

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0016825	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/21/2023
NAME OF PROVIDER OR SUPPLIER NEW BEGINNINGS		STREET ADDRESS, CITY, STATE, ZIP CODE N595 2ND AVENUE SHELDON, WI 54766		
(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 12/18/2023, Surveyor conducted an abbreviated licensure survey at New Beginnings. Data was collected through 12/21/2023. One deficiency was identified. Census: 4	M 000		
Z 010	50.065(2)(bb) DETERMINE FINAL DISPOSITION OF CHARGE If information obtained under par. (am) or (b) indicates a charge of a serious crime, but does not completely and clearly indicate the disposition of the charge or the conviction, the department or entity shall make every reasonable effort to contact the clerk of courts to determine the final disposition of the charge. If a background information form under sub. (6) (a) or (am) indicates a charge or a conviction of a serious crime, but information obtained under 011 par. (am) or (b) does not indicate such a charge, the department or entity shall make every reasonable effort to contact the clerk of courts to obtain a copy of the criminal complaint and the final disposition of the complaint. If information obtained under par. (am) or (b), a background information form under sub. (6) (a) or (am) or any other information indicates a conviction of a violation of s. 940.19 (1), 940.195, 940.20, 941.30, 942.08, 947.01, or 947.013 obtained not more than 5 years before the date on which that information was obtained, the department or the entity shall make every reasonable effort to contact the clerk of courts to obtain a copy of the criminal complaint and	Z 010		

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

TITLE

(X6) DATE

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Z 010	Continued From page 1 judgement of conviction relating to that violation. This Rule is not met as evidenced by: Based on record review and interview, the provider did not obtain a copy of Caregiver B's criminal complaint and judgment of conviction related to Caregiver B's conviction of a violation of s. 947.01(1) (Disorderly Conduct). Findings include: On 12/21/2023, Surveyor reviewed Caregiver B's caregiver background check. The Department of Justice (DOJ) report, dated 09/25/2020, indicated Caregiver B was convicted of disorderly conduct on 07/21/2020. On 12/21/2023 at approximately 1:00 p.m., Surveyor interviewed Manager A and asked if s/he obtained the judgement of conviction and criminal complaint for Caregiver B's conviction of disorderly conduct. Manager A told Surveyor s/he did not. S/he stated s/he reached out to the previous manager who also did not recall obtaining the additional information.	Z 010		