

Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Notes

This report includes Provider Inspection Summaries (Facility Profiles) for Adult Family Homes in Fond du Lac County.

The report is a PDF (Adobe Acrobat) document and includes a total of 17 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 Family Home
COUNTY: FOND DU LAC

Facility Information

Facility Name: MURASKI ADULT FAMILY HOME (490091)
Address: W12698 CTY HWY AS, BRANDON, WI 53919
License Status: REGULAR
Licensed/Certified/Registered 02/01/1999
Regional Office: NORTHEASTERN REGION (DEPERE), (920) 983-3200

Survey History

Survey ID: 0101669 **End Date:** 05/05/2008 **Type:** OTHER **Purpose:** VERIFICATION VISIT
Results: NO STATEMENT OF DEFICIENCY ISSUED

This is Page 2 of 17 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
Adult Family Home
COUNTY: FOND DU LAC

Survey ID: 0100041 End Date: 08/09/2007 Type: STANDARD Purpose: SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #JIS912 Served 08/29/2007

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.03(3)(b)	CRIMINAL RECORDS CHECK	05/05/2008	Yes
88.04(2)(a)	RESPONSIBILITIES	05/05/2008	Yes
88.04(2)(d)	COPY OF RULES AVAILABLE	05/05/2008	Yes
88.04(2)(g)1	HEALTH SCREENING FOR STAFF	05/05/2008	Yes
88.04(5)(a)	TRAINING-15 HOURS WITHIN 6 MONTHS	05/05/2008	Yes
88.05(3)(b)	FREE OF HAZARDS	05/05/2008	Yes
88.05(3)(d)	ANNUAL WELL WATER INSPECTIONS	05/05/2008	Yes
88.05(4)(b)2	SMOKE DETECTORS-TESTING AND MAINTENANCE	05/05/2008	Yes
88.05(4)(d)1	FIRE SAFETY EVACUATION PLAN	05/05/2008	Yes
88.05(4)(d)2.c	SEMI-ANNUAL FIRE DRILLS	05/05/2008	Yes
88.05(6)(a)	HOUSEHOLD PETS	05/05/2008	Yes
88.07(3)(a)	PRESCRIPTION MEDICATIONS	05/05/2008	Yes
88.07(3)(d)	MEDICATION- WRITTEN ORDER	05/05/2008	Yes
88.09(1)(a)	RESIDENT RECORDS	05/05/2008	Yes
88.09(2)(a)	SERVICE PROVIDER RECORD	05/05/2008	Yes

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Enforcement History (MURASKI ADULT FAMILY HOME)

Date: 08/28/2007 SOD #JIS912 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Facility Information

Facility Name: ARC BECHAUD ADULT FAMILY HOME (0009336)
Address: 1200 BECHAUD, N FOND DU LAC, WI 54937
License Status: REGULAR
Licensed/Certified/Registered 05/24/2001
Regional Office: NORTHEASTERN REGION (DEPERE), (920) 983-3200

Survey History

Survey ID: 0103900 **End Date:** 04/13/2009 **Type:** STANDARD **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #R1K712 Served 05/04/2009

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(2)(g)1	HEALTH SCREENING FOR STAFF		
88.05(4)(b)1	FIRE SAFETY-SMOKE DETECTORS		

Survey ID: 0098767 **End Date:** 02/20/2007 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10007446 Served 03/01/2007

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(4m)(c)	COMPLETE BACKGROUND INFORMATION DISCLOSURE FORM	04/08/2009	Yes
88.04(2)(g)1	HEALTH SCREENING FOR STAFF	04/08/2009	No
88.05(4)(b)2	SMOKE DETECTORS-TESTING AND MAINTENANCE	04/08/2009	Yes

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Enforcement History (ARC BECHAUD ADULT FAMILY HOME)

Date: 02/26/2007 SOD #10007446 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
COMPLY WITH REQUIREMENT

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Facility Information

Facility Name: BROADWAY HOUSE (490009)
Address: 158 BROADWAY, N FOND DU LAC, WI 54937
License Status: REGULAR
Licensed/Certified/Registered 05/01/1993
Regional Office: NORTHEASTERN REGION (DEPERE), (920) 983-3200

Survey History

Survey ID: 0104015 **End Date:** 04/15/2009 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #TRLD13 Served 05/26/2009

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.07(3)(a)	PRESCRIPTION MEDICATIONS		

Survey ID: 0098187 **End Date:** 10/30/2006 **Type:** STANDARD **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10007392 Served 11/29/2006

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(2)(g)1	HEALTH SCREENING FOR STAFF	04/15/2009	Yes
88.05(3)(b)	FREE OF HAZARDS	04/15/2009	Yes
88.05(4)(d)2.c	SEMI-ANNUAL FIRE DRILLS	04/15/2009	Yes

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Facility Information

Facility Name: CHAPMAN HOME (0011108)
Address: 1715 CHAPMAN AVE, N FOND DU LAC, WI 54937
License Status: REGULAR
Licensed/Certified/Registered 09/21/2005
Regional Office: NORTHEASTERN REGION (DEPERE), (920) 983-3200

Survey History

Survey ID: 0101797 **End Date:** 04/14/2008 **Type:** STANDARD **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #FZ9P11 Served 05/30/2008

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(4)(b)1	FIRE SAFETY-SMOKE DETECTORS		

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Facility Information

Facility Name: LKI THURKE AVENUE (0010071)
Address: 1821 THURKE AVE, N FOND DU LAC, WI 54937
License Status: REGULAR
Licensed/Certified/Registered 08/05/2003
Regional Office: NORTHEASTERN REGION (DEPERE), (920) 983-3200

Survey History

Survey ID: 0101707 **End Date:** 05/08/2008 **Type:** STANDARD **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Facility Information

Facility Name: LKI PRAIRIE FOX COURT AFH (0010185)
Address: 225 PRAIRIE FOX CT, NORTH FOND DU LAC, WI 54937
License Status: REGULAR
Licensed/Certified/Registered 10/07/2003
Regional Office: NORTHEASTERN REGION (DEPERE), (920) 983-3200

Survey History

Survey ID: 0101856 **End Date:** 06/03/2008 **Type:** STANDARD **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Facility Information

Facility Name: DIVERSE OPTIONS INC COUNTRY ACRES (0009126)
Address: W7876 ANGLE RD, RIPON, WI 54971
License Status: REGULAR
Licensed/Certified/Registered 10/12/2000
Regional Office: NORTHEASTERN REGION (DEPERE), (920) 983-3200

Survey History

Survey ID: 0102490 **End Date:** 09/05/2008 **Type:** STANDARD **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0097595 **End Date:** 07/24/2006 **Type:** ABBREVIATED **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10007335 Served 08/21/2006

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(2)(g)1	HEALTH SCREENING FOR STAFF	09/05/2008	Yes
88.04(5)(b)	TRAINING-8 HOURS ANNUALLY	09/05/2008	Yes

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Enforcement History (DIVERSE OPTIONS INC COUNTRY ACRES)

Date: 08/17/2006 SOD #10007335 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Facility Information

Facility Name: DIVERSE OPTIONS INC HILLTOP (490061)
Address: 315 W OSHKOSH ST, RIPON, WI 54971
License Status: REGULAR
Licensed/Certified/Registered: 02/01/1996
Regional Office: NORTHEASTERN REGION (DEPERE), (920) 983-3200

Survey History

Survey ID: 0104087 **End Date:** 04/23/2009 **Type:** STANDARD **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0097979 **End Date:** 10/11/2006 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10007373 Served 10/26/2006

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(2)(g)1	HEALTH SCREENING FOR STAFF	04/23/2009	Yes
88.06(3)(c)	ASSESSMENT IDENTIFY NEEDS & ABILITIES	04/23/2009	Yes

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Enforcement History (DIVERSE OPTIONS INC HILLTOP)

Date: 10/25/2006 SOD #10007373 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
COMPLY WITH REQUIREMENT

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Facility Information

Facility Name: DIVERSE OPTIONS INC MAYPARTY (0009176)
Address: 538 MAYPARTY DR, RIPON, WI 54971
License Status: REGULAR
Licensed/Certified/Registered 03/07/2001
Regional Office: NORTHEASTERN REGION (DEPERE), (920) 983-3200

Survey History

Survey ID: 0098647 **End Date:** 01/29/2007 **Type:** OTHER **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10007435 Served 02/08/2007

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(3)(b)	COMPLETE BACKGROUND CHECK PROCESS		

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Facility Information

Facility Name: HICKORIES ADULT CARE & RESPITE CENTER (THE) (0012669)

Address: N2996 HWY 49, WAUPUN, WI 53963

License Status: REGULAR

Licensed/Certified/Registered 02/10/2009

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

Survey History

Survey ID: 0103408 **End Date:** 02/10/2009 **Type:** INITIAL **Purpose:** SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

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Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009
Adult Family Home
COUNTY: FOND DU LAC

Facility Information

Facility Name: MAHLSTEDT ADULT FAMILY HOME (0009380)
Address: W10004 CTY RD TC, WAUPUN, WI 53963
License Status: REGULAR
Licensed/Certified/Registered 08/08/2001
Regional Office: NORTHEASTERN REGION (DEPERE), (920) 983-3200

Survey History

Survey ID: 0101299 **End Date:** 03/06/2008 **Type:** ABBREVIATED **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

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