

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0018667	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 10/04/2024
NAME OF PROVIDER OR SUPPLIER LAKE POINTE MANOR		STREET ADDRESS, CITY, STATE, ZIP CODE 8781 TRAVIS COURT FRANKLIN, WI 53132		
(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 10/04/2024, Surveyor concluded a standard survey a complaint investigation at Lake Pointe Manor. One deficiency was identified. One complaint was unsubstantiated. Census: 8	N 000		
N 219	83.17(1) Licensee conduct caregiver background check Caregiver background check. At the time of hire, employment or contract and every 4 years after, the licensee shall conduct and document a caregiver background check following the procedures in s. 50.065, Stats., and ch. DHS 12. A licensee shall not employ, contract with or permit a person to reside at the CBRF if the person has been convicted of the crimes or offenses, or has a governmental finding of misconduct, found in s. 50.065, Stats., and ch. DHS 12, Appendix A, unless the person has been approved under the department ' s rehabilitation process as defined in ch. DHS 12. This Rule is not met as evidenced by: Based on record review and interview, the provider did not conduct and document a complete caregiver background check (CBC) on 2 of 2 employee records reviewed. Caregiver C did not have a complete CBC and Former Contract Caregiver (FCC) D did not have a CBC on file.	N 219		

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

TITLE

(X6) DATE

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N 219	Continued From page 1 At minimum, a CBC contains 3 parts: 1) Background information disclosure form (BID) 2) Criminal history report from the Department of Justice (DOJ) 3) A report from the Department of Health Services integrated background information system (IBIS) Findings include: On 10/04/2024 at 10:00 a.m., Surveyor reviewed employee records and identified the following: -Caregiver C was hired on 09/27/2024. Caregiver C did not have a BID on file. - FCC D did not have a BID, DOJ report, or an IBIS report. On 10/03/2024 at 9:40 a.m., Surveyor interviewed Administrator B regarding employee files. Administrator B stated Licensee A hired the caregiving agency who employed FCC D. The agreement was that the agency would run the background checks and the provider would review all the training requirements. Administrator B stated Former Manager (FM) E made sure the provider had all the background checks. FM E was no longer with the company. Administrator B confirmed, "I don't know if [FCC D's] background checks were done." On 10/03/2024 at 9:38 a.m., Surveyor requested to review FCC D complete file and the contractual agreement between provider and caregiving agency. On 10/03/2024 at 12:45 p.m., Administrator A confirmed s/he would send Surveyor the contractual agreement between the provider and	N 219		

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N 219	Continued From page 2 caregiving agency and FCC D's complete background checks including BID, DOJ report, and an IBIS report by 6:00 p.m. On 10/03/2024 at 12:55 p.m., Administrator A confirmed, "We no longer use caregiving agencies." On 10/03/2024 at 2:53 p.m., Surveyor received an email from Licensee A, who stated, "Attached are the final documents for the staffing agency caregiver, [FCC D] and our Staffing Agency company policy." On 10/04/2024, as of 11:30 a.m., Surveyor had not received Caregiver C's completed BID or FCC D's completed BIDs, DOJ reports, or IBIS reports.	N 219			