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
	0016010	A. BUILDING: _____ B. WING _____	R 05/28/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WOODLAND HILL	**431 STAGELINE ROAD HUDSON, WI 54016**

(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 05/28/2026, Surveyor conducted a verification visit at Woodland Hill. One violation was identified. This is a repeat violation. See Statement of Deficiencies XFUX11. Under statutory provisions of Wis. Stat. ch. 50, a $200 revisit fee is being assessed. Census: 69	{N 000}		
{N 525}	83.47(2)(d) Fire drills. Fire drills. 1. Fire evacuation drills shall be conducted at least quarterly with both employees and residents. Drills shall be limited to the employees scheduled to work at that time. Documentation shall include the date and time of the drill and the CBRF ' s total evacuation time. The CBRF shall record residents having an evacuation time greater than the time allowed under s. HFS 83.35(5) and the type of assistance needed for evacuation. Fire evacuation drills may be announced in advance. 2. At least one fire evacuation drill shall be held annually that simulates the conditions during usual sleeping hours. Fire evacuation drills may be announced in advance. Drills shall be limited to the employees scheduled to work during the residents ' normal sleeping hours. This Rule is not met as evidenced by: Based on record review and interview, the provider did not conduct fire evacuation drills with residents at least quarterly 2025 and 2026.	{N 525}		

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

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{N 525}	Continued From page 1 This is a repeat violation. See Statement of Deficiencies XFUX11. Findings include: The facility is licensed to provide care to 81 adults from client groups advanced aged and irreversible dementia/Alzheimer's disease. On 05/28/2026, Surveyor reviewed the provider's fire drill documentation for quarter 4 in 2025, and quarters 1 and 2 in 2026. Records indicated fire drills had been done quarterly with staff. At approximately 11:00 AM, Surveyor interviewed Administrator A. Administrator A stated the provider had not completed fire evacuation drills with residents since 2025. Administrator A stated s/he thought fire evacuation drills were to be done annually, and the last fire evacuation drill had been completed in August 2025. Administrator A stated the quarterly fire drills completed at the end of 2025 through the date of the survey had been done by sounding fire alarms and going through fire drill procedures with staff. Administrator A stated fire safety procedures were discussed with residents at resident meetings. Administrator A stated a fire evacuation drill had not been completed with residents since August of 2025. At approximately 11:43 AM, Surveyor interviewed Environmental Services Director (ESD) B, who stated during the quarterly fire drills with staff, some residents would come out of their rooms to see what was going on. ESD B stated s/he would tell residents to shelter in their rooms. ESD B stated s/he would not intentionally retrieve residents to participate in a fire evacuation drill. ESD B stated the quarterly fire drills had been	{N 525}		

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{N 525}	Continued From page 2 completed mostly for staff training purposes. The provider did not conduct fire evacuation drills at least quarterly with both employees and residents in 2025 and 2026.	{N 525}		