

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

**Notes**

**This report includes Provider Inspection Summaries (Facility Profiles) for Residential Care Apartment Complexes in Fond du Lac County.**

**The report is a PDF (Adobe Acrobat) document and includes a total of 8 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: FOND DU LAC

**Facility Information**

**Facility Name:** LAKE VIEW ESTATES (0011387)  
**Address:** 517 LUCO RD, FOND DU LAC, WI 53495  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 04/01/2006  
**Regional Office:** NORTHEASTERN REGION (DEPERE), (920) 983-3200

**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 (REGISTERED)  
COUNTY: FOND DU LAC

**Facility Information**

**Facility Name:** ST FRANCIS TERRACE (0010373)  
**Address:** 345 E FIRST ST, FOND DU LAC, WI 54935  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 11/19/1998  
**Regional Office:** NORTHEASTERN REGION (DEPERE), (920) 983-3200

**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: FOND DU LAC

**Facility Information**

**Facility Name:** WALNUT GROVE FOND DU LAC I (0012640)  
**Address:** 597 KINGSWOOD AVE, FOND DU LAC, WI 54935  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 11/19/2008  
**Regional Office:** NORTHEASTERN REGION (DEPERE), (920) 983-3200

**Survey History**

**Survey ID:** 0102947      **End Date:** 11/19/2008      **Type:** INITIAL      **Purpose:** CHOW--DESK REVIEW  
**Results:** LICENSE/CERT/REGISTRATION ISSUED

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

**Facility Information**

**Facility Name:** WOODLANDS SENIOR PARK (0010355)  
**Address:** 77 WISCONSIN AMERICAN DR, FOND DU LAC, WI 54935  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 09/17/2003  
**Regional Office:** NORTHEASTERN REGION (DEPERE), (920) 983-3200

**Survey History**

**Survey ID:** 0101994    **End Date:** 06/12/2008    **Type:** ABBREVIATED    **Purpose:** SURVEY/SELF REPORT  
**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: FOND DU LAC

**Facility Information**

**Facility Name:** VILLA ROSA ASSISTED LIVING (0011286)  
**Address:** N8120 CTY RD WW, MT CALVARY, WI 53057  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 01/18/2006  
**Regional Office:** NORTHEASTERN REGION (DEPERE), (920) 983-3200

**Survey History**

**Survey ID:** 0101710      **End Date:** 05/08/2008      **Type:** STANDARD      **Purpose:** SURVEY/SELF REPORT  
**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: FOND DU LAC

**Facility Information**

**Facility Name:** MAPLECREST MANOR (0010341)  
**Address:** 150 N DOUGLAS ST, RIPON, WI 54971  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 05/09/2003  
**Regional Office:** NORTHEASTERN REGION (DEPERE), (920) 983-3200

**Survey History**

**Survey ID:** 0101298    **End Date:** 03/05/2008    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0099518    **End Date:** 06/13/2007    **Type:** ABBREVIATED    **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  
Residential Care Apartment Complex (CERTIFIED)  
COUNTY: FOND DU LAC

**Complaint History (MAPLECREST MANOR)**

**Date Complaint Received: 02/05/2008**

**Date Investigation Completed: 03/05/2008**

Subject Area(s)

Result

SOD #

NUTRITION & FOOD SERVICES

NOT SUBSTANTIATED

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