STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0009984	A. BUILDING: _____ B. WING _____	C 06/28/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LASALLE HOUSE	**2608 FINGER RD GREEN BAY, WI 54302**

(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 06/25/2024 with additional information gathered through 06/28/2024, Surveyor conducted a compliant investigation and an abbreviated survey at Lasalle House. One (1) of 1 complaint is unsubstantiated. As a result of the survey, 2 deficiencies were identified. Census: 4	M 000		
M 114	88.03(3)(b) CRIMINAL RECORDS CHECK Criminal records check. Prior to an initial license the licensing agency shall ask the Wisconsin department of justice to conduct a criminal records check on the license applicant and on any other adult household member. The licensee shall arrange for a criminal records check of all service providers. At least every second year following issuance of an initial license the licensing agency shall request a criminal records check on the licensee and all other adult household members and the licensee shall arrange for a criminal records check on any service provider. In addition, during the period of the licensure, the licensee shall arrange for a criminal records check on any new service provider. If any of these persons has a conviction record or a pending criminal charge which substantially relates to the care of a dependent population, the funds or property of adults or minors or activities of the adult family home, the licensing agency may deny, revoke, refuse to renew or suspend a license,	M 114		

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

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M 114	Continued From page 1 initiate other enforcement action provided in this chapter or in ch. 50, Stats., or place conditions on the license. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 2 staff records (Direct Support Professional A) included a complete background check as required. The Background Information Disclosure (BID) form, a report from the Department of Justice (DOJ) criminal record and the Integrated Background Information System Letter (IBIS) were not completed at the time of hire. Findings include: On 06/25/2024 at approximately 10:00 AM, Surveyor requested employee records, including complete background checks, from Regional Director B. Regional Director B reported they do not keep staff records onsite at the home, but would reach out to their main office and have the staff records emailed to Surveyor by the end of the day. On 06/25/2024 at 7:08 PM, Surveyor sent a follow up email to Regional Director B inquiring about the staff records as they had not been received. On 06/26/2024 at 10:53 AM, Surveyor received staff records from Regional Director B via email. Direct Support Professional (DSP) A was hired	M 114		

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M 114	Continued From page 2 originally on 04/11/2017 until 06/15/2023. DSP A was rehired on 09/09/2023. DSP A's record included the following background information: *DOJ report, dated 04/06/2021. *IBIS letter, dated 04/06/2021. *Background Information Disclosure (BID), dated 03/29/2021. Surveyor did not observe the Background Information Disclosure (BID) form, a report from the Department of Justice (DOJ) criminal record and the Integrated Background Information System Letter (IBIS) when DSP A was rehired on 09/09/2023. On 06/26/2024 at 12:02 PM, Surveyor sent a follow up email to Regional Director B asking if a background check was completed upon DSP A's rehire on 09/09/2023. On 06/26/2024 at 3:24 PM, Surveyor received an email from Regional Director B who verified they did not complete a background check on DSP A when s/he was rehired on 09/09/2023. Regional Director B stated, "We were under the impression that since it was within the 90 days, we did not need to complete a new TB/Physical or background check." On 06/28/2024 at 12:40 PM, Surveyor interviewed Regional Director B who stated s/he will have DSP A complete a new background check.	M 114		
M 232	88.04(2)(g)1 HEALTH SCREENING FOR STAFF The licensee shall obtain documentation from a physician, a registered nurse or a physician's	M 232		

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M 232	Continued From page 3	M 232		

assistant indicating that the licensee and any service provider has been screened for illness detrimental to residents, including for tuberculosis. The documentation is to be completed within 90 days before the start of providing service. The documentation shall be kept confidential except that the licensing agency shall have access to the documentation for verification.

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure 1 of 2 caregivers reviewed had been screened for illness detrimental to residents, including tuberculosis, within 90 days before the start of providing service. The provider did not have a communicable disease screen, including tuberculosis test, completed within 90 days of hire for Direct Support Professional (DSP) A.

Findings include:

On 06/25/2024 at approximately 10:00 AM, Surveyor requested staff records, including communicable disease screens, from Regional Director B. Regional Director B reported they do not keep staff records onsite at the home, but would reach out to their main office and have the staff records emailed to Surveyor by the end of the day, 06/25/2024.

On 06/25/2024 at 7:08 PM, Surveyor sent a follow up email to Regional Director B inquiring about the staff records as they had not been received.

On 06/26/2024 at 10:53 AM, Surveyor received staff records from Regional Director B via email.

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M 232	Continued From page 4 Direct Support Professional (DSP) A was hired originally on 04/11/2017 until 06/15/2023. DSP A was rehired on 09/09/2023. The record contained a TB screen dated 03/27/2017. His/her file did not contain results from a current TB screening. On 06/26/2024 at 12:02 PM, Surveyor sent a follow up email to Regional Director B asking if an additional TB screen was completed upon DSP A's rehire on 09/09/2023. On 06/26/2024 at 3:24 PM, Surveyor received an email from Regional Director B who verified they did not complete a current TB test on DSP A when s/he was rehired on 09/09/2023. Regional Director B stated, "We were under the impression that since it was within the 90 days, we did not need to complete a new TB/Physical or background check." On 06/28/2024 at 12:40 PM, Surveyor interviewed Regional Director B who stated s/he will have DSP A complete a new TB test.	M 232		