STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0015719	A. BUILDING: _____ B. WING _____	C 07/03/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
FIRST CLASS CARE WISCONSIN LLC	5441 N 73RD ST MILWAUKEE, WI 53218

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M 000	INITIAL COMMENTS On 06/27/2025, with information gathered through 07/03/2025, Surveyor conducted a standard licensure survey and a complaint investigation. Seven deficiencies were identified. Complaint was unsubstantiated. Census: 1	M 000		
M 276	88.05(3)(a) Homelike 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 the adult family home was safe, clean, well-maintained and provide a homelike environment for 1 of 1 resident. Census 1. Findings include: On 06/27/2025, at approximately 4:15 PM, Surveyor and Licensee A conducted a tour of the home and observed: Resident Bathrooms: -Ceramic tile floor was cracked -Toilet basin appeared to have a buildup of hair and dust -Ceiling fan had what appeared to be a buildup of	M 276		

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

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M 276	Continued From page 1 dust Kitchen: -Cabinetry felt greasy to touch and appeared to have food like substances spilled on them. A cupboard door was hanging by one hinge. -Kitchen floor appeared to have a buildup of food and dirt like substances -Microwave interior had food like substance splattered through out -Ceramic tile walls had a thick gold yellow substance covering approximately the top 12 inches of wall throughout. The lower walls displayed splatters of a food like substance -Stove and oven had a buildup of what appeared to be a food like substance Licensee A stated the previous surveyor commented on how clean the home was.	M 276		
M 344	88.05(4)(d)2.a FIRE SAFETY EVACUATION PLAN REVIEW The licensee shall review the fire safety evacuation plan with each new resident immediately following placement and shall evaluate the resident using a form provided by the department to determine whether the resident is able to evacuate the home without any help within 2 minutes. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 resident (Resident 1) reviewed were evaluated, using form F-62373 Resident Evacuation Assessment, immediately	M 344		

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M 344	Continued From page 2 following placement. Census 1. Findings include: On 06/27/2025, Surveyor reviewed Resident 1's record. Resident 1 moved into the home 02/22/2024. Resident 1's record did not contain a Resident Evacuation Assessment form. On 06/27/2025, at approximately 2:00 PM, Surveyor interviewed Licensee A. Licensee A stated s/he had not completed the form.	M 344		
M 346	88.05(4)(d)2.b FIRE EVACUATION ANNUAL EVALUATION Each resident shall be evaluated annually for evacuation time, using the departments form. All service providers who work on the premises shall be made aware of each resident having an evacuation time of more than 2 minutes. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 resident reviewed were evaluated annually for evacuation time, using the Department form F-62373 Resident Evacuation Assessment. Census 1. Resident 1's evacuation evaluation was not completed in 2025. Findings include:	M 346		

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M 346	Continued From page 3 On 06/27/2025, Surveyor reviewed Resident 1's record. Resident 1 moved into the home 02/22/2024. Resident 1's record did not contain a Resident Evacuation Assessment form stating that s/he had been reviewed annually for his/her evacuation capabilities in 2025. On 06/27/2025, at approximately 2:00 PM, Surveyor interviewed Licensee A. Licensee A stated s/he had not completed the form but would update Resident 1's record.	M 346		
M 384	88.06(2)(b) SERVICE AGREEMENT EXCEPT RESPITE An adult family home shall have a service agreement with each person to be admitted to the home except a person being admitted for respite care. The service agreement shall be completed prior to admission and revised at least 30 days prior to any change. The service agreement shall be dated and signed by the licensee and the person being admitted or the persons guardian or designated representative. Copies shall be provided to all parties and to the placing agency, if any. This Rule is not met as evidenced by: Based on record review and interview, the provider did not have a service agreement for 1 of 1 resident (Resident 1) prior to admission. Census 1.	M 384		

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M 384	Continued From page 4 Findings include: On 06/27/2025, Surveyor reviewed Resident 1's record. Resident 1 moved into the home 02/22/2024 and was represented by Guardian B. Resident 1's record contained a service agreement which had his/her name written on it, but was not dated or signed by the provider or Guardian B. On 06/27/2025, at approximately 2:00 PM, Surveyor interviewed Licensee A. Licensee A stated Guardian B visited Resident 1 weekly and s/he would have Guardian B sign Resident 1's admission paperwork	M 384		
M 402	88.06(2)(c)8 RESIDENT RIGHTS AND GRIEVANCE A statement indicating that the resident rights and grievance procedures have been explained and copies provided to the resident and the resident's guardian or designated representative, if any. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that resident rights and grievance procedures were explained to each resident or resident representative prior to admission for 1 of 1 resident (Resident 1) reviewed. Census 1. Findings include: On 06/27/2025, Surveyor reviewed Resident 1's	M 402		

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M 402	Continued From page 5 record. Resident 1 moved into the home 02/22/2024 and was represented by Guardian B. Resident 1's record contained documents related to resident rights and grievance procedures, but was not dated or signed by Guardian B. On 06/27/2025, at approximately 2:00 PM, Surveyor interviewed Licensee A. Licensee A stated Guardian B visited Resident 1 weekly and s/he would have Guardian B sign Resident 1's admission paperwork as s/he did not have any other documentation to show that Resident 1 and his/her resident representative were explained Resident 1's rights and grievance procedure.	M 402		
M 404	88.06(3)(a) INDIVIDUAL SERVICE PLAN & ASSESSMENT The licensee shall ensure that a written assessment and individual service plan is completed and developed for each resident within 30 days after placement. This Rule is not met as evidenced by: Based on record review and interview, the licensee did not ensure 1 of 1 resident (Resident 1) record reviewed had a written assessment and individual service plan (ISP) completed and developed within 30 days after placement. Findings include: On 06/27/2025, Surveyor reviewed Resident 1's	M 404		

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M 404	Continued From page 6 record. Resident 1 moved into the home 02/22/2024 and was represented by Guardian B. Resident 1's record did not contain an ISP. On 06/27/2025, at approximately 2:00 PM, Surveyor interviewed Licensee A. Licensee A stated s/he did not have an ISP for Resident 1. Licensee A showed a document that s/he had received from Resident 1's managed care organization which did not identify the care guidelines staff would provide to Resident 1.	M 404		
M 424	88.06(3)(f) REVIEW OF ISP The individual service plan shall be reviewed at least once every 6 months by the licensee, the resident or the resident's guardian, the service coordinator, if any, the designated representative, if any, the placing agency with the resident participating in a manner appropriate for the resident's level of understanding and method of communication. This review is to determine continued appropriateness of the plan and to update the plan as necessary. A plan shall be updated, in writing, whenever the resident's needs or preferences change substantially or when requested by the resident or the resident's guardian. This Rule is not met as evidenced by: Based on record review and interview, the	M 424		

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M 424	Continued From page 7 provider did not ensure 2 of 2 resident (Resident 1 and Resident 2) Individual Service Plans (ISP) was reviewed at least every 6 months. Findings include: Resident 1 moved into the home 02/22/2024 and was represented by Guardian B. Resident 1's record did not contain an ISP updated 08/2024 or 02/2025. Resident 2 moved into the home 02/2022 and was represented by a managed care organization (MCO) Care Manager (CM). Resident discharged 02/09/2025. Resident 2's record did not contain an ISP updated 08/2023, 02/2024, and 08/2024. On 06/27/2025, at approximately 2:00 PM, Surveyor interviewed Licensee A. Licensee A stated s/he did not have an ISP for Resident 1. Licensee A showed a document that s/he had received from Resident 1's managed care organization which did not identify the care guidelines staff would provide to Resident 1 and was not signed by the provider or Guardian B. Licensee A stated the ISP that Surveyor reviewed for Resident 2 was his/her current ISP.	M 424		