

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0019532	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 08/13/2026
NAME OF PROVIDER OR SUPPLIER SUNSET WOODS SENIOR LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 2900 S MOORLAND RD NEW BERLIN, WI 53151		
(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 08/13/2026, Surveyor conducted 1 verification visit at Sunset Woods Senior Living. Two deficiencies were identified. One of 2 deficiencies was a repeat violation. See Statement Of Deficiency (SOD) 8X1213, dated 05/19/2026. One of 2 deficiencies from Statement Of Deficiency (SOD) 8X213 dated 05/19/2026, was substantially corrected. Under statutory provisions of Wis. Stat. Ch. 50, a \$200 revisit fee is being assessed. Census: 32	{N 000}		
N 388	83.35(3)(c) Implement, follow the individual service plan Implementation. The CBRF shall implement and follow the individual service plan as written. This Rule is not met as evidenced by: Based on observation, interview and record review, the provider did not ensure the individual service plan (ISP) was implemented as written. Staff did not implement Resident 14's ISP when they did not sit with him/her during meals, encourage him/her to take sips every 3-4 bites or check for pocketing of food. Findings include: On 08/13/2026 from approximately 12:10 PM to 12:21 PM, Surveyor observed Resident 14 in the dining room feeding him/herself. Med Tech Q and	N 388		

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

TITLE

(X6) DATE

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N 388	Continued From page 1 Med Tech F were in the dining room. No staff were seated next to Resident 14, and no staff were observed encouraging him/her to take sips of liquid every 3-4 bites. On 008/13/2026, Surveyor reviewed Resident 14's record. S/he was admitted 09/28/2020. Diagnoses included Alzheimer's disease. Individual service plan (ISP) dated 07/30/2026 In the area of Nutrition/Eating- "...Choking precautions for meals and snack time: Put Broda up to high position. Offer sips [every] 3-4 bites. Observe for pocketing in cheeks and roof of mouth. Ask Res to put tongue in cheeks to clear any pocketing. Set up, cue and encourage ... Staff to sit with resident while eating ...Choking at meals and snack time 7/25/24 resident was choking on meal ..." On 08/13/2026 at 12:32 PM, Surveyor interviewed Med Tech Q who stated Resident 14 ate and drank independently. Surveyor reviewed Resident 14's ISP with Med Tech Q who stated s/he did not know it was in the ISP that staff were to sit with him/her during meals or offer sips every 3-4 bites. Med Tech Q stated s/he had access to all residents' ISPs. On 08/13/2026 at 1:11 PM, Surveyor discussed concern of not following ISP with Interim Executive Director R and Nurse N. Interim Executive Director R stated s/he would talk to and retrain staff. Cross Reference: 0448 83.41(2)(a)2 Nutrition: Diet	N 388		

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{N 448}	Continued From page 2	{N 448}		
{N 448}	83.41(2)(a) Nutrition: diet. Diets. 1. The CBRF shall provide each resident with palatable food that meets the recommended dietary allowance based on current dietary guidelines for Americans and any special dietary needs of each resident. 2. The CBRF shall provide a therapeutic diet as ordered by a resident 's physician. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure the physician ordered/speech therapy recommended diet was followed for 1 of 3 residents observed. Resident 14's speech therapy recommended diet was not followed when his/her food was not sufficiently moistened with extra sauces. This is a repeat deficiency. See Statement Of Deficiency (SOD) 8X1213, dated 05/19/2026. Findings include: The facility is licensed as a Class CNA (nonambulatory CBRF) able to serve up to 50 residents within the client groups of irreversible dementia/Alzheimer's, emotionally disturbed/mental illness, terminally ill, advanced aged and developmentally disabled. According to the International Dysphagia Diet Standardization Initiative, a level 5 diet consists of " ...Minced & Moist Foods: Soft and moist, but with no liquid leaking/dripping from the food Biting is not required Minimal chewing required Lumps of 4mm in size Lumps can be mashed	{N 448}		

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{N 448}	Continued From page 3 with the tongue Food can be easily mashed with just a little pressure from a fork. Should be able to scoop food onto a fork, with no liquid dripping and no crumbles falling off the fork ..." (Source: https://www.iddsi.org/images/Publications-Resources/PatientHandouts/English/Adults/5_minced_moist_adults_consumer_handout_30jan2019.pdf (Retrieval date: 08/13/2026)). According to the International Dysphagia Diet Standardization Initiative, a level 6 diet consists of " ...Meat cooked tender and chopped so pieces are no bigger than 1.5cm x 1.5cm lump size. If cannot serve soft and tender, serve as Minced and Moist ... For safety, AVOID these food textures that pose a choking risk for adults who need Level 6 Soft & Bite-Sized Food ...Crumbly bits Dry cake crumble, dry biscuits (add sauce to make these suitable) ...(Source: https://www.iddsi.org/images/Publications-Resources/PatientHandouts/English/Adults/6_soft_bite_sized_adult_consumer_handout_30jan2019.pdf (Retrieval date 08/14/2026)). On 08/13/2026 at 12:03 PM, Surveyor reviewed the facility Diet Type Report dated 08/13/2026, which identified Resident 14's diet as minced and moist with extra sauces. On 08/13/2026 at approximately 12:10 PM, Surveyor observed Resident 14's eating herb roasted pork with cornbread stuffing and parslied cauliflower in the dining room. The pork pieces were cubed into approximately 3/8" x 3/8" pieces and no extra sauce was on the food (Photo 1). [Note: 3/8" = 9mm - 10mm and there are 15 mm in 1.5 cm] On 08/13/2026 at 12:18 PM upon Surveyors request, Nurse N came to dining room and	{N 448}		

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{N 448}	Continued From page 4 Surveyor showed him/her Resident 14's food. Nurse N stated, "It needs gravy." Nurse N immediately retrieved and put a white sauce on Resident 14's food. On 08/13/2026 at approximately 12:22 PM, Surveyor interviewed Nurse N. Surveyor stated minced food is the size of a fork prong, and RN N stated s/he would get the written speech therapy note which would include a drawing of the recommended food size. On 08/13/2026 at 12:32 PM, Surveyor interviewed Med Tech Q who stated Resident 14 diet was minced and moist. Med Tech Q stated on 08/13/2026 at lunch, s/he served Resident 14 his/her food. Med Tech Q stated Cook O put the food onto the plates then handed staff the plates to be served to the residents, and if the plate contained a special diet, Cook O stated the resident's name when handing staff the plate. On 08/13/2026 at 12:40 PM, Surveyor interviewed Nurse N who reviewed Resident 14's speech therapy diet recommendation dated 01/24/2024 with Surveyor. The recommendation did not include a drawing of food size. The recommendation stated " ... [first paragraph] Recommend Trial [sic] of IDDS1 Level 6 soft chopped with extra sauces. [second paragraph] If you notice increased pocketing of food or coughing [sic] please return to Level 5 MINCED foods with extra sauce ..." RN N stated just prior to this interview, s/he called the speech therapy company and requested another evaluation of Resident 14. RN N stated the 01/24/2024 speech therapy recommendation was the diet order. On 08/123/2026 at 1:02 PM, Surveyor	{N 448}		

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{N 448}	Continued From page 5 interviewed Cook O who stated on 08/13/2026 every resident, including Resident 14 had chicken gravy on their lunch meal. Surveyor reviewed written 01/24/2024 speech therapy recommendation with Cook O who stated s/he thought extra sauce was needed if increased pocketing was noticed and since s/he had not noticed increased pocketing, s/he did not add extra sauce/gravy to Resident 14's food. On 08/13/2026, Surveyor reviewed Resident 14's record. S/he was admitted 09/28/2020. Diagnoses included Alzheimer's disease. Individual service plan (ISP) dated 07/30/2026 In the area of Nutrition/Eating- " ...Follow special diet daily: Regular diet, chopped (minced and moist) texture diet with extra sauces, thin liquids ...Choking at meals and snack time 7/25/24 resident was choking on meal ..." On 08/13/2026 at 1:11 PM, Surveyor discussed concern of not following diet order with Interim Executive Director R and Nurse N. Surveyor asked what was done to ensure residents received correct diets after SOD 8X1213, dated 05/19/2026 was issued on 06/16/2026. RN N stated their food vendor came and spoke with staff regarding descriptions of different types of diets, diets were discussed at all staff meetings and standup meetings, and periodic diet audits were completed. RN N stated staff would be retrained. Interim Executive Director R stated they would provide more visuals of special diets to staff. Cross Reference: 0388 83.35(3)(c) Implement, Follow The Individual Service Plan	{N 448}		