

Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Residential Care Apartment Complex
COUNTY: CHIPPEWA

Notes

This report includes Provider Inspection Summaries (Facility Profiles) for Residential Care Apartment Complexes in Chippewa County.

The report is a PDF (Adobe Acrobat) document and includes a total of 9 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
Residential Care Apartment Complex (REGISTERED)
COUNTY: CHIPPEWA

Facility Information

Facility Name: ROSE GARDEN (0011931)
Address: 1900 PRIDDY ST, BLOOMER, WI 54724
License Status: REGULAR
Licensed/Certified/Registered 04/09/2007
Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

No survey activity during the period 07/01/2006 through 06/30/2009.

This is Page 2 of 9 total pages. If printing this report ensure that your printer is set to print only the desired pages.

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Residential Care Apartment Complex (REGISTERED)
COUNTY: CHIPPEWA

Facility Information

Facility Name: CHIPPEWA MANOR RETIREMENT CENTER (0010254)

Address: 756 IRVINE STREET, CHIPPEWA FALLS, WI 54729

License Status: REGULAR

Licensed/Certified/Registered 06/20/1997

Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

No survey activity during the period 07/01/2006 through 06/30/2009.

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Residential Care Apartment Complex (CERTIFIED)
COUNTY: CHIPPEWA

Facility Information

Facility Name: COMFORTS OF HOME - CHIPPEWA FALLS RCAC (0011498)

Address: 1224 PUMPHOUSE RD, CHIPPEWA FALLS, WI 54729

License Status: REGULAR

Licensed/Certified/Registered 07/01/2006

Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0103515 **End Date:** 02/27/2009 **Type:** OTHER **Purpose:** DESK REVIEW

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Residential Care Apartment Complex (CERTIFIED)
COUNTY: CHIPPEWA

Survey ID: 0102271 End Date: 07/11/2008 Type: OTHER Purpose: VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #99NB11 Served 08/06/2008

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.22(3)	BUILDING REQUIREMENTS		
89.23(2)(a)2.c	SERVICES		
89.23(3)(b)	SERVICES		
89.23(3)(e)	SERVICES		
89.23(4)(a)1	SERVICES		
89.23(4)(a)2	SERVICES		
89.23(4)(b)1	SERVICES		
89.26(1)	COMPREHENSIVE ASSESSMENT		
89.26(2)(a)	COMPREHENSIVE ASSESSMENT		
89.26(3)(b)	PARTICIPATION IN THE ASSESSMENT		
89.27(1)	SERVICE AGREEMENT		
89.27(3)(c)	SERVICE AGREEMENT		
89.27(3)(e)	SERVICE AGREEMENT		
89.28(1)	RISK AGREEMENT		
89.28(5)	RISK AGREEMENT		
89.28(6)	RISK AGREEMENT		
89.34(1)	TENANT RIGHTS		

Survey ID: 0100734 End Date: 11/12/2007 Type: STANDARD Purpose: SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #VYF511 Served 12/11/2007

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.29(1)(b)	ADMISSION & RETENTION OF TENANTS	01/11/2008	Yes
89.29(2)(b)1	ADMISSION & RETENTION OF TENANTS	01/11/2008	Yes
89.34(1)	TENANT RIGHTS	01/11/2008	Yes

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Residential Care Apartment Complex (CERTIFIED)
COUNTY: CHIPPEWA

Enforcement History (COMFORTS OF HOME - CHIPPEWA FALLS RCAC)

Date: 08/01/2008 SOD #99NB11 Appealed: No

Sanctions

COMPLY WITH FACILITY PLAN OF CORRECTION
NO NEW ADMISSIONS
FORFEITURE---89.22(3)
FORFEITURE---89.23(2)(a)2.c
FORFEITURE---89.23(3)(b)
FORFEITURE---89.23(3)(e)
FORFEITURE---89.23(4)((a)2
FORFEITURE---89.23(4)(a)1
FORFEITURE---89.26(1)
FORFEITURE---89.26(2)(a)
FORFEITURE---89.26(3)(b)
FORFEITURE---89.34(1)

Date: 12/05/2007 SOD #VYF511 Appealed: No

Sanctions

COMPLY WITH REQUIREMENT
PROVIDE TRAINING
FORFEITURE---89.29(1)(b)
FORFEITURE---89.29(2)(b)1

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Residential Care Apartment Complex (CERTIFIED)
COUNTY: CHIPPEWA

Complaint History (COMFORTS OF HOME - CHIPPEWA FALLS RCAC)

Date Complaint Received: 09/04/2007

Date Investigation Completed: 11/12/2007

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
RESIDENT RIGHTS	SUBSTANTIATED	VYF511
HOMELIKE ENVIRONMENT & CLEANLINESS	NOT SUBSTANTIATED	
MEDICATIONS	NOT SUBSTANTIATED	
ADMISSION, TRANSFER & DISCHARGE	SUBSTANTIATED	VF511

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Residential Care Apartment Complex (REGISTERED)
COUNTY: CHIPPEWA

Facility Information

Facility Name: WISSOTA SPRINGS (0011409)
Address: 2801 CTY HWY I, CHIPPEWA FALLS, WI 54729
License Status: REGULAR
Licensed/Certified/Registered 02/24/2006
Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0104097 **End Date:** 06/01/2009 **Type:** OTHER **Purpose:** DESK REVIEW
Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Residential Care Apartment Complex (CERTIFIED)
COUNTY: CHIPPEWA

Facility Information

Facility Name: HOMEPLACE OF STANLEY LLC (THE) (0011165)
Address: 225 E FOURTH AVE, STANLEY, WI 54768
License Status: REGULAR
Licensed/Certified/Registered 11/04/2005
Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0101792 **End Date:** 05/01/2008 **Type:** STANDARD **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0097687 **End Date:** 08/21/2006 **Type:** OTHER **Purpose:** OTHER

Results: NO STATEMENT OF DEFICIENCY ISSUED

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