| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 0017356 | A. BUILDING: _____ B. WING _____ | C 01/15/2026 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **KOMFORT CARE** | **3201 N 46TH ST MILWAUKEE, WI 53216** |

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| M 000 | INITIAL COMMENTS<br><br>On 01/15/2026, Surveyors conducted a complaint investigation at Komfort Care in Milwaukee.<br>Six deficiencies were identified.<br>One complaint was unsubstantiated.<br><br>Census: 01 | M 000 | | |
| M 232 | 88.04(2)(g)1 HEALTH SCREENING FOR STAFF<br><br>The licensee shall obtain documentation from a physician, a registered nurse or a physician's assistant indicating that the licensee and any service provider has been screened for illness detrimental to residents, including for tuberculosis. The documentation is to be completed within 90 days before the start of providing service. The documentation shall be kept confidential except that the licensing agency shall have access to the documentation for verification.<br><br>This Rule is not met as evidenced by:<br>Based on record review and interview, the provider did not ensure 2 of 2 caregivers (Licensee A and Caregiver B) were screened for communicable diseases, including tuberculosis (TB), within 90 days before the start of providing cares. Licensee A and Caregiver B were not screened for communicable diseases including TB before providing cares.<br><br>Findings include:<br><br>On 01/15/2026, at approximately 11:30 AM, Surveyor reviewed Licensee A's employee | M 232 | | |

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

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| M 232 | Continued From page 1<br>records. Licensee A was hired on 05/21/2020. Licensee A's employee record contained a negative TB skin test, dated 08/16/2023. Licensee A's employee records did not contain evidence that indicated Licensee A was screened for other communicable disease.<br><br>On 01/15/2026, at approximately 11:30 AM, Surveyor reviewed Caregiver B's employee record. Caregiver B's employee record did not contain a hire date. Caregiver B's employee record did contain a criminal background check with a date of 03/18/2023. Caregiver B's employee record contained documentation of a completed TB skin test, dated 11/16/2017. Caregiver B's employee record did not contain evidence stating Caregiver B was screened for other communicable disease.<br><br>On 01/15/2026 at approximately 11:30 AM, Surveyor interviewed Licensee A. Licensee A could not recall the exact hire date of Caregiver B, but believes Caregiver B may have started in 2023. Licensee A reported he/she is familiar with Department Health Services (DHS) Chapter 88. Licensee A could not confirm if he/she and Caregiver B were screened for communicable disease. | M 232 | | |
| M 344 | 88.05(4)(d)2.a FIRE SAFETY EVACUATION PLAN REVIEW<br><br>The licensee shall review the fire safety evacuation plan with each new resident immediately following placement and shall evaluate the resident using a form provided by the department to determine whether the resident is able to evacuate the home | M 344 | | |

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| M 344 | Continued From page 2<br>without any help within 2 minutes.<br><br>This Rule is not met as evidenced by:<br>Based on record review and interview, the provider did not ensure each resident was evaluated, using the department form, to determine whether they were able to evacuate the home without any help within 2 minutes for 1 of 2 residents (Resident 1).<br><br>Findings include:<br><br>On 01/15/2026, Surveyor reviewed resident records and identified the following:<br>-Resident 1 was admitted to the facility on 09/9/2025. Resident 1's record did not contain an evacuation evaluation.<br><br>On 01/15/2026, at approximately 11:30 AM, Surveyor interviewed Licensee A regarding evacuation evaluations. Licensee A confirmed evacuation evaluations were supposed to be completed when a resident was admitted to the facility and that Residents 1 was not evaluated to determine if they were able to evacuate the home within 2 minutes. | M 344 | | |
| M 384 | 88.06(2)(b) SERVICE AGREEMENT EXCEPT RESPITE<br><br>An adult family home shall have a service agreement with each person to be admitted to the home except a person being admitted for respite care. The service agreement shall be completed prior to admission and revised at least 30 days prior to any | M 384 | | |

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| M 384 | Continued From page 3<br>change. The service agreement shall be dated and signed by the licensee and the person being admitted or the persons guardian or designated representative. Copies shall be provided to all parties and to the placing agency, if any.<br>This Rule is not met as evidenced by:<br>Based on record review and interview, the provider did not ensure a service agreement was completed, dated, and signed prior to admission for 2 of 2 residents. Resident 1 and Resident 2 did not have completed, signed service agreements.<br><br>Findings include:<br><br>On 01/15/2026 at approximately 11:15 AM, Surveyor reviewed resident records and identified the following:<br><br>- Resident 1 was admitted 09/09/2025. Resident 1's record did not contain a service agreement.<br><br>- Resident 2 was admitted 10/15/2025. Resident 1's record did not contain a service agreement.<br><br>On 01/15/2026, at approximately 11:45 PM, Surveyors interviewed Licensee A regarding Resident 1's and Resident 2's service agreements. Licensee A reported that they overlooked filling out the forms. Licensee A reported s/he would review DHS 88.06(2)(b) Service Agreement Requirements and ensure they were completed for current and future residents. | M 384 | | |
| M 404 | 88.06(3)(a) INDIVIDUAL SERVICE PLAN & ASSESSMENT | M 404 | | |

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| M 404 | Continued From page 4<br><br>The licensee shall ensure that a written assessment and individual service plan is completed and developed for each resident within 30 days after placement.<br><br>This Rule is not met as evidenced by:<br>Based on record review and interview the provider did not ensure a written assessment and an individual service plan (ISP) were completed and developed for each resident within 30 days after placement for 2 of 2 residents reviewed (Residents 1, Resident 2).<br><br>Findings include:<br><br>On 01/15/2026 at approximately 11:15 AM, Surveyor reviewed resident records and identified the following:<br><br>-Resident 1 was admitted to the facility on 09/9/2025 with diagnosis of asthma, cardiomyopathy, chronic pain, constipation, helicobacter pylori gastritis, hypertension, polysubstance abuse and history of a stroke. Resident 1's record did not have an assessment or ISP in the facility file.<br><br>-Resident 2 was admitted approximately 10/15/2025. Resident 2's record did not have an assessment or ISP in the facility file.<br><br>On 01/15/2021, at approximately 12:00 PM, Surveyors interviewed Licensee A regarding the missing assessments and ISPs, asking how s/he determines what care needs the residents | M 404 | | |

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| M 404 | Continued From page 5<br>require. Licensee A reported they were in constant contact with Resident 1's guardian who gave them the specifics of which cares were required. Licensee A stated, "[Resident 2] is independent, they take care of their own medications, and I provide meals.<br><br>Licensee A reported s/he would review 88.06(3)(a) regarding Individual Service Plans & Assessments requirements and develop a system to ensure they are following the regulations. | M 404 | | |
| M 522 | 88.09(2)(a)4 BEGINNING EMPLOYMENT<br><br>Beginning date of employment.<br><br>This Rule is not met as evidenced by:<br>Based on record review and interview, the provider did not maintain and keep up to date personnel records for 1 (Caregiver B) of 2 service providers. Caregiver B's employee record did not include a date of hire.<br><br>Findings include:<br><br>On 01/15/2026, Surveyor reviewed Caregiver B's employee records. Surveyor did not observe a date of hire for Caregiver B.<br><br>On 01/15/2026 at approximately 11:30 AM Surveyor interviewed Licensee A. Licensee A denied having Caregiver B's exact hire date, but believes it was sometime in 2023 when the adult family home received their first resident. Licensee A reported he/she was familiar with the adult family home regulations, specifically, Department Health Services (DHS) Chapter 88 and the need to have the date of hire as a part of | M 522 | | |

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| M 522 | Continued From page 6<br>the employee record. Licensee A did not provide a reason as to why he/she did not have Caregiver B's date of hire. | M 522 | | |
| M 530 | 88.09(2)(a)8 TRAINING DOCUMENTATION<br><br>Documentation of successful completion of the training requirements under HSS 88.04(5).<br><br>This Rule is not met as evidenced by:<br>Based on record review and interview, the licensee did not maintain and keep up to date a personnel record for each service provider which included documentation of successful completion of the training requirements under s. DHS 88.04(5) for 2 of 2 employees reviewed (Licensee A and Caregiver B).<br><br>DHS 88.04(5)(b) states "(5) TRAINING. (b) Except as provided in pars. (c) and (d), the licensee and each service provider shall complete 8 hours of training approved by the licensing agency related to the health, safety, welfare, rights and treatment of residents every year beginning with the calendar year after the year in which the initial training is received."<br><br>Findings include:<br><br>On 01/15/2026 at approximately 11:30 AM, Surveyor reviewed Licensee A's employee record. Licensee A was hired on 05/21/2020. Licensee A's employee record did not contain documentation of 8 hours of training approved by the licensing agency related to the health, safety, welfare, rights and treatment of residents for 2025. | M 530 | | |

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| M 530 | Continued From page 7<br><br>On 01/15/2026 at approximately 11:30 AM, Surveyor reviewed Caregiver B's employee record. Caregiver B's employee record did not contain a hire date. Caregiver B's employee record contained a criminal background check with a date of 03/18/2023. Caregiver B's employee record did not contain documentation of 8 hours of training approved by the licensing agency related to the health, safety, welfare, rights and treatment of residents for 2025.<br><br>On 01/15/2026 at approximately 11:30 AM, Surveyor interviewed Licensee A regarding his/her and Caregiver B's training. Licensee A affirmed not having Caregiver B's date of hire but believes Caregiver B started in 2023. Licensee A reported he/she and Caregiver B completed 8 hours of continuing education training in 2025. Surveyor asked that Licensee A email documentation showing Licensee A and Caregiver B completed continuing education in 2025 by 5:00 PM on 01/15/2026. As of 01/20/2026 at 2:15 PM, Surveyor has not received additional documents that contained evidence of completed continuing education for Licensee A and Caregiver B. | M 530 | | |