

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0014642	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED C 06/09/2026
NAME OF PROVIDER OR SUPPLIER OAK PARK PLACE AUTUMN LANE II			STREET ADDRESS, CITY, STATE, ZIP CODE 719 JUPITER DR MADISON, WI 53718		
(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 06/09/2026, Surveyor conducted a complaint investigation and standard survey at Oak Park Place Autumn Lane II. One(1) deficiency was identified. The complaint was unsubstantiated. Census: 51	N 000			
N 277	83.25 Continuing education The administrator and resident care staff shall receive at least 15 hours per calendar year of continuing education beginning with the first full calendar year of employment. Continuing education shall be relevant to the job responsibilities and shall include, at a minimum, all of the following: (1) Standard precautions; (2) Client group related training; (3) Medications; (4) Resident rights; (5) Prevention and reporting of abuse, neglect and misappropriation; (6) Fire safety and emergency procedures, including first aid. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 eligible employees reviewed received 15 hours of continuing education per calendar year, including trainings in standard precautions, medications, abuse, fire safety and emergency procedures including first aid. Caregiver B did not receive 15 hours of continuing education in the required training topics in 2024 and 2025.	N 277			

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

TITLE

(X6) DATE

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N 277	Continued From page 1 Findings include: On 06/09/2026 at approximately 12:00 p.m., Surveyor reviewed Caregiver B's record, provided by Administrator A. Caregiver B's record documented that s/he was hired on 11/27/2018. Caregiver B's record did not have documentation that s/he received continuing education in standard precautions; medications; prevention and reporting of abuse, neglect and misappropriation; emergency procedures including first aid and did not have documentation that Caregiver B received at least 15 hours of continuing education in 2024. Caregiver B's record did not have documentation that s/he received continuing education in client group training; medications; resident rights; prevention and reporting of abuse, neglect and misappropriation; fire safety and emergency procedures including first aid and did not have documentation that Caregiver B received at least 15 hours of continuing education in 2025. On 06/09/2026 at approximately 1:00 p.m., Surveyor reviewed the above concerns with Administrator A. Administrator A confirmed that Caregiver B did not receive the continuing education training topics or hours and stated that the provider will ensure continuing education is completed moving forward.	N 277			