

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0018873	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 03/13/2024
NAME OF PROVIDER OR SUPPLIER RIDGE AT MADISON (THE)		STREET ADDRESS, CITY, STATE, ZIP CODE 2879 FISH HATCHERY ROAD FITCHBURG, WI 53713		
(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
{N 000}	Initial Comments On 03/07/2024, Surveyor conducted a complaint investigation and verification visit at The Ridge at Madison, a CBRF located in Fitchburg, WI. As a result of the survey, 3 violations of Chapter DHS 83 were issued. Two violations are repeat violations from previous statement of deficiency GP7H12 dated 09/06/2023. Under statutory provisions of Wis. Stat. Ch. 50, a \$200 revisit fee is being assessed. Census: 14	{N 000}		
N 196	83.14(2)(a) Licensee ensures facility complies with laws The licensee shall ensure the CBRF and its operation comply with all laws governing the CBRF. This Rule is not met as evidenced by: Based on observation, interview and record review, the Licensee did not ensure the CBRF and its operation complied with all laws governing the CBRF. The facility had not made corrections to the citations issued for the physical environment cited initially in June of 2023. Findings include: On 06/16/2023 at approximately 11:00 AM, Surveyor toured the facility with Administrator A to conduct a verification visit of violations concerning the environment and observed the following:	N 196		

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

TITLE

(X6) DATE

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N 196	Continued From page 1 There were stains on the countertop near the sink in a common area used by residents. The faucet at the sink was leaking and visibly corroded. The top of a table used by residents in the common area was deteriorating and the finish was very faded. The bathroom wall next to Resident 1's bedroom was deteriorating and paint was peeling off the wall. The towel holder in bathroom near Resident 2 and 3's bedroom was torn off the wall. The cabinet in the bathroom near Resident 2 and 3's bedroom was very scuffed up and in need of repair. The carpeting in Resident 4's room was stained with a black substance. Administrator A stated that Resident 4's room was going to be recarpeted very soon. The cabinet in bathroom near Resident 4's room was deteriorating, the bottom of the cabinet was broken and the paint was gone. There was a substance that appeared to be dried blood and/or feces on the wall of the bathroom near Resident 4's room. There was a mildew like substance in the inside of a bathroom cabinet in the bathroom near Resident 5's bedroom. The threshold on the bathroom floor near	N 196		

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N 196	Continued From page 2 Resident 6's bedroom was coming up off the floor creating a trip/fall hazard. There was visible water damage to the ceiling tiles in a common room used by residents for activities. Ceiling tiles were stained and beveling. In the community room used by residents for activities, a smoke/heat detector had been removed due to water damage to the ceiling around the detector. The detector had previously been hard wired in. There was visible water damage to the base of the wall and floor (approximately 20 feet long by 2 feet high) in the community room. There was an empty room in the basement with water damage from previous flooding (residue was dirty/dusty from dried water on floor). Five mattresses were being stored in the room and appeared to be spackled with a dark substance consistent with mold patterns. There were 2 light bulbs missing from an outside exit used by residents that would make navigating the exit difficult at sun down due to low visibility. The sprinkler inside a closet containing chemicals was very rusty and corroded. On 09/06/2023, Surveyor conducted a verification visit and minimal corrections to the environment had been made. On 09/06/2023 at 9:00 AM, Surveyor interviewed Administrator A. Administrator A stated, "Those 2 sprinklers that need to be replaced are not replaced yet."	N 196		

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N 196	Continued From page 3 On 09/06/2023 at 10:30 am, Surveyor toured the physical environment and observed the following: There were stains on the countertop near the sink in a common area used by residents. The faucet at the sink was leaking and visibly corroded. The top of a table used by residents in the common area was deteriorating and the finish was very faded. The bathroom wall next to Resident 1's bedroom was deteriorating and paint was peeling off the wall. The towel holder in bathroom near Resident 2 and 3's bedroom was torn off the wall. The cabinet in the bathroom near Resident 2 and 3's bedroom was very scuffed up and in need of repair. The carpeting in Resident 4's room was stained with a black substance. Administrator A stated that Resident 4's room was going to be recarpeted very soon. The cabinet in bathroom near Resident 4's room was deteriorating, the bottom of the cabinet was broken and the paint was gone. There was a substance that appeared to be dried blood and/or feces on the wall of the bathroom near Resident 4's room. There was a mildew like substance in the inside of a bathroom cabinet in the bathroom near Resident 5's bedroom.	N 196		

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N 196	Continued From page 4 The threshold on the bathroom floor near Resident 6's bedroom was coming up off the floor creating a trip/fall hazard. There was a sprinkler head in the kitchen cooler that was completely obstructed by a black substance that had the consistence of tar or a thick black oil. There was a sprinkler head in an closet containing an air handler that was corroded and rusted out. Upon entering the facility, Administrator A stated, "Guess what? Nothing has been fixed since you were last here in June 2023. I haven't been able to pay for improvements due to vendors not wanting to do business with us and I also need approval from the owners in order to spend any money on improvements." Administrator A stated that the facility is having issues with vendors/contractors. "Vendors are not willing to do business with us based on past history of non-payment of previous facility owners." On 03/13/2024 at 9:30 AM, Surveyor toured the physical environment. There were stains on the countertop near the sink in a common area used by residents. The faucet at the sink was leaking and visibly corroded. The top of a table used by residents in the common area was deteriorating and the finish was very faded.	N 196		

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N 196	Continued From page 5 The bathroom wall next to Resident 1's bedroom was deteriorating and paint was peeling off the wall. The towel holder in bathroom near Resident 2 and 3's bedroom was torn off the wall. The cabinet in the bathroom near Resident 2 and 3's bedroom was very scuffed up and in need of repair. The carpeting in Resident 4's room was stained with a black substance. Administrator A stated that Resident 4's room was going to be recarpeted very soon. The cabinet in bathroom near Resident 4's room was deteriorating, the bottom of the cabinet was broken and the paint was gone. There was a substance that appeared to be dried blood and/or feces on the wall of the bathroom near Resident 4's room. There was a mildew like substance in the inside of a bathroom cabinet in the bathroom near Resident 5's bedroom. The threshold on the bathroom floor near Resident 6's bedroom was coming up off the floor creating a trip/fall hazard. On 03/13/2024 at 9:00 AM, Surveyor interviewed Administrator A. Administrator A stated, "Those 2 sprinklers that need to be replaced are not replaced yet." On 03/13/2024 at 10:30 am, Surveyor toured the physical environment and observed the following:	N 196		

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N 196	Continued From page 6 There was a sprinkler head in the kitchen cooler that was completely obstructed by a black substance that had the consistence of tar or a thick black oil. There was a sprinkler head in an closet containing an air handler that was corroded and rusted out. According to documentation, the facility sprinkler system was inspected 05/2023 and it was noted that the 2 above concerns needed to be replaced. On 03/13/2024 at 9:45 AM, Surveyor interviewed Administrator A. Administrator A confirmed, "Improvements still have not been made. I can't get the funding from the owners and I can't get any vendors to work with us due to past non-payments from previous owners." Cross References: 83.48(8)(b) Sprinkler System Installation and Maintenance 83.43(1) Environment Safe, Clean and Comfortable	N 196		
{N 481}	83.43(1) Environment safe, clean, and comfortable Environment. The CBRF shall provide a living environment that is safe, clean, comfortable, and homelike. All common dining and living areas shall contain furnishings appropriate to the intended use of the room.	{N 481}		

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{N 481}	Continued From page 7 This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure a safe, clean and homelike environment appropriate for residents. This is a repeat violation from previous statement of deficiency GP7H11 dated 06/16/2023 and GP7H12 dated 09/06/2023. Findings include: On 09/06/2023 at 9:00 am, Surveyor toured the facility and observed the physical environment with Administrator A. Findings include: There were still various stains on the countertop near the sink in a common area used by residents. Administrator A stated, "these are the same stains as when you were here in September 2023." The top of a table used by residents in the common area was deteriorating and the finish was very faded. The cabinet in the bathroom near Resident 2 and 3's bedroom was still very scuffed up and in need of repair/replacement. The carpeting in Resident 4's room was stained with a black substance. Administrator A acknowledged that Resident 4's carpeting was in poor condition and needed to be replaced. The bottom of the cabinet in bathroom near Resident 4's room was still broken and the paint was gone.	{N 481}		

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{N 481}	Continued From page 8 In the community room used by residents for activities, a smoke/heat detector was missing. The detector had previously been hard wired in. There was an area approximately 4 feet by 3 feet that marked off by tape on the flooring outside of Resident 6 and Resident 7's bedroom. The previous flooring had extensive damage and was torn out. There was no new flooring in place. Administrator A stated that the flooring was being replaced but maintenance had run out of glue. On 09/06/2023 at 11:30 am, Surveyor discussed the above concerns with Administrator A. Administrator A acknowledged that the physical building was in need of improvements and the facility was working on that ongoing. Administrator A stated that finances were an issue and finding a vendor that would do business with the facility was an issue as well.	{N 481}		
{N 558}	83.48(8)(b) Sprinkler system installation and maintenance Installation and maintenance. 1. All sprinkler systems shall be installed by a state licensed sprinkler contractor. All sprinkler systems shall be maintained, inspected and tested at least annually or at intervals determined by the requirements in NFPA 25. 2. In facilities with sprinklers, sprinkler heads shall be placed at the top of each linen or trash chute and in the rooms where the chutes terminates. 3. The sprinkler system flow alarm shall be connected to the CBRF ' s fire alarm system. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure that sprinkler heads were	{N 558}		

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{N 558}	Continued From page 9 maintained. There were 2 sprinkler heads observed that were corroded or obstructed, hindering effectiveness. This is a repeat violation from previous statement of deficiency (SOD) GP7H11 dated 06/16/2023 and SOD GP7H12 dated 09/06/2023. Findings include: On 03/13/2024 at 9:00 AM, Surveyor interviewed Administrator A. Administrator A stated, "Those 2 sprinklers that need to be replaced are not replaced yet." On 03/13/2024 at 10:30 am, Surveyor toured the physical environment and observed the following: There was a sprinkler head in the kitchen cooler that was completely obstructed by a black substance that had the consistence of tar or a thick black oil. There was a sprinkler head in an closet containing an air handler that was corroded and rusted out. According to documentation, the facility sprinkler system was inspected 05/2023 and it was noted that the 2 above concerns needed to be replaced. On 03/13/2024 at 11:00 am, Surveyor discussed the above concern with Administrator A. Administrator A acknowledged that the 2 sprinkler heads identified were obstructed and would need to be replaced. Administrator A stated s/he has been in contact with companies to get the sprinklers replaced but has not finalized a contract yet. Administrator A stated that vendors will not do business with the facility due to past	{N 558}		

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{N 558}	Continued From page 10 owners non-payment.	{N 558}			