2. One (1) of 1 complaint was unsubstantiated. As a result of the survey, 5 deficiencies will be issued. Census: 2	M 000		
M 232	88.04(2)(g)1 HEALTH SCREENING FOR STAFF The licensee shall obtain documentation from a physician, a registered nurse or a physician's assistant indicating that the licensee and any service provider has been screened for illness detrimental to residents, including for tuberculosis. The documentation is to be completed within 90 days before the start of providing service. The documentation shall be kept confidential except that the licensing agency shall have access to the documentation for verification. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 (Caregivers B and C) service providers reviewed had a communicable disease screen, including tuberculosis (TB) test, completed within 90 days before the start of providing service. Caregiver B was hired on 01/02/2023. Caregiver	M 232		

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

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M 232	Continued From page 1 B's employee record did not contain a TB test or communicable disease screen. Caregiver C was hired on 06/15/2023. Caregiver C's employee record did contain a TB test dated 06/12/2023 but did not contain a communicable disease screen. Findings include: On 12/16/2025, Surveyor conducted an employee record review as part of the standard survey process. A sample of employees were selected, including the employee records of Caregiver B and C. Caregiver B was hired on 01/02/2023. Caregiver B's employee record did not contain a TB test or communicable disease screen. Caregiver C was hired on 06/15/2023. Caregiver C's employee record did contain a TB test dated 06/12/2023 but did not contain a communicable disease screen. On 12/16/2025 at approximately 10:30 AM, Surveyor interviewed Licensee A. Licensee A stated s/he could not locate Caregiver B's TB test results. Licensee A stated Caregiver B was on vacation today but would try to contact Caregiver B to see if s/he had a copy of the the TB test results. Licensee A stated s/he was not aware that both the TB test and the communicable disease screen needed to be completed at the time of hire. Licensee A verified Caregiver B and C did not have a completed communicable disease screen in their employee records.	M 232		

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M 244	Continued From page 2	M 244		
M 244	88.04(5)(a) TRAINING-15 HOURS WITHIN 6 MONTHS The licensee and each service provider shall complete 15 hours of training approved by the licensing agency related to health, safety and welfare of residents, resident rights and treatment appropriate to residents served prior to or within 6 months after starting to provide care. This training shall include training in fire safety and first aid. This Rule is not met as evidenced by: Based on record review and interview, the licensee did not ensure each service provider completed training related to first aid prior to or within 6 months after starting to provide care. Caregiver C was hired on 06/15/2023. Caregiver C's employee record did not contain documentation of receiving training in first aid prior to or within 6 months after starting to provide care. Findings Include: On 12/16/2025, Surveyor conducted an employee record review for Caregiver C. Caregiver C was hired on 06/15/2023. Caregiver C's employee record did not contain documentation of receiving training in first aid prior to or within 6 months after starting to provide care. On 12/16/2025 at approximately 11:00 AM, Surveyor interviewed Licensee A. Licensee A verified Caregiver C's record did not contain the	M 244		

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M 244	Continued From page 3 documentation for first aid training.	M 244		
M 246	88.04(5)(b) TRAINING-8 HOURS ANNUALLY Except as provided in pars. (c) and (d), the licensee and each service provider shall complete 8 hours of training approved by the licensing agency related to the health, safety, welfare, rights and treatment of residents every year beginning with the calendar year after the year in which the initial training is received. This Rule is not met as evidenced by: Based on record review and interview the provider did not ensure 2 of 2 (Caregivers B and C) employees reviewed for training had completed 8 hours of training in the calendar year after the year of hire and initial training. Caregiver B and C had no evidence of any training for 2024. Findings include: On 12/16/2025, Surveyor reviewed employee records for training. Caregiver B's record showed a date of hire on 01/02/2023. There was no evidence of any training in 2024. Caregiver C's record showed a date of hire on 06/15/2023. There was no evidence of any training in 2024. On 12/16/2025 at approximately 11:00 AM, Surveyor interviewed Licensee A. Licensee A said	M 246		

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M 246	Continued From page 4 they changed the portals used for training in 2023 and have not been able to access some of the training that had been done. Licensee A stated they are now printing certificates when staff complete training so they have a paper copy of the training instead of just relying on the electronic records. Licensee A verified the facility did not have documentation of 2024 trainings for Caregiver B and C. Licensee A stated Caregiver C is no longer working at the facility as of Fall 2025 due to going back to school and finding another job. The provider did not ensure 8 hours of continuing education for Caregiver B and C had been completed as required.	M 246		
M 346	88.05(4)(d)2.b FIRE EVACUATION ANNUAL EVALUATION Each resident shall be evaluated annually for evacuation time, using the departments form. All service providers who work on the premises shall be made aware of each resident having an evacuation time of more than 2 minutes. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure each resident was evaluated annually for evacuation time, using the department form. Findings include: On 12/16/2025 at approximately 10:00 AM,	M 346		

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M 346	Continued From page 5 Surveyor reviewed Resident 1 and Resident 2's records, provided by Licensee A. Resident 1 was admitted on 08/16/2019. Resident 1 had diagnoses to include encephalopathy, alcohol abuse, depression and anxiety. Resident 1's record contained one Department form titled, "Resident Evacuation Assessment" which was completed by previous licensee on 08/16/2019. Resident 2 was admitted on 07/09/2020. Resident 2 had diagnoses to include cerebral infarction due to embolism, hemiplegia, hypertension and other speech disturbances. Resident 2's record contained one Department form titled, "Resident Evacuation Assessment" which was completed by previous licensee on 07/15/2020. On 12/16/2025 at 11:00 AM, Licensee A confirmed Surveyor's review of the records. Licensee A indicated they took over the license in 2022 and Resident 1 and 2 were already residents of the home. Licensee A said s/he was unaware of the requirement to complete the evacuation assessment annually. Licensee A made a note to complete the assessments immediately.	M 346		
M 380	88.06(2)(a) ADMISSION-HEALTH EXAM Except as provided in subd. 2., the licensee shall ensure that a new resident of an adult family home receives a health examination by a physician to identify health problems and is screened for communicable disease, including tuberculosis.	M 380		

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M 380	Continued From page 6 Screening for communicable disease may be provided by a physician, a registered nurse or a physician assistant. The health examination and screening shall take place within 90 days prior to admission to the home or within 7 days after admission. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 (Resident 1 and 2) residents reviewed were screened for clinically apparent communicable disease, including tuberculosis (TB), within 90 days before or 7 days after admission. The provider did not have record of a TB test for Resident 1 or Resident 2. Findings include: On 12/16/2025 at approximately 10:15 AM, Surveyors requested Resident 1 and Resident 2's records from Licensee A. Resident 1 was admitted to the facility on 08/16/2019. Resident 1's record did not contain a communicable disease screen or TB test results within 90 days of admission or 7 days after admission. Resident 2 was admitted to the facility on 07/09/2020. Resident 2's record did not contain a communicable disease screen or TB test results within 90 days of admission or 7 days after admission. On 12/16/2025 at approximately 10:30 AM, Surveyor interviewed Licensee A. Licensee A verified Resident 1 and 2's record did not contain documentation of a communicable disease	M 380		

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M 380	Continued From page 7 screen and TB test results. Licensee A indicated Resident 1 and 2 were residents prior to Licensee A taking over the license in 2022. Licensee A stated Resident 2 was admitted when everything was "shut down" during Covid. Licensee A thought maybe the facility had submitted a waiver during that time for the communicable disease and TB testing. On 12/16/2025, Surveyor reviewed the department's facility folder and did not locate any waivers for the communicable disease screen or TB test at the time of Resident 1 or 2's admission. The provider did not ensure Resident 1 and Resident 2 were tested for clinically apparent communicable disease, including tuberculosis, within 90 days prior to or 7 days after admission.	M 380		