

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0014116	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED R 02/16/2026
NAME OF PROVIDER OR SUPPLIER GRACE FAMILY HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 1001 S THOMPSON DR MADISON, WI 53716		
(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 On 02/16/2026, Surveyor conducted a verification visit at Grace Family Home, an AFH located in Madison, WI. As a result of the survey, 1 violation of Chapter DHS 88 was issued. One violation is a repeat violation from previous Statement of Deficiency (SOD) TRQW11 dated 11/13/2025. Four violations from previous SOD TRQW11 were corrected. Under statutory provisions of Wis. Stat. ch. 50, a \$200 revisit fee is being assessed.	{M 000}			
{M 570}	88.10(3)(I) Safe Physical Environment Individuals, except for correctional residents, have basic rights which they do not lose when they enter an adult family home. A resident shall have a safe environment in which to live. The adult family home shall safeguard residents who cannot fully guard themselves from environmental hazards to which they are likely to be exposed, including conditions which would be hazardous to anyone and conditions which would be or are hazardous to a particular resident because of the resident's condition or disability. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure a safe physical environment	{M 570}			

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

TITLE

(X6) DATE

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{M 570}	Continued From page 1 appropriate for residents. Chemicals were noted in unlocked cabinets in the kitchen cabinet. Combustible items were stored within 3 feet of the home's furnace, creating a fire hazard. Findings include: On 02/16/2026 at approximately 9:20 AM, Surveyor began a tour of the provider's home. OBSERVATIONS: Kitchen: An unlocked cabinet under the kitchen sink with cleaning chemicals including, but not limited to, Ajax and raid bug spray were present. Basement Furnace Room: Combustible materials within 3 feet of the home's furnace, including a plastic like folder containing paperwork taped to the furnace; a plastic laundry basket containing clothing; cardboard boxes that contained flooring material; a paint can that was partially filled with paint. On 11/11/2025 at approximately 10:50 AM, Surveyor interviewed Caregiver A regarding the above concerns. Caregiver A acknowledged that cleaning chemicals must be secured and acknowledged that they were not. Caregiver A acknowledged that combustible materials must be kept at least 3 feet away from a furnace and water heater. Caregiver A acknowledged all above concerns and indicated they would ensure these items were corrected.	{M 570}		