

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0017041	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/30/2025
NAME OF PROVIDER OR SUPPLIER WILLOWBROOK ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 3508 WASHINGTON RD KENOSHA, WI 53144		
(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 06-30-2025, Surveyors conducted an abbreviated survey at Willowbrook Assisted Living. As a result, 3 deficiencies were identified. Census: 24	N 000		
N 220	83.17(2)(a) Employees screened for communicable disease. The CBRF shall obtain documentation from a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse indicating all employees have been screened for clinically apparent communicable disease including tuberculosis. Screening for tuberculosis shall be conducted using centers for disease control and prevention standards. The screening and documentation shall be completed within 90 days before the start of employment. The CBRF shall keep screening documentation confidential, except the department shall have access to the screening documentation for verification purposes. This Rule is not met as evidenced by: Based on record review and interview, the provider did not obtain documentation from a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse indicating all employees have been screened for clinically apparent communicable disease including tuberculosis (TB), within 90 days before the start of employment for 4 of 4 staff reviewed (Resident Enrichment Aide (REA) C, Certified Nursing Assistant (CNA) D, CNA E, and Resident Aide (RA) F.). REA C's, CNA D's, CNA E's, and RA F's screenings were not signed by a physician, physician assistant, clinical nurse	N 220		

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

TITLE

(X6) DATE

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N 220	Continued From page 1 practitioner or a licensed registered nurse. Findings include: On 06/30/2025, at 9:30 AM, Surveyors reviewed staff files and identified the following: REA C was hired on 10/02/2024. REA C's record contained the results of a TB test dated 09/27/2024 signed by a medical assistant (MA), and a TB test dated 10/04/2024 signed by Nurse Manager B. REA C's record contained a communicable disease screening dated 10/04/2024. The TB tests and communicable disease screening were not signed by a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse. CNA D was hired on 09/12/2022. CNA D's record contained the results of a TB test dated 09/02/2022 signed by a MA, and a TB test dated 09/24/2022 signed by Nurse Manager B. CNA D's record contained a communicable disease screening dated 09/24/2022, signed by Nurse Manager B. The TB tests and communicable disease screening were not signed by a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse. CNA E was hired on 01/05/2022. CNA E's record contained the results of a TB test dated 12/14/2021, signed by a MA, and a TB test dated 01/12/2022 signed by Nurse Manager B. CNA E's record contained a communicable disease screening dated 01/12/2022, signed by Nurse Manager B. The TB tests and communicable disease screening were not signed by a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse.	N 220		

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N 220	Continued From page 2 RA F was hired on 12/06/2024. RA F's record contained the results of a TB test dated 11/25/2024 signed by a MA, and a TB test dated 12/08/2024 signed by Nurse Manager B. RA F's record contained a communicable disease screening dated 12/08/2024, signed by Nurse Manager B. The TB tests and communicable disease screening were not signed by a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse. On 06/30/2025, at 12:15 PM, Surveyors interviewed Manager A and Nurse Manager B. Nurse Manager B reported s/he was a licensed practical nurse (LPN). Manager A reported s/he was aware of the requirement for ensuring a completed TB test and communicable disease screening, but was unaware an LPN could not interpret results. Manager A reported s/he would ensure a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse signs and interprets TB and communicable disease screenings.	N 220		
N 230	83.19 Orientation Before an employee performs any job duties, the CBRF shall provide each employee with orientation training which shall include all of the following: (1) Job responsibilities; (2) Prevention and reporting of resident abuse, neglect and misappropriation of resident property; (3) Information regarding assessed needs and individual services for each resident for whom the employee is responsible; (4) Emergency and disaster plan and evacuation procedures under s. HFS 83.47(2); (5) CBRF policies and procedures; (6) Recognizing and responding to resident	N 230		

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N 230	Continued From page 3 changes of condition. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 4 of 4 staff (Resident Enrichment Aide (REA) C, Certified Nursing Assistant (CNA) D, CNA E, and Resident Aide (RA) F,) received orientation prior to performing job duties. REA C's orientation did not include emergency disaster plan and individual specifics. CNA D's orientation did not include individual specifics and recognizing and responding to resident changes. CNA E's orientation did not include recognizing and responding to resident changes. RA F's orientation did not include individual specifics, emergency disaster plan, and recognizing and responding to changes. Findings include: On 06/30/2025, at 9:30 AM, Surveyors reviewed employee files and identified the following: REA C was hired on 10/02/2024. REA C's training record did not contain evidence of orientation training on emergency disaster plan and individual specifics prior to REA C performing job duties. CNA D was hired on 09/12/2022. CNA D's training record did not contain evidence of orientation training in individual specifics and recognizing and responding to resident changes prior to CNA D performing job duties. CNA E was hired on 01/05/2022. CNA E's training record did not contain evidence of orientation training in recognizing and responding to resident	N 230		

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N 230	Continued From page 4 changes prior to CNA E performing job duties. RA F was hired on 12/06/2024. RA F's training record did not contain evidence of orientation training in individual specifics, emergency disaster plan, and recognizing and responding to changes prior to RA F performing job duties. On 06/30/2025, at 12:15 PM, Surveyors interviewed Manager A. Manager A confirmed the code requirement. Manager A reported s/he recently started in the manager position in January of 2025. Manager A reported s/he was in the process of ensuring all trainings were completed. Manager A reported s/he was unaware why the required trainings were not completed.	N 230		
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 2 of 2 staff (certified	N 277		

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N 277	Continued From page 5 nursing assistant (CNA) D and CNA E) received 15 hours of continuing education in all required topics in 2023 and 2024. CNA D and CNA E did not have any continuing education training in 2023. CNA D and CNA E did not receive 15 hours of continuing education in topics including client group, medications, abuse, neglect, or misappropriation in 2024. Findings include: The provider is a class CNA Community Based Residential Facility (CBRF) licensed to serve 24 non-ambulatory residents in the client groups of irreversible dementia/Alzheimer's and advanced age. On 06/30/2025, at 9:30 AM, Surveyors reviewed staff records and identified the following: CNA D was hired on 09/12/2022. CNA D's record did not contain any evidence of continuing education in 2023. CNA D's record contained a Relias transcript for 2024. CNA D's 2024 transcript indicated s/he completed standard precautions 1 hour, fire safety review 1 hour, first aid review 1 hour, and resident rights review 1 hour. CNA D's 2024 transcript did not contain any evidence of training related to client group, medication, abuse, neglect, or misappropriation. CNA D completed 4 of 15 required hours of continuing education in 2024. CNA E was hired on 01/05/2021. CNA E's record did not contain any evidence of continuing education in 2023. CNA E's record contained a Relias transcript for 2024. CNA E's 2024 transcript indicated s/he completed standard precautions 1 hour, fire safety review 1 hour, first aid review 1 hour, and resident rights review 1	N 277		

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N 277	Continued From page 6 hour. CNA E's 2024 transcript did not contain any evidence of training related to client group, medication, abuse, neglect, or misappropriation. CNA E completed 4 of 15 required hours of continuing education in 2024 On 06/30/2025, at 12:15 PM, Surveyors interviewed Manager A. Manager A confirmed the code requirement. Manager A reported s/he recently started in the manager position in January of 2025. Manager A reported s/he was in the process of ensuring all trainings were completed. Manager A reported s/he was unaware why the required trainings were not completed.	N 277		