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
	0014560	A. BUILDING: _____ B. WING _____	R 08/04/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COMFORT CARE 4 U 2 LLC	1 ST ANDREWS CIRCLE MADISON, WI 53717

(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 08/04/2026, Surveyor conducted a verification visit at Comfort Care 4 U 2, an AFH located in Madison, WI. As a result of the survey, 1 violation of Chapter DHS 88 was issued. Nine violations from previous Statement of Deficiency (SOD) NF7B11 were corrected. Under statutory provisions of Wis. Stat. Chapter 50, a $200 revisit fee is being assessed. Census: 3	{M 000}		
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. This Rule is not met as evidenced by: Based on observation and interview, the provider did not provide a safe, clean and homelike environment appropriate for residents. The entrance to be used by Resident 3, who uses a cane was blocked by a garbage can and the hinges on the exit door were missing making it difficult to open the door. This is a repeat violation from previous Statement of Deficiency (SOD) FT4W11 dated 05/04/2023,	M 276		

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

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M 276	Continued From page 1 FT4W12 dated 11/08/2023, FT4W13 dated 02/15/2024, and FT4W14 dated 07/10/2024. Findings include: On 08/04/2026, Surveyor toured the physical environment. OBSERVATIONS: The exit door, which was identified as an emergency exit was not working properly. The screws were missing from the hinge attaching the door to the frame making the door difficult to open. The ramped exit in the garage, identified as an emergency exit was blocked by 2 large garbage cans. There was a hole in Resident 3's bedroom door and 2 other dents in the door as a result of being struck. The hole measured 1.5 inches by 1.5 inches. The dents measured 1 inch by 1 inch. On 08/04/2026 at 11:00 AM, Surveyor interviewed Quality Assurance Coordinator- A (QAC-A). QAC-A acknowledged that the exit was blocked by garbage cans and stated that staff would be educated not to block the exit. QAC-A stated that maintenance would be contacted to fix the hinge and Resident 3's door.	M 276		