STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018047	A. BUILDING: _____ B. WING _____	11/13/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BELLA VISTA	7298 NORTH SHORE DRIVE SIREN, WI 54872

(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 11/12/2025, Surveyor began a standard licensure survey at Bella Vista. Data was collected through 11/13/2025. Three violations were identified. Census: 4	M 000		
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 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 licensee did not ensure 2 of 2 service providers had been screened for illnesses detrimental to residents, including for tuberculosis (TB) within 90 days before the start of providing service. Findings include: On 11/12/2025, at approximately 1:20 PM, Surveyor interviewed Licensee A, who stated Caregiver B had been hired sometime in August or September of 2025. Licensee A stated	M 232		

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

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M 232	Continued From page 1 Caregiver C had been hired around the same time. On 11/12/2025, Surveyor reviewed staff records for Caregiver B and Caregiver C. Caregiver B's communicable disease screen was dated 10/16/2025, and his/her TB test was completed on 10/16/2025. Caregiver C's record did not include a communicable disease screen, and his/her TB test was dated 02/16/2024. On 11/13/2025, at approximately 1:42 PM, Surveyor interviewed Caregiver C. Caregiver C stated his/her start date at the provider was 09/24/2025. Caregiver C stated s/he had not gotten a communicable disease screen done prior to being employed by the licensee, and that his/her TB screen was from a previous time of employment. At approximately 3:13 PM, Surveyor received an email correspondence from Licensee A which stated that Caregiver B's start date was 08/25/2025. The provider did not ensure communicable disease screens, including TB, for staff were completed within 90 days before the start of providing service.	M 232		
M 276	88.05(3)(a) Homelike Environment An adult family home shall be safe, clean and well-maintained and shall provide a homelike environment.	M 276		

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M 276	Continued From page 2	M 276		

This Rule is not met as evidenced by:
Based on observation and interview, the provider did not ensure the home was clean and well-maintained.

Findings include:

On 11/12/2025, at approximately 12:09 PM, Surveyor began conducting the survey at the home and detected an odor of dogs within the home. Surveyor observed a pet water bowl and food bowl in the main dining/kitchen area.

At approximately 12:15 PM, Surveyor interviewed Licensee A. Licensee A stated there were no pets living at the home, but that there had been two cats living in the home recently. Licensee A stated a former staff member was the live-in staff until recently and had removed his/her 2 cats from the home a few days prior. Licensee A stated 2 staff members brought their dogs to work with them occasionally.

At approximately 1:45 PM, Surveyor toured the adult family home. Surveyor observed that the basement was accessible to residents. Surveyor detected an odor of cat urine in a basement room. Surveyor observed that there was a pile of animal feces in the corner of the room. Licensee A stated the feces were from one of the former live-in staff's cats. Licensee A stated the former staff had removed the cats on 11/05/2025. Licensee A stated residents did not use the

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M 276	Continued From page 3 basement. While speaking with Licensee A in another room in the basement, Surveyor observed loose cat litter scattered on the floor and a cat litter container. Licensee A stated that room had been where the litter boxes were kept when the prior live-in staff had the cats living at the home. At approximately 2:00 PM, Licensee A told Surveyor that the animal feces were actually from Caregiver B's dog. Licensee A stated the dog had been there over the weekend of 11/08/2025-11/09/2025. The licensee did not ensure the home was clean and well-maintained.	M 276		
Z 024	50.065(4m)(c) COMPLETE BACKGROUND INFORMATION DISCLOSURE If the background information form completed by a person under sub. (6) (am) indicates that the person is not ineligible to be employed or contracted with for a reason specified under par. (b) 1. to 5., an entity may employ or contract with the person for not more than 60 days pending the receipt of the information sought under sub. (2) (b). If the background information form completed by a person under sub. (6) (am) indicates that the person is not ineligible to be permitted to reside at an entity for a reason specified in par. (b) 1. to 5. and if an entity otherwise has no reason to believe that the person is ineligible to be permitted to reside at an entity for any of these reasons, the entity may permit the person to reside at the entity for not more than 60 days pending receipt of information sought under sub. (2) (am). An entity shall	Z 024		

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Z 024	Continued From page 4 provide supervision for a person who is employed or contracted with or permitted to reside as permitted under this paragraph. This Rule is not met as evidenced by: Based on record review and interview, the licensee did not ensure criminal history records were complete, including background information forms, for new employees prior to working unsupervised with residents. Findings include: The Wisconsin Caregiver Program Manual states: "Entities must provide supervision during the 60-day period pending receipt of a complete caregiver background check. At a minimum, this supervision must include periodic direct observation of the person." (DQA Publication-00038, Wisconsin Caregiver Program Manual for Entities Regulated by the Division of Quality Assurance, December 2020). On 11/12/2025, at approximately 1:20 PM, Surveyor interviewed Licensee A, who stated Caregiver B had been hired sometime in August or September of 2025. Licensee A stated Caregiver C had been hired around the same time. Licensee A stated the staffing pattern for the home involved 1 staff member working 4:00 PM to 8:00 AM on Monday through Thursday, as the residents were out of the home working from 8:00 AM to 4:00 PM Monday through Thursday. Licensee A stated staff would work the other	Z 024		

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Z 024	Continued From page 5 shifts during the weekend, with 1 staff on duty to care for 4 residents. Licensee A stated staff included Caregiver B and Caregiver C. On 11/12/2025, Surveyor reviewed staff records for Caregiver B and Caregiver C. Caregiver B's BID was dated 10/08/2025. Caregiver B's criminal history background check and integrated background information system (IBIS) letter from the Department of Health Services (DHS) were dated 10/09/2025 Caregiver C's BID was dated 10/22/2025. Caregiver C's criminal history background check and IBIS letter from the DHS were dated 10/09/2025. On 11/13/2025, at approximately 1:42 PM, Surveyor interviewed Caregiver C. Caregiver C stated his/her start date at the home was 09/24/2025. At approximately 3:13 PM, Surveyor received an email correspondence from Licensee A which stated that Caregiver B's start date was 08/25/2025. The provider did not ensure BIDs, criminal history background checks, and IBIS letters from the DHS were completed for staff in a timely manner.	Z 024		