

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0019524	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 05/05/2026
NAME OF PROVIDER OR SUPPLIER GOOD NEIGHBORHOOD HOME CARE LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 16 MOUNT VERNON CT 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 05/04/2026 to 05/05/2026, Surveyor attempted to conduct a verification visit and standard survey at Good Neighborhood Home Care LLC, an AFH in Madison. Two deficiencies were identified. One deficiency is a repeat deficiency of Statement of Deficiency (SOD) 6CUU11, dated 02/17/2026. Under statutory provisions of Wis. Stat. Ch. 50, a \$200 revisit fee is being assessed. Census: Unknown	{M 000}		
{M 206}	88.03(8)(b) AGENCY MAY VISIT HOME A licensing agency and service coordinator may, without notice, visit a home at any time to evaluate the status of resident health, safety or welfare or to determine if the home continues to comply with this chapter. The licensee shall permit the licensing agency and service coordinator to enter the home. This Rule is not met as evidenced by: Based on observation and record review, the provider did not ensure the licensing agency was, without notice, able to visit the home at any time to evaluate the status of resident health, safety or welfare and to determine if the home continues to comply with Chapter DHS 88. The provider did not respond to Surveyor's presence at the home, phone call or email.	{M 206}		

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

TITLE

(X6) DATE

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{M 206}	Continued From page 1 This deficiency is a repeat deficiency of Statement of Deficiency (SOD) 6CUU11, dated 02/17/2026. Findings include: On 05/04/2026 at 7:00 a.m., Surveyor reviewed the provider's biennial report, submitted to the department on 08/31/2025, which documented the home was "open" 24/7. On 05/04/2026 at 8:05 a.m., Surveyor rang the doorbell at the home. Surveyor observed a sign over 1 of the doors that indicated there was surveillance footage of the doorway. On 05/04/2026 at 8:10 a.m., Surveyor contacted the phone number on file for Licensee A and left a message identifying Surveyor and asking for a call back as soon as possible. On 05/04/2026 at 8:26 a.m., Surveyor emailed the email on file for Licensee A explaining Surveyor's attempt to conduct a licensing visit and requesting that Licensee A contact Surveyor as soon as possible. On 05/05/2026 at 3:02 p.m., Surveyor emailed the email on file for Licensee A a second time explaining Surveyor's attempt to conduct a licensing visit and requesting that Licensee A contact Surveyor as soon as possible. Surveyor received a delivery receipt. As of 05/06/2026 at 10:00 a.m., Surveyor had not received any form of communication from Licensee A regarding his/her efforts to visit the home to evaluate the status of resident health, safety or welfare and to determine if the home continues to comply with Chapter DHS 88.	{M 206}			

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M 216	88.04(2)(a) RESPONSIBILITIES The licensee shall ensure that the home and its operation comply with this chapter and with all other laws governing the home and its operation. This Rule is not met as evidenced by: Based on record review, Licensee A did not ensure the home and its operations complied with all laws governing the home and its operation. Licensee A did not follow special orders issued by the department with Statement of Deficiency (SOD) 6CUU11, dated 02/17/2026. Findings include: On 05/04/2026 at 7:00 a.m., Surveyor reviewed department records which indicated that the department issued SOD 6CUU11 on 02/19/2026, which included an enforcement letter with the following special orders: "Pursuant to Wis. Admin. Code §§ DHS 88.03(6)(g)2.b. and 2.e., EFFECTIVE IMMEDIATELY, the licensee shall comply with requirements specified by Wis. Admin. Code §§ DHS 88.03(8)(a) and (8)(b). That is, the licensee shall permit the licensing agency and service coordinator, at any time and without notice, to visit a home and to evaluate the status of resident health, safety, or welfare or to determine if the home continues to comply with requirements for licensure. The licensee shall ensure all resident records will be maintained in a secure location within the home in a manner that prevents unauthorized access, in accordance with Wis. Admin. Code §	M 216			

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M 216	Continued From page 3 DHS 88.09(1)(a). Service provider and licensee records will be available in the home, in accordance with Wis. Admin. Code § DHS 88.09(2)(c). WITHIN TWO (2) business days of receipt of this notice, the licensee will contact the Assisted Living Regional Director at the Southern Regional Office at DHSDQABALSRO@dhs.wisconsin.gov to provide the following information: - Telephone number where licensee may be reached in a timely manner; and - Measures the licensee will take to ensure the licensing agency representative may, without notice, conduct a licensing survey in accordance with Wis. Admin. Code §§ DHS 88.03(8)(a) and (8)(b), and respond timely to requests for information; OR notification of the intent to close and make arrangements to return the AFH license to the Southern Regional Office at 201 E. Washington Avenue, Room E300, Madison, WI 53703." Department records indicated that as of 05/04/2026, the department had not received a response from Licensee A regarding the above orders. On 05/04/2026 at 8:05 a.m., Surveyor attempted to conduct a verification visit and standard survey. Surveyor's presence at the home, phone call to Licensee A and email to Licensee A were not responded to.	M 216		