

Tony Evers
Governor



Kirsten L. Johnson
Secretary

**State of Wisconsin
Department of Health Services**

DIVISION OF QUALITY ASSURANCE

BUREAU OF ASSISTED LIVING
NORTHWESTERN REGIONAL OFFICE
610 GIBSON ST SUITE 1
EAU CLAIRE WI 54701-3687

Telephone: 715-836-4790
Fax: 608-224-5705
TTY: 711 or 800-947-3529

November 14, 2024

ELECTRONIC MAIL
SOD #LHNW19

Rhonda Schillinger
750 Main Street, Ste. 200
Mendota Heights, MN 55118

C/O Licensee: Hudson COH LLC

**Re: Comforts of Home Hudson, 0010987
1111 Heggen Street
Hudson, WI 54016**

Dear Rhonda Schillinger:

On 11-12-24, the Division of Quality Assurance, Bureau of Assisted Living concluded a complaint investigation and verification visit for your facility to determine compliance with Wisconsin Administrative Code ch. DHS 83. As a result of this visit, there were no violations of DHS 83.

The enclosed information is for your records.

NOTICE OF REVISIT FEE

According to Wis. Stat. § 50.03(5g)(cm), if the Department imposes a sanction on, or takes other enforcement action against a community-based residential facility for violation of this subchapter or rules promulgated under it, and the Department subsequently conducts an onsite inspection to review the facility's action to correct the violation(s), the Department may impose a \$200 inspection fee on the community-based residential facility.

On 11-12-24, a verification visit was concluded at Comforts of Home Hudson by the Division of Quality Assurance, Bureau of Assisted Living, to determine if the violation(s) contained in Statement of Deficiency (SOD) #LHNW18 were corrected. **Therefore, an inspection fee of \$200 is being assessed.**

Please send a check or money order in the amount of \$200 made payable to "Division of Quality Assurance" and send it to:

Division of Quality Assurance
Bureau of Assisted Living
Northwestern Regional Office
610 Gibson St., Suite 1
Eau Claire, WI 54701-3687

www.dhs.wisconsin.gov

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Comforts of Home Hudson
11-12-24

The revisit fee is due within ten (10) days of receipt of this Notice. Failure to submit this revisit fee will result in the issuance of a subsequent statement of deficiency with additional enforcement sanctions against Comforts of Home Hudson. There are no appeal rights for revisit fees.

If you have any questions, please contact the regional office at (715) 836-4790.

Sincerely,

A handwritten signature in black ink, appearing to read 'William R. Gardner', written in a cursive style.

William R. Gardner, Assisted Living Regional Director
Bureau of Assisted Living
Division of Quality Assurance

Enclosure
MVL