

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 110522	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 03/26/2025
NAME OF PROVIDER OR SUPPLIER DANE COUNTY CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 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 03/25/2024, Surveyor conducted a verification visit, complaint investigation and standard survey at Dane County Care Center. Three (3) deficiencies were identified; one of the deficiencies was a repeat from the previous statement of deficiency (SOD), dated 12/18/2024. The complaint was unsubstantiated. Under statutory provisions of Wis. Stat. Ch. 50, a \$200 revisit fee is being assessed. Census: 23	{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. Repeat violation from statement of deficiency (SOD) IO5D12, dated 12/18/2024. Findings include: On 03/25/2025, Surveyor conducted a complaint investigation, verification visit and standard	{N 205}		

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

TITLE

(X6) DATE

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{N 205}	Continued From page 1 survey. At approximately 11:00 a.m., Director of Human Resources E stated s/he did not have documentation of staff's driver's license now, but that his/her department had retained a copy of each caregiver's driver's license after the last survey. Director of Human Resources E stated that s/he would send documentation of a valid driver's license for Caregivers J, K, and L. Surveyor asked if driving was a part of these caregiver's job responsibilities. Facilities Director M stated yes, caregivers are expected to drive residents. On 03/26/2025, at 9:19 a.m., Director of Human Resources E emailed Surveyor stating that Caregiver K did not have documentation of a driver's license and did not send documentation of Caregiver J or L's driver's license. On 03/26/2025 at 10:44 p.m., Quality Assurance A stated, "Staff are not permitted to drive their own vehicles to transport clients, staff that have been approved as a driver (passing background check and valid driver's license) are permitted to transport with a designated facility vehicle. Since our last visit with you, we have taken measures to screen new employees by collecting these documents upon hire. [Director of Human Resources E] team have run a complete audit of staff and have collected driver's licenses that were not on file, they still may be in this process as we are short staffed in HR." The licensee permitted the continuation of the continued risk of residents health, safety and welfare by not ensuring the provider had documentation of a valid driver's license before employees were permitted to drive residents as part of their job responsibilities.	{N 205}		

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N 220	Continued From page 2	N 220			
N 220	83.17(2)(a) Employees screened for communicable disease. The CBRF shall obtain documentation from a physician, physician assistant, clinical nurse practitioner or a licensed registered nurse indicating all employees have been screened for clinically apparent communicable disease including tuberculosis. Screening for tuberculosis shall be conducted using centers for disease control and prevention standards. The screening and documentation shall be completed within 90 days before the start of employment. The CBRF shall keep screening documentation confidential, except the department shall have access to the screening documentation for verification purposes. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 3 caregivers reviewed, were screened for clinically apparent communicable disease, including tuberculosis, within 90 days before the start of employment. Caregiver J and Caregiver K were not screened for clinically apparent communicable disease, including tuberculosis, within 90 days before the start of employment. Findings include: On 03/25/2025 at approximately 8:30 a.m., Surveyor requested an employee roster and records from Director of Human Resources E. Director of Human Resources E provided records that did not include tuberculosis tests for Caregiver J and Caregiver K.	N 220			

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N 220	Continued From page 3 At approximately 11:45 a.m., Surveyor Interviewed Director of Human Resources E regarding the missing tuberculosis tests. Director of Human Resources E stated those records could be in another area and s/he would email the tuberculosis tests. Surveyor requested that records, including staff screened for clinically apparent communicable disease, including tuberculosis be sent over by 12:00 p.m. on 03/26/2025. On 03/26/2025 at 9:19 a.m., Director of Human Resources E sent an email confirming that the provider was unable to locate documentation of a tuberculosis test for Caregiver J and Caregiver K.	N 220			
N 239	83.20(2)(a)-(d) Department-approved training courses. Standard Precautions. All employees who may be occupationally exposed to blood, body fluids or other moist body substances, including mucous membranes, non-intact skin, secretions, and excretions except sweat, whether or not they contain visible blood shall successfully complete training in standard precautions before the employee assumes any responsibilities that may expose the employee to such material. Fire safety. Within 90 days after starting employment, all employees shall successfully complete training in fire safety. First aid and choking. Within 90 days after starting employment, all employees shall successfully complete training in first aid and procedures to alleviate choking. Medication administration and management. Any employee who manages, administers or assists residents with prescribed or over-the-counter medications shall complete training in medication	N 239			

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N 239	Continued From page 4 administration and management prior to assuming these job duties. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 3 employees obtained all department approved training as required. Caregiver J did not have training in fire safety within 90 days after starting employment. Caregiver J did not have training in first aid and choking within 90 days after starting employment. Findings include: On 04/02/2020, Surveyor conducted a review of 3 employees to verify compliance with department approved training requirements. Surveyor requested training records from Director of Human Resources E for Caregiver J, Caregiver K, and Caregiver L. Fire Safety The record for Caregiver J, hired 05/20/2024, did not contain evidence of training or evidence of meeting an exemption for fire safety. On 03/25/2025, at approximately 10:45 a.m., Surveyor interviewed Facilities Director M. Facilities Director M confirmed the provider did not have evidence Caregiver J completed or met an exemption for fire safety training. On 03/25/2025, Surveyor verified Caregiver J was	N 239		

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N 239	Continued From page 5 not on the Community-Based Care and Treatment training registry for fire safety . First Aid and Choking The record for Caregiver J, hired 05/20/2024, did not contain evidence of training or evidence of meeting an exemption for first aid and choking. On 03/25/2025, at approximately 10:45 a.m., Surveyor interviewed Facilities Director M. Facilities Director M confirmed the provider did not have evidence Caregiver J completed or met an exemption for first aid and choking training. On 03/25/2025, Surveyor verified Caregiver J was not on the Community-Based Care and Treatment training registry for first aid and choking.	N 239			