STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016047	A. BUILDING: _____ B. WING _____	07/18/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DICKSON HOLLOW	W156N4881 PILGRIM RD MENOMONEE FALLS, WI 53051

(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 07/18/2023, Surveyor conducted an abbreviated survey at Dickson Hollow. One deficiency was identified. Census: 19	N 000		
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 1 of 1 staff required to complete continuing education received all required continuing education in 2022. Caregiver B did not have evidence of receiving 15 hours of continuing education in all the required topics for 2022. Findings include: On 07/18/2023, Surveyor requested training records from Administrator D to review Caregiver B's continuing education for 2022.	N 277		

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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N 277	Continued From page 1 The record for Caregiver B, hired 12/04/2020, did not contain evidence of continuing education in the following: standard precautions; prevention and reporting of abuse; fire safety and emergency procedures, including first aid in 2022. Caregiver B did have evidence of completing a total of 8.5 hours of continued education in 2022. On 07/18/2023, at approximately 2:15 PM, Surveyor interviewed Administrator A regarding the continued education. Administrator A stated they were aware that Caregiver B did not receive all required continued education and had implemented measures to ensure all employees receive the appropriate training yearly.	N 277		