

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0010297	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 05/23/2024
NAME OF PROVIDER OR SUPPLIER ST CLARE FRIEDENSHEIM		STREET ADDRESS, CITY, STATE, ZIP CODE 2003 4TH STREET MONROE, WI 53566		
(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
U 000	INITIAL COMMENTS From 05/22/2024 to 05/23/2024, Surveyor conducted a standard survey at St Clare Friedensheim, a RCAC in Monroe. One deficiency was identified. Census: 51	U 000		
Z 012	50.065(2)(bm) OUT OF STATE BACKGROUND CHECKS If the person who is the subject of the search under par. (am) or (b) is not a resident of this state or if at any time within the 3 years preceding the date of the search that person has not been a resident of this state, or if the department or entity determines that the person's employment, licensing, or state court records provide a reasonable basis for further investigation, the department or the entity shall make a good faith effort to obtain from any state or other United States jurisdiction in which the person is a resident or was a resident within the 3 years preceding the date of the search information that is equivalent to the information specified in par. (am) 1. or (b) 1. The department or entity may require the person to be fingerprinted on 2 fingerprint cards, each bearing a complete set of the person's fingerprints. The department of justice may provide for the submission of the fingerprint cards to the federal bureau of investigation for the purposes of verifying the identity of the person fingerprinted and obtaining the records of his or her criminal arrests and convictions.	Z 012		

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

TITLE

(X6) DATE

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Z 012	Continued From page 1 This Rule is not met as evidenced by: Based on record review and interview, the provider did not make a good faith effort to obtain a criminal history report from all states where an employee resided within 3 years of his/her caregiver background check. Caregiver B indicated on his/her initial background information disclosure (BID) that s/he lived outside Wisconsin within 3 years from his/her hire date but the provider did not conduct a background check from the outside state. Findings include: On 05/22/2024 at approximately 10:30 a.m., Surveyor reviewed employee records provided by Administrator A. Caregiver B's record indicated s/he was hired on 01/15/2024. The record included a BID, dated 01/10/2024 that stated s/he had resided in Illinois within 3 years of hire. Surveyor requested documentation to indicate a background check was completed with Illinois at the time of Caregiver B's hire. Administrator A stated s/he needed to follow up with human resources. On 05/23/2024 at approximately 12:30 p.m., Administrator A followed up with Surveyor and stated s/he was unable to provide documentation to indicate a background check with Illinois was initiated the time of hire. Administrator A stated since identifying the concern on 05/22/2024, human resources had requested a background check with Illinois.	Z 012		