STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018225	A. BUILDING: _____ B. WING _____	R-C 03/05/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AMAZING CARE GROUP HOME LLC	5732 NORTH 87TH STREET MILWAUKEE, WI 53225

(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 03/04/2026 with information gathered through 03/05/2026, Surveyor conducted a complaint investigation and verification visit for SOD S02211, dated 09/23/2025, at Amazing Care Group Home LLC, an Adult Family Home (AFH) in Milwaukee, WI. Ten of 10 deficiencies were corrected for SOD S02211. Four new deficiencies were identified. Complaint unsubstantiated. Under statutory provisions of Wis. Stat. ch. 50, a $200 revisit fee is being assessed. Census: 3	{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	M 114		

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

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M 114	Continued From page 1 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 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 1 of 2 staff (Caregiver B) had a background check upon hire. Caregiver B did not have a complete background check at the time of hire. Findings include: On 03/04/2026, at 10:45 AM, Surveyors reviewed Caregiver B's record. Caregiver B was hired on 11/21/2021. Caregiver B's file contained a background information disclosure (BID), dated 11/27/2021, and a Governmental Findings Report was dated 12/01/2021. Surveyors did not review evidence of a Department of Justice (DOJ) background check for 2021. On 03/05/2026, at approximately 12:45 PM, Surveyors interviewed Licensee A. Licensee A	M 114		

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M 114	Continued From page 2 confirmed the code requirement. Licensee A reported s/he did not have a DOJ background check for Caregiver B. Licensee A reported s/he would ensure background checks for employees to include the BID, DOJ, and Governmental Findings Report were completed.	M 114		
M 244	88.04(5)(a) TRAINING-15 HOURS WITHIN 6 MONTHS The licensee and each service provider shall complete 15 hours of training approved by the licensing agency related to health, safety and welfare of residents, resident rights and treatment appropriate to residents served prior to or within 6 months after starting to provide care. This training shall include training in fire safety and first aid. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 2 staff (Caregiver D) received 15 hours of training related to health, safety and welfare, resident rights, first aid and fire safety, and treatment appropriate to residents prior to or within 6 months of starting to provide cares. Caregiver D did not receive any training related to resident rights, health/safety/welfare, or treatment appropriate to client types. Findings include: On 03/04/2026, at 10:45 AM, Surveyors reviewed Caregiver D's record. Caregiver D was hired on 08/28/2025. Caregiver D's record indicated s/he	M 244		

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M 244	Continued From page 3 received training in first aid, standard precautions, fire safety and medication administration. Caregiver D's record did not contain evidence of training in resident rights, health/safety/welfare, or treatment appropriate to client types served by the facility. On 03/04/2026, at approximately 12:15 PM, Surveyors interviewed Licensee A. Licensee A reported s/he believed the code requirement for initial training was met by the classes Caregiver D completed. Licensee A reported s/he would review the code requirement and ensure Caregiver D completed the required initial training.	M 244		
M 414	88.06(3)(d)2 LEVEL OF SUPERVISION Identification of the level of supervision required in the home and community. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 3 of 3 residents (Resident 1, Resident 2 and Resident 4) individual service plans (ISP) reviewed included the level of supervision required in the home and community. Resident 1, Resident 2 and Resident 4 required 24-hour supervision. Resident 1's, Resident 2's and Resident 4's ISPs did not include the level of supervision in the home and community. Findings include: On 03/04/2026, Surveyor reviewed Resident 1's, Resident 2's and Resident 4's records and	M 414		

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M 414	Continued From page 4 identified the following: Resident 1 -Resident 1 was admitted to the provider's home on 07/03/2022 with diagnoses including aortic valve stenosis, benign paroxysmal positional vertigo, sensorineural hearing loss and dementia. -Resident 1 was his/her own person. Resident 1's ISP, dated 09/24/2025, did not indicate Resident 1's level of supervision in the home and community. Resident 2 -Resident 2 was admitted to the provider's home on 10/24/2022 with diagnoses including autism and tumor. -Resident 2 was his/her own person. Resident 2's ISP, dated 09/24/2025, did not indicate Resident 2's level of supervision in the home and community. Resident 4 -Resident 4 was admitted to the provider's home on 12/01/2025 with diagnoses including bi-polar schizophrenia and psychotic disorder . -Resident 4 was his/her own person. Resident 4's ISP, dated 12/01/2025, did not indicate Resident 4's level of supervision in the home and community. On 03/04/2026, at approximately 11:43 AM, Surveyors interviewed Licensee A. Licensee A reported Resident 1, Resident 2 and Resident 3 required 24-hour supervision. Licensee A	M 414		

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M 414	Continued From page 5 confirmed Resident 1's, Resident 2's and Resident 4's ISPs did not indicate their level of supervision in the home and community. Licensee A reported s/he was not aware of this requirement.	M 414		
Z 012	50.065(2)(bm) OUT OF STATE BACKGROUND CHECKS If the person who is the subject of the search under par. (am) or (b) is not a resident of this state or if at any time within the 3 years preceding the date of the search that person has not been a resident of this state, or if the department or entity determines that the person's employment, licensing, or state court records provide a reasonable basis for further investigation, the department or the entity shall make a good faith effort to obtain from any state or other United States jurisdiction in which the person is a resident or was a resident within the 3 years preceding the date of the search information that is equivalent to the information specified in par. (am) 1. or (b) 1. The department or entity may require the person to be fingerprinted on 2 fingerprint cards, each bearing a complete set of the person's fingerprints. The department of justice may provide for the submission of the fingerprint cards to the federal bureau of investigation for the purposes of verifying the identity of the person fingerprinted and obtaining the records of his or her criminal arrests and convictions.	Z 012		

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Z 012	Continued From page 6 This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure 1 of 3 staff (Caregiver D's) out of state background check, for staff living out of state within the last three years, was completed. Findings Include: On 03/04/2026, at 10:45 AM, Surveyors reviewed Caregiver D's record. Caregiver D was hired on 08/28/2025. Caregiver D's background information disclosure form (BID) indicated Caregiver D lived out of state within the last 3 years. Surveyors did not review any evidence of an out-of-state background check in her/his file. On 03/04/2026, at approximately 11:45 AM, Surveyors interviewed Caregiver D. Caregiver D reported s/he lived in Arkansas "last year". On 03/04/2026, at approximately 12:15 PM, Surveyors interviewed Licensee A. Licensee A confirmed the code requirement. Licensee A reported s/he was unsure how to conduct the out of state background check for Caregiver D. Licensee A reported s/he would ensure Caregiver D's out of state background check was completed.	Z 012		