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
	0018873	A. BUILDING: _____ B. WING _____	R-C 01/13/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RIDGE AT MADISON (THE)	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 01/13/2026, Surveyors conducted 2 verification visits at The Ridge at Madison, a CBRF located in Fitchburg, WI. As a result of the survey, 2 violations of Chapter DHS 83 were issued. One violation is a repeat violation from previous Statement of Deficiency (SOD) R71L12 dated 06/17/2025, SOD LGZ011 dated 04/30/2025 and SOD R71L11 dated 12/18/2024. Five violations from previous SOD LGZ011 dated 04/30/2025 were corrected. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed.	{N 000}		
{N 239}	83.20(2)(a)-(d) Department-approved training courses. Standard Precautions. All employees who may be occupationally exposed to blood, body fluids or other moist body substances, including mucous membranes, non-intact skin, secretions, and excretions except sweat, whether or not they contain visible blood shall successfully complete training in standard precautions before the employee assumes any responsibilities that may expose the employee to such material. Fire safety. Within 90 days after starting employment, all employees shall successfully complete training in fire safety. First aid and choking. Within 90 days after starting employment, all employees shall successfully complete training in first aid and procedures to alleviate choking. Medication administration and management. Any	{N 239}		

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

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{N 239}	Continued From page 1 employee who manages, administers or assists residents with prescribed or over-the-counter medications shall complete training in medication administration and management prior to assuming these job duties. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that 1 of 3 employees reviewed had completed training in first aid and choking or fire safety. This is a repeat violation from previous Statement of Deficiency (SOD) R71L12 dated 06/17/2025, SOD LGZ011 dated 04/30/2025 and SOD R71L11 dated 12/18/2024. Findings include: First Aid and Choking On 01/13/2026, Surveyor reviewed Caregiver B's employee file. Caregiver B was hired 07/18/2024. There was no evidence that Caregiver B had completed training in first aid and choking. There was no evidence found in the file indicating that Caregiver B was exempt from this training. On 01/13/2026 at 9:45 AM, Surveyor interviewed Administrator A. Administrator A who confirmed that Caregiver B works as a caregiver and would have to administer first aid and respond to choking emergencies. On 01/13/2026, Surveyor verified Caregiver B was not on the Community-Based Care and Treatment training registry for first aid and	{N 239}		

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{N 239}	Continued From page 2 choking. Fire Safety On 01/13/2026, Surveyor reviewed Caregiver B's employee file. Caregiver B was hired 07/18/2024. There was no evidence that Caregiver B had completed training in fire safety. There was no evidence found in the file indicating that Caregiver B was exempt from this training. On 01/13/2026 at 9:45 AM, Surveyor interviewed Administrator A. Administrator A confirmed that Caregiver B works as a caregiver and would have to respond in a fire emergency. On 01/13/2026, Surveyor verified Caregiver B was not on the Community-Based Care and Treatment training registry for fire safety. On 01/13/2026 at 12:00 PM, Surveyor discussed the above concern with Administrator A. Administrator A acknowledged that all employees must be trained in fire safety, first aid and choking within 90 days of hire. Administrator A acknowledged that Caregiver B had worked since 07/18/2024 without completing training in fire safety or first aid and choking. Administrator A stated that Caregiver B speaks mostly Spanish, and facility has had a hard time finding a translator or training offered in Spanish.	{N 239}		
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	N 481		

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N 481	Continued From page 3 shall contain furnishings appropriate to the intended use of the room. This Rule is not met as evidenced by: Based on observation and interview, the provider did not provide a safe, clean and comfortable environment. There was evidence of mice inside the facility. This is a repeat violation from previous Statement of Deficiency (SOD) GP7H11 dated 06/16/2023, SOD GP7H12 dated 09/06/2023 and SOD GP7H13 dated 03/13/2024 Findings include: On 01/13/2026 at 9:15 AM, Surveyor toured the physical environment. On 01/13/2026 at 9:30 AM, Surveyor was stopped by Resident 1. Resident 1 stated, "They got problems with mice again! I have seen them in the living room while I'm trying to watch television. They come in the exit door. There is a hole in the corner that they fit through." On 01/13/2026 at 10:00 AM, Surveyor interviewed Resident 2. Resident 2 stated, "I can see where they come in, and I have seen them in the living room before. There is a hole in the corner of the exit door right there." Resident 2 pointed to the exit door. Surveyor observed a hole in the corner of the exit door leading outside. The hole was the size of a quarter. Mice can fit themselves through a hole the size of a dime.	N 481		

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N 481	Continued From page 4 On 01/13/2026 at 12:00 PM, Surveyor interviewed Administrator A. Administrator A stated s/he was aware that mice have been seen in the building. Administrator A stated s/he was not aware of any holes in doors or the structure of the building but would contact maintenance to take care of it.	N 481		
N 531	83.47(4)(a) Fire extinguishers: type and inspection. At least one portable dry chemical fire extinguisher with a minimum 2A, 10-B-C rating shall be provided on each floor of the CBRF. All fire extinguishers shall be maintained in readily usable condition. Inspections of the fire extinguisher shall be done by a qualified professional one year after initial purchase and annually thereafter. Each fire extinguisher shall be provided with a tag documenting the date of inspection. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure that 3 of 3 fire extinguishers were inspected annually. Three fire extinguishers had a date of last inspection of 10/2024. Findings include: On 01/13/2026, Surveyor toured the physical environment. Three of 3 fire extinguishers in facility were observed to have a date of last inspection of 10/2024. On 01/13/2026 at 12:00 PM, Surveyor interviewed Administrator A. Administrator A	N 531		

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N 531	Continued From page 5 acknowledged that fire extinguishers are required to be inspected annually. Administrator A acknowledged that the fire extinguishers had not been inspected since 10/2024. Administrator A stated, "I'm not sure how that was missed. I will get that done asap."	N 531		