STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016386	A. BUILDING: _____ B. WING _____	12/07/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ROSEWOOD AFH	2551 HAVEY LN STOUGHTON, WI 53589

(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 12/06/2023, The Bureau of Assisted Living, Southern Regional Office conducted a standard survey at Rosewood, an AFH in Stoughton, WI. As a result of this survey, 1 violation of Chapter DHS 88 was issued. Census: 4	M 000		
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 all staff completed 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. Licensee A stated s/he started facility on 03/06/2017. Licensee A did not have 8 hours of training for the years of 2022 or 2023. This is a repeat deficiency of Statement of Deficiency (SOD) XSHY11, issued 10/14/2021.	M 246		

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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M 246	Continued From page 1 FINDINGS INCLUDE: On 12/06/2023, Surveyor arrived at facility for a standard survey. On 12/06/2023 at 9:00 AM, Surveyor spoke with Licensee A. Licensee A stated s/he was the only staff member for facility. Licensee A stated s/he started the facility in 2017. On 12/06/2023, Surveyor reviewed facility license. Licensee A is listed on the license with an effective date of 03/06/2017. On 12/06/2023 at 10:00 AM, Surveyor reviewed License A's training records. Surveyor did not find any training documented for the year of 2022 or 2023. Licensee A acknowledged s/he did not have training for the year of 2022 or 2023 in the training record. CROSS REFERENCE M0244 DHS Chapter 88.04 (5)(a) Training-15 Hours Within 6 months	M 246		