STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0019538	A. BUILDING: _____ B. WING _____	C 09/10/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CASTLE MANOR VI LLC	3130 SUNNY VIEW LN BROOKFIELD, WI 53005

(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
M 000	INITIAL COMMENTS On 09/10/2024, Surveyor conducted a complaint investigation at Castle Manor VI LLC, an AFH located in Brookfield, WI. As a result of the investigation, 1 violation of Chapter DHS 88 was issued. The complaint was substantiated. Census: 4	M 000		
M 276	88.05(3)(a) HOME ENVIRONMENT An adult family home shall be safe, clean and well-maintained and shall provide a homelike environment. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure a safe, clean and well maintained homelike environment. There were cleaning chemicals unsecured, unlabeled food and Resident 1's bedroom smelled strongly of urine. Findings include: On 07/17/2024, the Department received a complaint that alleged environmental concerns at the facility. On 09/10/2024 at 9:00 AM, Surveyor toured the physical environment. OBSERVATIONS:	M 276		

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

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M 276	Continued From page 1 There was a bottle of bleach unsecured in the closet. The closet was in close proximity of resident bedrooms. The closet door was unlocked. There was a bottle of disinfectant spray labeled toxic in the closet. The closet was in close proximity of resident bedrooms. The closet door was unlocked. Resident 1's bedroom smelled strongly of urine. The smell of urine could be detected from 10 feet from Resident 1's bedroom. There was a container of lettuce that was unlabeled. Licensee A stated the food belonged to Resident 2. There was a container of meat that was unlabeled. Licensee A stated the food belonged to Resident 2. On 09/10/2024 at 12:00 PM, Surveyor discussed the above concern with Licensee A. Licensee A acknowledged that the cleaning closet should be locked at all times so residents cannot access chemical cleaners. Licensee A acknowledged that all food not in original containers should be labeled. Licensee A acknowledged that Resident 1's bedroom should be cleaned to ensure that his/her room does not smell of urine.	M 276		