STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017413	A. BUILDING: _____ B. WING _____	R-C 03/02/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SERENITY BLESSED HOME	**7937 W HOLMES AVE GREENFIELD, WI 53220**

(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 03/02/2026, Surveyor conducted a standard survey, verification visit and 1 complaint investigation. Four deficiencies were identified. One complaint was unsubstantiated. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 8	{N 000}		
N 443	83.39(5) Pets vaccinated. The CBRF shall ensure that pets are vaccinated against diseases, including rabies, if appropriate. This Rule is not met as evidenced by: Based on observation, record review, and interview, the provider did not ensure all pets were vaccinated for 1 of 1 pet residing in the facility. Resident 2 had 1 unvaccinated cat living in the facility at the time of survey. Findings include: The provider was licensed on 12/22/2020, as a class CNA (non-ambulatory) Community Based Residential Facility (CBRF) to serve up to 8 residents. On 03/03/2026, at approximately 10:00 AM, Surveyor toured the facility and observed a cat in Resident 2's room. Resident 2 confirmed it was their cat, and it had always lived with them. Resident 2 was admitted to the facility on 03/03/2023. On 03/03/2026, at approximately 12:00 PM, Surveyor reviewed the cat's vaccination records	N 443		

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

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N 443	Continued From page 1 which documented the last annual vaccinations were administered on 10/09/2024. On 03/03/2026, at approximately 1:00 PM, Surveyor interviewed Administrator B. Administrator B confirmed 10/09/2024 was the last time the cat had been vaccinated. Administrator B stated, "They are not supposed to have pets but one day [Resident 2] just showed up with the cat. They say they are going to sell the cat. We will make sure the cat gets vaccinated."	N 443		
N 444	83.40 Oxygen storage. Oxygen storage. Oxygen storage shall be in an area that is well ventilated and safe from environmental hazards, tampering, or the chance of accidental damage to the valve stem. If oxygen cylinders are in use, oxygen cylinders shall be secured in an upright position. If stored upright, cylinders must be secured. If stored horizontally, cylinders shall be on a level surface where they will remain stationary. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure oxygen was secured when stored upright in resident room for 2 of 2 oxygen tanks observed. Resident 1 had two, oxygen cylinders stored upright, on the floor and not secured. Findings include: On 03/03/2026, at approximately 10:20 AM, Surveyor toured Resident 1's room and observed 2 unsecured, oxygen cylinders stored upright just inside the door on the floor.	N 444		

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N 444	Continued From page 2 On 03/03/2026, at approximately 1:00 PM, Surveyor interviewed Administrator B who confirmed the oxygen cylinders were routinely stored unsecured in the resident's room. Administrator B stated, "I think we have a rack in [Resident 1's] closet, I will make sure we begin using it. I didn't know about that requirement."	N 444		
N 514	83.46(4)(c) Electrical protection. Protection. 1. ' Fuses and circuit breakers. ' Tamper-proof fuses or circuit breakers not to exceed the ampere capacity of the smallest wire size in the circuit shall protect the branch circuits. 2. ' Ground fault interruption. ' Ground fault interrupt protection shall be required for all outlets within 6 feet of a plumbing fixture, all outlets on the exterior of the CBRF and in the garage. This Rule is not met as evidenced by: Based on observation and interview, ground fault interrupt (GFI) protection for outlets within 6 feet of a plumbing fixture were not installed in 1 of 1 electrical outlet in the facility kitchen. Findings include: On 03/03/2026, at approximately 10:30 AM, Surveyor toured the facility kitchen accompanied by Licensee A. Surveyor observed the kitchen sink located on the eastern interior wall of facility kitchen. The sink faucet was located approximately 18" from an electrical outlet which was not equipped with GFI. On 03/03/2026, at approximately 10:30 AM, Surveyor interviewed Licensee A and asked if they were aware of the GFI requirement for electrical outlets within 6 feet of plumbing fixtures.	N 514		

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N 514	Continued From page 3 Licensee A stated, "I didn't know about it but it's not a problem, I will get that swapped out as soon as possible."	N 514		
N 631	83.59(1)(a) Class AS, ANA, CS, CNA 2 grade level exits All habitable floors shall have at least 2 exits providing unobstructed travel to the outside. Small class AA CBRFs licensed on or before the effective date of this section with no more than 2 habitable floors may have one exit from the second floor. Class AS, class ANA, class CS and class CNA CBRFs shall have at least 2 grade level or ramped exits to grade. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure the Community Based Residential Facility (CBRF) had at least 2 exits providing unobstructed travel to the outside for 1 of 2 exits. The back exit was located off southwest corner of the kitchen and was identified as an emergency exit on the facilities posted exit diagram. The bottom of the ramp had a 4 inch drop off and was not ramped to grade. Findings include: The facility is an 8 bed, Class CNA (non-ambulatory) CBRF which serves residents who may be advanced aged, developmentally disabled, irreversible dementia/Alzheimer's, physically disabled, traumatic brain injury, terminally ill and emotionally disturbed/mental illness. Surveyor observed 3 residents sitting in	N 631		

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N 631	Continued From page 4 wheelchairs and 2 residents who were bed bound. On 03/03/2026, at approximately 10:00 AM, Surveyor toured the facility and observed the following: Located on the wall of the facility was a diagram of the emergency exits which showed two ramped exits from the home. The diagram showed one exit on the north side of the home and one exit on the south side of the home. The back door located on the south side of the home was identified as an emergency exit and exited onto a ramp. The bottom of the ramp had a 4-inch drop off and was not ramped to grade. On 03/03/2026, at approximately 1:00 PM, Surveyor interviewed Licensee A. Licensee A confirmed the ramp had a 4-inch drop at the bottom and stated they would add a transition strip as soon as possible.	N 631		