

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

Notes

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

The report is a PDF (Adobe Acrobat) document and includes a total of 6 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: OUTAGAMIE

Facility Information

Facility Name: APPLETON RETIREMENT COMMUNITY (0012340)
Address: 200 W PACKARD STREET, APPLETON, WI 54911
License Status: REGULAR
Licensed/Certified/Registered 03/13/2008
Regional Office: NORTHEASTERN REGION (DEPERE), (920) 983-3200

Survey History

Survey ID: 0103427 **End Date:** 03/13/2008 **Type:** INITIAL **Purpose:** CHOW--DESK REVIEW
Results: LICENSE/CERT/REGISTRATION ISSUED

This is Page 2 of 6 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
Residential Care Apartment Complex (REGISTERED)
COUNTY: OUTAGAMIE

Facility Information

Facility Name: RENAISSANCE (THE) (0010426)
Address: 301 E FLORIDA AVE, APPLETON, WI 54911
License Status: REGULAR
Licensed/Certified/Registered 03/18/1997
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: OUTAGAMIE

Facility Information

Facility Name: ST PAUL VILLA (0010352)
Address: 312 E 14TH ST, KAUKAUNA, WI 54130
License Status: REGULAR
Licensed/Certified/Registered 02/02/2000
Regional Office: NORTHEASTERN REGION (DEPERE), (920) 983-3200

Survey History

Survey ID: 0100656 **End Date:** 11/13/2007 **Type:** ABBREVIATED **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0098660 **End Date:** 01/24/2007 **Type:** STANDARD **Purpose:** COMPLAINT
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: OUTAGAMIE

Complaint History (ST PAUL VILLA)

Date Complaint Received: 08/30/2006

Date Investigation Completed: 01/24/2007

Subject Area(s)

Result

SOD #

NUTRITION & FOOD SERVICES

NOT SUBSTANTIATED

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Provider Inspection Summary
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Residential Care Apartment Complex (REGISTERED)
COUNTY: OUTAGAMIE

Facility Information

Facility Name: GOOD SHEPHERD MEADOW WOOD RCAC (0010364)

Address: 605 BRONSON RD, SEYMOUR, WI 54165

License Status: REGULAR

Licensed/Certified/Registered 02/10/1999

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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