Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016535	A. BUILDING: _____ B. WING _____	08/15/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NEW CARE FAMILY SERVICES LLC MEQUON I	9945 W WAUWATOSA ROAD MEQUON, WI 53092

(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 08/15/2023, Surveyor conducted an abbreviated survey at New Care Family Services LLC Mequon II, an Adult Family Home (AFH) in Mequon, WI. One deficiency identified. Census: 4	M 000		
Z 019	50.065(6)(am) Four Year Caregiver Background Requirement Every 4 years an entity shall require its caregivers and nonclient residents to complete a background information form that is provided to the entity by the Department. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure a background check was completed every 4 years for Caregiver B, who worked and resided in the facility. Findings include: On 08/15/2023 at approximately 9:00 a.m., Surveyor interviewed Caregiver B. Caregiver B stated s/he had worked for the employer since 2018 and currently resides in the provider's home.	Z 019		

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

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Z 019	Continued From page 1 On 08/15/2023 at approximately 9:15 a.m., Surveyor reviewed Caregiver B's record. Caregiver B was hired on 04/15/2018. Caregiver B's record included the following background checks: - Background Information Disclosure, no date. - Department of Justice Background Check, dated 04/15/2018. - Department of Health Services Response to Caregiver Background Check, dated 04/15/2018. On 08/15/2023 at approximately 9:30 a.m., Surveyor asked Licensee A if s/he had conducted a new background check for Caregiver B, since 2018 was greater than 4 years ago. Licensee A stated s/he believed s/he had but would need to check other records. Licensee A was unable to provide an updated background check for Caregiver B.	Z 019		