

**Provider Inspection Summary**  
For the period 07/01/2006 to 06/30/2009  
Adult Day Care Facility  
COUNTY: BROWN

**Notes**

**This report includes Provider Inspection Summaries (Facility Profiles) for Adult Day Care Facilities in Brown County.**

**The report is a PDF (Adobe Acrobat) document and includes a total of 3 pages. If you wish to read the profile for a particular facility without scrolling through the rest of the document, use the Search feature in the Acrobat Reader to specify part of the name of the facility you wish to review.**

**If you wish to print the profile for a particular facility, be sure to send only the desired pages to your computer printer. Otherwise you will be printing all pages in the document.**

**Provider Inspection Summary**  
For the period 07/01/2006 to 06/30/2009  
Adult Day Care Facility  
COUNTY: BROWN

**Facility Information**

**Facility Name:** ALZHEIMERS ADULT DAY PROGRAM (0011303)  
**Address:** 1538 WESTERN AVE, GREEN BAY, WI 54303  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 02/28/2006  
**Regional Office:** NORTHEASTERN REGION (DEPERE), (920) 983-3200

**Survey History**

**Survey ID:** 0101362    **End Date:** 03/05/2008    **Type:** STANDARD    **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**This is Page 2 of 3 total pages. If printing this report ensure that your printer is set to print only the desired pages.**

***Disclaimer: This information is provided as a public service by the Wisconsin Department of Health Services (DHS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.***

**Provider Inspection Summary**  
For the period 07/01/2006 to 06/30/2009  
Adult Day Care Facility  
COUNTY: BROWN

**Facility Information**

**Facility Name:** OLDER AMERICANS PROG INHOUSE/INSIDERS (400003)

**Address:** 2900 CURRY LN, GREEN BAY, WI 54311

**License Status:** REGULAR

**Licensed/Certified/Registered** 04/05/1990

**Regional Office:** NORTHEASTERN REGION (DEPERE), (920) 983-3200

**Survey History**

**Survey ID:** 0098426    **End Date:** 01/04/2007    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #10007413    Served 01/12/2007

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
I.c.(2)	PLAN-IDENTIFIED NEEDS WITH 30 DAYS		
II.d.(5)	TRAINING-WRITTEN RECORD		

***This is Page 3 of 3 total pages. If printing this report ensure that your printer is set to print only the desired pages.***

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