Tony Evers
Governor

Kirsten L. Johnson
Secretary

State of Wisconsin
Department of Health Services

DIVISION OF QUALITY ASSURANCE

BUREAU OF ASSISTED LIVING
SOUTHEASTERN REGIONAL OFFICE
819 N 6TH ST ROOM 609B
MILWAUKEE WI 53203-1606

Telephone: 414-227-2005
Fax: 414-227-3903
TTY: 711 or 800-947-3529

March 23, 2026

ELECTRONIC MAIL
SOD # EWUV11

NOTICE and ORDER

NOTICE OF VIOLATION
ORDER TO COMPLY WITH REQUIREMENTS
NOTICE OF SPECIAL ORDERS
NOTICE OF RIGHT TO APPEAL

Laneesha Barfield
2863 95th St.
Naperville, IL 60564

C/O Operator: SNH WIS Tenant LLC

Re: Charter Senior Living of Kenosha (0017779)
8351 Sheridan Rd.
Kenosha, WI 53143

Dear Laneesha Barfield:

This letter is a statutory NOTICE of VIOLATION and imposed ORDER on the operator of Charter Senior Living of Kenosha, located at 8351 Sheridan Rd., Kenosha, and sets forth appeal rights, if any. This regulatory action is taken by the Department of Health Services (Department) pursuant to Wis. Stat. § 50.034, and Wis. Admin. Code ch. DHS 89.

NOTICE OF VIOLATION

On February 3, 2026, an abbreviated survey and complaint investigation was concluded for Charter Senior Living of Kenosha by the Division of Quality Assurance, Bureau of Assisted Living, to determine if the above-referenced facility was in substantial compliance with Wis. Stat. ch. 50 or Wis. Admin. Code ch. DHS 89, or both, which set forth requirements for the administration and operation of a residential care apartment complex (RCAC). The Department is issuing Statement of Deficiency (SOD) #EWUV11 for violations of Wis. Stat. ch. 50 or Wis. Admin. Code ch. DHS 89, which establish the grounds for this action. SOD #EWUV11 is enclosed.

ORDER TO COMPLY WITH REQUIREMENTS

1. Pursuant to Wis. Admin. Code § DHS 89.56(3)(a), effective immediately, the operator shall comply with the requirements specified by Wis. Admin. Code ch. DHS 89 that establishes the standards for the operation of the Residential Care Apartment Complex in order to protect and promote the health, safety and welfare of the tenants.

AS SOON AS PRACTICABLE AND WITHOUT DELAY, within 45 days of receipt of this notice, the operator shall achieve and maintain substantial compliance with all requirements. All operational and tenant records required as evidence of compliance with applicable rules will be available to department representatives upon request.

According to Wis. Admin. Code § DHS 89.56(2), you are ordered to submit a Plan of Correction via an attestation of compliance. In satisfaction of this requirement: Insert the name of the facility in the space provided on the Attestation of Correction form F-02172. Within ***ten (10)*** *days of receipt of this NOTICE and ORDER, return the completed Attestation of Correction F-02172 to the Bureau of Assisted Living Southeastern Regional Office at 819 N. 6th St., Room 609B, Milwaukee, WI 53203-1606.*

The Department may, without notice, conduct an inspection to verify the operator's corrective action at any time after the date of compliance. Pursuant to Wis. Stat. § 50.034(10), the department may impose a $200 inspection fee for an on-site inspection to review compliance of violations resulting in enforcement action.

ADDITIONALLY:

WITHIN 10 DAYS of receipt of this notice, the operator may request an extension for the date of compliance. The request for an extension must be submitted to the Assisted Living Regional Director, Southeastern Regional Office, at DHSDQABALSERO@dhs.wisconsin.gov. The Regional Director will communicate to the operator a decision on the date of compliance extension.

SPECIAL ORDERS

Based on the results of the Department's inspection, and monitoring visit, and pursuant to Wis. Stat. § 50.034(2)(e), **EFFECTIVE UPON RECEIPT OF THIS NOTICE and ORDER,** the Department of Health Services **HEREBY ORDERS** that **Charter Senior Living of Kenosha:**

1. Pursuant to Wis. Admin. Code § DHS 89.56(3)(c), effective immediately, the operator shall develop and implement corrective measures to ensure that tenants receive proper care and treatment, that their health and safety are protected and promoted and that their rights are respected. The operator's corrective measures shall ensure the following:

WITHIN 5 DAYS of receipt of this notice, the operator shall provide the legal representative and case manager (if any) for Tenant 1 with a copy of Statement of Deficiency (SOD) EWUV11 and a copy of this Notice and Order letter. The operator shall retain evidence, acceptable to the department, to verify compliance with this order. Acceptable documentation will be a signed, certified mail receipt or a verification letter or email from the legal representative and case manager.

WITHIN 14 DAYS of receipt of this notice, the operator shall retroactively, with available information, document a complete investigation report of the alleged incident of caregiver misconduct issued under Wis. Admin. Code § DHS 13.05(3)(a) Entity Allegations Reporting Requirements in SOD EWUV11. The investigation will conform to requirements and guidelines specified by Wis. Admin. Codes ch. DHS 13, ch. DHS 89 and The Wisconsin Background Check and Misconduct Investigation Program Manual. The operator will submit a copy of the investigation report to the Department's Office of Caregiver Quality for department review.

WITHIN 45 DAYS of receipt of this notice, the operator's corrective measures shall include the development (or review) of a written procedure to address:

Misconduct Reporting and Investigations

The procedure shall specify the following;
- For all allegations or incidents of misconduct, the operator shall immediately take steps to ensure the safety of all tenants
- How and to whom staff are to report incidents
- How internal investigations will be completed, documented, and reported
- How staff will be trained on the procedures related to allegations of caregiver misconduct
- How tenants will be informed of these procedures

The Wisconsin Background Check and Misconduct Investigation Program Manual is available as a reference at: https://www.dhs.wisconsin.gov/publications/p0/p00038.pdf

ADDITIONALLY,
All managers and service providers will receive training regarding the operator's written procedure required by Order #1. Training will be documented in employee files and will include the date/duration of training, the signature/qualifications of the instructor, and evidence of successful completion of the training.

A copy of the written procedure and all documentation as evidence of meeting the requirements in Order #1 will be made available to department representatives upon request.

NOTICE OF RIGHT TO APPEAL

According to Wis. Stat. § 50.034(8)(c) and Wis. Admin. Code § DHS 89.59, you may request an administrative hearing of the Department's action. To notify the Department of your request for a hearing, your written request **must be filed with the Division of Hearings and Appeals (DHA) within ten (10) days after receipt of this NOTICE**. Please note, according to Wis. Admin. Code § DHS 89.59(2), an appeal is filed on the date that it is received by the Division of Hearings and Appeals. Send your request for a hearing to:

RCAC APPEAL
DHA
PO BOX 7875
MADISON WI 53707-7875

Include in your written request for a hearing **ALL** of the following:

- ✓ The name and address of the facility;
- ✓ A description of the action being appealed (attach a copy of this NOTICE to your appeal);
- ✓ The effective date of the action;
- ✓ A concise statement of the reasons for objecting to the action;
- ✓ What type of relief you are seeking; and
- ✓ The name, address and telephone number of any person who may be expected to appear on behalf of the facility.

YOUR APPEAL MAY BE DENIED OR DISMISSED IF THE REQUEST IS INCOMPLETE OR NOT FILED WITH DHA WITHIN THE 10-DAY APPEAL TIME.

Please note that according to Wis. Stat. § 50.034(8)(d), if you file an appeal, then payment of any forfeiture is due within ten (10) days after you receive the final decision in the case after exhaustion of administrative review.

* * *

If you have questions about this letter, please contact Mary Beth Hoffman, Assisted Living Regional Director, at (414) 227-2005.

Sincerely,

Kenneth Brotheridge, Assisted Living Director
Bureau of Assisted Living
Division of Quality Assurance

Enclosure
KB/jw