

Provider Inspection Summary

For the period 5/15/2020 to 5/15/2023

Walworth

Notes

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

The report is a PDF (Adobe Acrobat) document and includes a total of 13.00 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 5/15/2020 to 5/15/2023
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: RIDGESTONE COURT RCAC LLC (0010357)
Address: 1025 S SECOND ST, DELAVAN, WI 53115
License Status: REGULAR
Licensed/Certified/Registered 7/11/2003 12:00:00AM
Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0136913 **End Date:** 7/27/2021 **Type:** ABBREVIATED **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

For the period 5/15/2020 to 5/15/2023
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: BROLEN PARK (0011318)
Address: 2191 CHURCH ST, EAST TROY, WI 53120
License Status: REGULAR
Licensed/Certified/Registered 7/27/2006 12:00:00AM
Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0142363 **End Date:** 2/28/2023 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0139902 **End Date:** 6/8/2022 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0138852 **End Date:** 1/26/2022 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #640911 Served 3/2/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.23(4)(a)2	SERVICES	6/8/22	Yes
89.28(1)	RISK AGREEMENT	6/8/22	Yes

Enforcement History (BROLEN PARK--0011318)

Date: 3/2/2022 **SOD #**640911 **Appealed:** No

Sanctions

ORDER TO COMPLY

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Provider Inspection Summary

For the period 5/15/2020 to 5/15/2023
Residential Care Apartment Complex (CERTIFIED)

Complaint History (BROLEN PARK--0011318)

Date Complaint Received: 1/27/2023

Date Investigation Completed: 2/28/2023

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

NOT SUBSTANTIATED

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Provider Inspection Summary

For the period 5/15/2020 to 5/15/2023
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: RIDGESTONE TERRACE LLC (0011665)
Address: 291 W EVERGREEN PKWY, ELKHORN, WI 53121
License Status: REGULAR
Licensed/Certified/Registered 6/1/2007 12:00:00AM
Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0138333 **End Date:** 1/10/2022 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0135321 **End Date:** 12/10/2020 **Type:** ABBREVIATED **Purpose:** SURVEY/COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Complaint History (RIDGESTONE TERRACE LLC--0011665)

Date Complaint Received: 8/12/2021 **Date Investigation Completed:** 1/10/2022

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
PROGRAM SERVICES	NOT SUBSTANTIATED	

Date Complaint Received: 11/30/2020 **Date Investigation Completed:** 12/10/2020

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
PROGRAM SERVICES	NOT SUBSTANTIATED	

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Provider Inspection Summary

For the period 5/15/2020 to 5/15/2023
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: ARBOR VILLAGE OF GENEVA CROSSING (0010290)

Address: 201 TOWNLINE RD, LAKE GENEVA, WI 53147

License Status: REGULAR

Licensed/Certified/Registered 7/1/2003 12:00:00AM

Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0140435 **End Date:** 4/26/2022 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

For the period 5/15/2020 to 5/15/2023
Residential Care Apartment Complex (REGISTERED)

Facility Information

Facility Name: GOLDEN YEARS RETIREMENT VILLAGE (0013414)

Address: 270 RIDGE RD, WALWORTH, WI 53184

License Status: REGULAR

Licensed/Certified/Registered 10/18/2010 12:00:00AM

Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

No survey activity during the period 5/15/20 to 5/15/23

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Provider Inspection Summary

For the period 5/15/2020 to 5/15/2023
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: INSPIRATION MINISTRIES RCAC (0010323)
Address: N2270 HWY 67, WALWORTH, WI 53184
License Status: REGULAR
Licensed/Certified/Registered 2/1/2003 12:00:00AM
Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0140651 **End Date:** 8/24/2022 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0139703 **End Date:** 2/8/2022 **Type:** STANDARD **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #HP0M11 Served 6/1/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.26(3)(a)	PARTICIPATION IN THE ASSESSMENT	8/24/22	Yes
89.26(4)	ANNUAL REVIEW	8/24/22	Yes
89.27(1)	SERVICE AGREEMENT	8/24/22	Yes
89.27(3)(d)	SERVICE AGREEMENT	8/24/22	Yes
89.28(1)	RISK AGREEMENT	8/24/22	Yes

Survey ID: 0134617 **End Date:** 8/26/2020 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

For the period 5/15/2020 to 5/15/2023
Residential Care Apartment Complex (CERTIFIED)

Enforcement History (INSPIRATION MINISTRIES RCAC--0010323)

Date: 6/1/2022 **SOD #**HP0M11 **Appealed:**

Sanctions

ORDER TO COMPLY
FORFEITURE---89.26(4)
FORFEITURE---89.28(1)

Date: 6/15/2020 **SOD #**Y7EW11 **Appealed:** Yes **Decision:** STIPULATION

Sanctions

FORFEITURE---89.28(6)

Complaint History (INSPIRATION MINISTRIES RCAC--0010323)

Date Complaint Received: 8/3/2020

Date Investigation Completed: 8/26/2020

Subject Area(s)

PHYSICAL ENVIRONMENT/SAFETY
PROGRAM SERVICES
RESIDENT RIGHTS

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

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Provider Inspection Summary

For the period 5/15/2020 to 5/15/2023
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: MULBERRY GLEN (0017287)
Address: 1255 W MAIN ST, WHITEWATER, WI 53190
License Status: REGULAR
Licensed/Certified/Registered 11/1/2018 12:00:00AM
Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0141432 **End Date:** 10/20/2022 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #1DJW11 Served 11/28/2022

Deficiencies Cited
89.34(17)

Subject Area
TENANT RIGHTS

Compliance
Verified

Corrected

Survey ID: 0140589 **End Date:** 8/25/2022 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0138706 **End Date:** 1/27/2022 **Type:** OTHER **Purpose:** SURVEY/VV

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

For the period 5/15/2020 to 5/15/2023

Residential Care Apartment Complex (CERTIFIED)

Survey ID: 0137679 **End Date:** 8/9/2021 **Type:** OTHER **Purpose:** COMPLAINT/VV

Results: ENFORCEMENT ACTION

Statement of Deficiency: #XF4P13 Served 11/12/2021

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.23(3)(f)	SERVICES	1/27/22	Yes
89.28(1)	RISK AGREEMENT	1/27/22	Yes

Enforcement History (MULBERRY GLEN--0017287)

Date: 11/28/2022 **SOD #**1DJW11 **Appealed:** No

Sanctions

ORDER TO COMPLY

Date: 11/8/2021 **SOD #**XF4P13 **Appealed:**

Sanctions

ORDER TO COMPLY
FORFEITURE---83.28(1)

Date: 5/19/2020 **SOD #**XF4P12 **Appealed:**

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
OTHER SANCTION
FORFEITURE---89.28(1)

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Provider Inspection Summary

For the period 5/15/2020 to 5/15/2023
Residential Care Apartment Complex (CERTIFIED)

Complaint History (MULBERRY GLEN--0017287)

Date Complaint Received: 10/13/2022

Date Investigation Completed: 10/20/2022

Subject Area(s)

Result

SOD #

PHYSICAL ENVIRONMENT/SAFETY

SUBSTANTIATED

1DJW11

Date Complaint Received: 6/16/2021

Date Investigation Completed: 8/24/2021

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

SUBSTANTIATED

XF4P13

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Provider Inspection Summary

For the period 5/15/2020 to 5/15/2023
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: SHERWOOD LODGE ASSISTED LIVING (0017957)

Address: 116 CHERRY ST, WILLIAMS BAY, WI 53191

License Status: REGULAR

Licensed/Certified/Registered 12/1/2019 12:00:00AM

Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0139904 **End Date:** 6/8/2022 **Type:** STANDARD **Purpose:** SURVEY/VV

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0134085 **End Date:** 6/3/2020 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #PEH011 Served 7/10/2020

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.34(1)	TENANT RIGHTS	12/16/20	Withdrawn
89.55(1)	MONITORING	6/8/22	Yes

Enforcement History (SHERWOOD LODGE ASSISTED LIVING--0017957)

Date: 7/2/2020 **SOD #**PEH011 **Appealed:** Yes **Decision:** STIPULATION

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

OTHER SANCTION

FORFEITURE---89.34(1)

FORFEITURE---89.55(1)

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