STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017594	A. BUILDING: _____ B. WING _____	10/16/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ELAINES HOPE MEMORY CARE	7500 W NORTH AVE MILWAUKEE, WI 53213

(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 10/16/2025, Surveyor completed an abbreviated survey at Elaines Hope Memory Care. As a result, 1 deficiency was identified. Census: 62	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 ensure quarterly fire drill reports documented a total evacuation time for 8 of 11 quarters, in calendar years 2023, 2024 and to date in 2025. The fire drills did not contain total evacuation time. Findings include:	N 525		

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

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N 525	Continued From page 1 The facility was licensed as a Class CNA (non-ambulatory) Community Residential Facility able to serve up to 72 residents in the client groups of advanced aged and irreversible dementia/Alzheimer's. On 10/10/2025, at 10:08 AM, Surveyor reviewed the facility's safety records and identified the following: The fire drill records reported fire drills were conducted on the following dates and times and did not include total evacuation time: 01/04/2023 at 4:51 PM 02/25/2023 at 8:01 AM 03/07/2023 at 5:06 AM 04/26/2023 at 3:03 PM 05/19/2023 at 10:58 AM 07/20/2023 at 9:02 PM 08/30/2023 at 12:52 PM 09/14/2023 at 1:08 AM 10/13/2023 at 7:02 PM 12/18/2023 at 11:02 PM 01/25/2024 at 5:02 PM 02/16/2024 at 7:52 AM 03/05/2024 at 5:07 AM 04/24/2024 at 2:55 PM 05/30/2024 at 11:05 AM 07/30/2024 at 9:05 PM 08/13/2024 at 1:07 PM 09/04/2024 at 1:06 AM 10/30/2024 at 7:03 PM 11/21/2024 at 6:25 PM 12/27/2024 at 11:09 PM 01/14/2025 at 4:55 PM 02/23/2025 at 9:19 AM 03/11/2025 at 4:56 AM 04/15/2025 at 3:06 PM 05/23/2025 at 1:06 PM	N 525		

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N 525	Continued From page 2 07/30/2025 at 9:06 PM 08/27/2025 at 1:06 PM 09/12/2025 at 1:03 AM Surveyor reviewed the following fire drills which did contain total evacuation time: 06/20/2023 at 3:07 AM full evacuation 4 minutes 06/27/2024 at 3:11 AM full evacuation 4 minutes 06/18/2025 at 1:55 PM full evacuation 3 minutes and 27 seconds On 10/10/2025, at approximately 10:50 AM, Surveyor interviewed Maintenance Director B. Maintenance Director B reported s/he was responsible for completing fire drills and maintaining the records. S/He reported residents were not evacuating the building during a fire drill. The facility had a system in which they closed residents' room doors during the fire drills and utilized a roster to account for each resident. Maintenance Director B reported all residents on the entire campus were evacuated during the June fire drills once a year. On 10/10/2025, at approximately 11:50 AM, Surveyor interviewed Executive Director (ED) A. ED A reported the fire drills occur monthly at different times. ED A reported maintenance shuffles the location. ED A reported during a fire, staff would close the blinds, doors and would wait until the fire department arrived. On 10/16/2025, at 10:40 AM, Surveyor interviewed ED A. ED A reported residents were evacuate during fire drills. ED A reported they would evacuate 1 hallway per month, but confirmed the entire facility was not evacuated all at once. ED A confirmed the paperwork did not indicate the evacuation time of the drills. ED A	N 525		

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N 525	Continued From page 3 reported they would ensure compliance with the codes.	N 525		