STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	110522	A. BUILDING: _____ B. WING _____	R 12/18/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DANE COUNTY CARE CENTER	300 FEMRITE DR MONONA, WI 53716

(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 12/09/2024, Surveyors conducted a complaint investigation and verification visit at Dane County Care Center. One deficiency was identified; the complaint was substantiated. One previous deficiency was substantially corrected. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 19	{N 000}		
N 205	83.14(2)(j) Not permit a condition of substantial risk. The licensee may not permit the existence or continuation of any condition which is or may create a substantial risk to the health, safety or welfare of any resident. This Rule is not met as evidenced by: Based on record review and interview, the licensee permitted the continuation of risk by not maintaining documentation of a valid driver's license for staff who transport residents as part of their job responsibilities. Findings include: On 10/23/2024, the Department received a complaint alleging concerns with resident treatment and safety. On 12/09/2024, Surveyors conducted a verification visit and complaint investigation. At 2:24 p.m., Surveyor asked Quality Assurance A if	N 205		

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

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N 205	Continued From page 1 s/he was aware of any grievances. Quality Assurance A stated yes, s/he was aware of concerns Resident 3 had during his/her stay with the provider and the grievance s/he filed and added that Client Rights H had conducted an investigation into the allegations. Resident 3 alleged that Caregiver F and Caregiver G did not have a valid driver's license and was permitted to drive residents at work. Client Rights H grievance response indicates that Caregiver F never drove any patient in a provider vehicle and Caregiver H has a valid license. At 2:54 p.m., Surveyor asked to review documentation of the provider's staff who drive as part of their job responsibilities. Director of Human Resources E stated that the documentation should be in each employee's file but it is not, and that will have to be course corrected. Director of Human Resources E stated that there has been changes in staff and they are finding some things that have slipped through the cracks and it appears this is one of those things. At 3:11 p.m., Surveyor asked Team Lead I if s/he has documentation of who is eligible to be a driver and who is not. Team Lead I stated that there is a form that is filled out and uploaded into the system and that it is up to each individual employee to upload them and keep track. Surveyor asked Team Lead I to review that documentation. Team Lead I stated s/he was unable to find the documentation. Surveyor asked Team Lead I how a supervisor would know whether a staff is eligible to drive residents or not. Team Lead I stated, "I don't know." On 12/18/2024, Quality Assurance A provided auto insurance for the provider's vehicles and stated that staff drive resident's in company cars.	N 205		

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N 205	Continued From page 2 On 09/18/2024, Resident 3 emailed the provider his/her grievances, including concerns about resident safety in regards to caregiver's having a valid drivers. Quality Assurance A and Clients Rights H conducted an investigation into the allegations and responded to Resident 3's grievance, including whether Caregiver F or Caregiver G had a valid driver's license. The licensee was aware there was a concern regarding caregiver's driver's license after conducting an investigation on Resident 3's grievance and permitted the continuation of the condition of risk by not ensuring every staff that has job responsibilities including transporting residents had a valid driver's license on file.	N 205		