

Provider Inspection Summary
For the period 07/01/2006 to 06/30/2009

COUNTY: TAYLOR

Notes

This report includes Provider Inspection Summaries (Facility Profiles) for Assisted Living Facilities in Taylor County.

The report is a PDF (Adobe Acrobat) document and includes a total of 10 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

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

COUNTY: TAYLOR

Facility Information

Facility Name: DEERVIEW MEADOWS MEDFORD (0011540)

Address: 509 LEMKE AVENUE, MEDFORD, WI 54451

License Status: REGULAR

Licensed/Certified/Registered 01/01/2007

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

Survey History

Survey ID: 0100884 **End Date:** 11/29/2007 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #N7V611 Served 01/09/2008

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.41(10)(a)	BUILDING MAINTENANCE	04/01/2009	

Survey ID: 0098527 **End Date:** 12/07/2006 **Type:** STANDARD **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009650 Served 01/27/2007

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.33(3)(e)2.b	INJECTIONS	11/28/2007	Yes

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Provider Inspection Summary

For the period 07/01/2006 to 06/30/2009

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

COUNTY: TAYLOR

Enforcement History (DEERVIEW MEADOWS MEDFORD)

Date: 01/16/2007 **SOD #**10009650 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
FORFEITURE---83.33(3)(e)2.b

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Provider Inspection Summary

For the period 07/01/2006 to 06/30/2009

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

COUNTY: TAYLOR

Complaint History (DEERVIEW MEADOWS MEDFORD)

Date Complaint Received: 10/24/2007

Date Investigation Completed: 11/28/2007

Subject Area(s)

RESIDENT RIGHTS
HOMELIKE ENVIRONMENT & CLEANLINESS
PROGRAM SERVICES

Result

NOT SUBSTANTIATED
SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

N7V611

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Provider Inspection Summary

For the period 07/01/2006 to 06/30/2009

Community Based Residential Facility--CLASS AS (SEMIAMBULATORY)

COUNTY: TAYLOR

Facility Information

Facility Name: MEMORIAL NURSING & REHAB CENTER CBRF (610071)

Address: 135 SOUTH GIBSON STREET, MEDFORD, WI 54451

License Status: REGULAR

Licensed/Certified/Registered 05/31/1981

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

Survey History

Survey ID: 0101437 **End Date:** 03/19/2008 **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

Community Based Residential Facility--CLASS AS (SEMIAMBULATORY)

COUNTY: TAYLOR

Enforcement History (MEMORIAL NURSING & REHAB CENTER CBRF)

Date: 07/18/2006 SOD #10009568 Appealed: No

Sanctions

FORFEITURE---83.33(3)(b)2.a

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Provider Inspection Summary

For the period 07/01/2006 to 06/30/2009

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

COUNTY: TAYLOR

Facility Information

Facility Name: OUR HOUSE ASSISTED CARE MEDFORD (0009294)

Address: 1014 WEST BROADWAY, MEDFORD, WI 54451

License Status: REGULAR

Licensed/Certified/Registered 12/29/2001

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

Survey History

Survey ID: 0104010 **End Date:** 05/14/2009 **Type:** STANDARD **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0099401 **End Date:** 05/07/2007 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #71Q411 Served 05/29/2007

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.21(4)(i)1	CONFIDENTIALITY	04/01/2009	

Survey ID: 0099061 **End Date:** 03/15/2007 **Type:** OTHER **Purpose:** COMPLAINT/SELF REPORT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009691 Served 04/09/2007

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.06(1)(a)3	NEEDS NOT COMPATIBLE WITH CLIENT GROUP	04/01/2009	
83.41(5)(d)2	HOT WATER TEMPERATURES	04/01/2009	

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Provider Inspection Summary

For the period 07/01/2006 to 06/30/2009

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

COUNTY: TAYLOR

Enforcement History (OUR HOUSE ASSISTED CARE MEDFORD)

Date: 04/04/2007 **SOD #**10009691 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
FORFEITURE---83.06(1)(a)3

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Provider Inspection Summary

For the period 07/01/2006 to 06/30/2009

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

COUNTY: TAYLOR

Complaint History (OUR HOUSE ASSISTED CARE MEDFORD)

Date Complaint Received: 03/22/2007

Date Investigation Completed: 05/07/2007

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

NOT SUBSTANTIATED

ABUSE

NOT SUBSTANTIATED

RESIDENT BEHAVIOR/FACILITY PRACTICE

NOT SUBSTANTIATED

NUTRITION & FOOD SERVICES

NOT SUBSTANTIATED

PROGRAM SERVICES

NOT SUBSTANTIATED

Date Complaint Received: 02/14/2007

Date Investigation Completed: 03/15/2007

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

NOT SUBSTANTIATED

HOMELIKE ENVIRONMENT & CLEANLINESS

NOT SUBSTANTIATED

NUTRITION & FOOD SERVICES

NOT SUBSTANTIATED

MEDICATIONS

NOT SUBSTANTIATED

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

Facility Information

Facility Name: COUNTRY GARDENS (0010385)
Address: 635 CEDAR STREET, MEDFORD, WI 54451
License Status: REGULAR
Licensed/Certified/Registered 06/01/2000
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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