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
	0019549	A. BUILDING: _____ B. WING _____	C 03/31/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
REGAINING INDEPENDENCE LLC	**1549 BOYD AVE RACINE, WI 53405**

(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 03/31/2025, Surveyor conducted a standard licensing survey and complaint investigation at Regaining Independence LLC, an AFH located in Racine, WI. As a result of the survey, 2 violations of Chapter DHS 88 were issued. The complaint was unsubstantiated. Census: 2	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	M 114		

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

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M 114	Continued From page 1 activities of the adult family home, the licensing agency may deny, revoke, refuse to renew or suspend a license, 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 that 3 of 3 employees reviewed had completed criminal background checks. Caregivers B, C and D did not have Department of Justice (DOJ) or Integrated Background Information System (IBIS) completed. Findings include: On 03/31/2025, Surveyor reviewed Caregiver B's file, hired 11/03/2023. There was no DOJ or IBIS background check in Caregiver B's file. On 03/31/2025, Surveyor reviewed Caregiver C's file, hired 11/03/2023. There was no DOJ or IBIS background check in Caregiver C's file. On 03/31/2025, Surveyor reviewed Caregiver D's file, hired 11/03/2023. There was no DOJ or IBIS background check in Caregiver D's file. On 03/31/2025 at 11:45 AM, Surveyor interviewed Licensee A. Licensee A stated that Caregivers B, C and D did not have a DOJ or IBIS background check on file because they were not conducted.	M 114		

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M 114	Continued From page 2 Licensee A stated s/he was not aware that DOJ and IBIS background checks were to be conducted. Licensee A stated that all employees would have a DOJ and IBIS background check completed as soon as possible.	M 114		
M 346	88.05(4)(d)2.b FIRE EVACUATION ANNUAL EVALUATION Each resident shall be evaluated annually for evacuation time, using the departments form. All service providers who work on the premises shall be made aware of each resident having an evacuation time of more than 2 minutes. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 resident (Resident 1) was evaluated annually for evacuation time. Resident 1's evacuation assessment was not completed in 2024 and to date in 2025. Findings include: On 03/31/2025, Surveyor reviewed Resident 1's file. Resident 1 was admitted 11/03/2023 with diagnoses that include but are not limited to: Mild intellectual disability, seizures, conversion disorder. Resident 1's resident evacuation assessment was dated 11/03/2023. There was no evacuation assessment completed in 2024 and to date in 2025. On 03/31/2025 at 11:45 AM, Surveyor interviewed Licensee A. Licensee A acknowledged that resident evacuation assessments should be	M 346		

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M 346	Continued From page 3 conducted annually. Licensee A acknowledged that Resident 1 had not been assessed for evacuation time since 11/03/2023. Licensee A stated, "I didn't know that I had to do that annually, but I do now."	M 346		