STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017927	A. BUILDING: _____ B. WING _____	11/05/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
KHADRA CARE LLC	6234 THORNEBURY DRIVE MADISON, WI 53719

(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 From 11/04/2024 to 11/05/2024, Surveyors conducted an abbreviated survey at Khadra Care LLC, an AFH in Madison. One deficiency were identified. Census: 1	M 000		
Z 022	50.065(3)(b) COMPLETE BACKGROUND CHECK PROCESS Every 4 years or at any other time within that period that an entity considers appropriate, the entity shall request the information specified in sub. (2) (b) 1. to 5. for all caregivers of the entity. This Rule is not met as evidenced by: Based on record review and interview, Licensee A did not ensure 1 of 1 caregivers reviewed had a background check completed every 4 years. Licensee A had not completed a background check for Caregiver B in greater than 4 years. Findings include: On 11/04/2024 at approximately 8:45 a.m., Surveyors reviewed Caregiver B's record, provided by Licensee A. Caregiver B's record indicated s/he had worked for the provider since	Z 022		

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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Z 022	Continued From page 1 opening the home on 07/02/2020. Caregiver B's record included the following: - Background Information Disclosure (BID), dated 10/01/2023. - Department of Justice (DOJ) background check, dated 07/09/2020. - Information maintained by the department of safety and professional services regarding the status of Caregiver B's credentials (IBIS), dated 07/09/2020. On 11/04/2024 at approximately 9:00 a.m., Surveyors interviewed Licensee A and asked if s/he had completed a DOJ and IBIS for Caregiver B. Licensee A reviewed his/her records and was unable to locate documentation of a DOJ and IBIS completed in the past 4 years.	Z 022		