

**Provider Inspection Summary**  
For the period 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex  
COUNTY: MARATHON

**Notes**

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

**The report is a PDF (Adobe Acrobat) document and includes a total of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (CERTIFIED)  
COUNTY: MARATHON

**Facility Information**

**Facility Name:** ACORN HILL SENIOR LIVING COMMUNITY (0012330)

**Address:** 430 ORBITING DRIVE, MOSINEE, WI 54455

**License Status:** REGULAR

**Licensed/Certified/Registered** 09/30/2008

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

**Survey History**

**Survey ID:** 0107630    **End Date:** 12/09/2010    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

-----  
**Survey ID:** 0102588    **End Date:** 09/18/2008    **Type:** INITIAL    **Purpose:** SURVEY

**Results:** LICENSE/CERT/REGISTRATION ISSUED

***This is Page 2 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (REGISTERED)  
COUNTY: MARATHON

**Facility Information**

**Facility Name:** APPLGATE TERRACE (0012108)  
**Address:** 3001 WESTHILL DRIVE, WAUSAU, WI 54401  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 12/01/2007  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

No survey activity during the period 04/01/2008 through 03/31/2011.

**This is Page 3 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (CERTIFIED)  
COUNTY: MARATHON

**Facility Information**

**Facility Name:** GARDENS APARTMENTS (THE) (0010381)  
**Address:** 801 PARCHER STREET, WAUSAU, WI 54403  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 06/01/1998  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0108145    **End Date:** 03/02/2011    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103521    **End Date:** 01/16/2009    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #EECV12    Served 03/06/2009

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.34(16)	TENANT RIGHTS	03/11/2009	Yes

**Survey ID:** 0101779    **End Date:** 04/18/2008    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #EECV11    Served 05/27/2008

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.34(16)	TENANT RIGHTS	01/16/2009	No

***This is Page 4 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (CERTIFIED)  
COUNTY: MARATHON

**Enforcement History (GARDENS APARTMENTS (THE))**

**Date: 03/04/2009**      **SOD #EECV12**      **Enforcement Appealed: No**  
Sanctions  
FORFEITURE---89.34(16)

**Date: 05/23/2008**      **SOD #EECV11**      **Enforcement Appealed: No**  
Sanctions  
FORFEITURE---89.34(16)

**This is Page 5 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (CERTIFIED)  
COUNTY: MARATHON

**Complaint History (GARDENS APARTMENTS (THE))**

**Date Complaint Received: 10/16/2008**

**Date Investigation Completed: 01/16/2009**

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
RESIDENT RIGHTS	SUBSTANTIATED	EECV12
PHYSICAL PLANTS & SAFETY HAZARDS	NOT SUBSTANTIATED	
MEDICATIONS	SUBSTANTIATED	EECV12
ADMINISTRATION	NOT SUBSTANTIATED	

***This is Page 6 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (CERTIFIED)  
COUNTY: MARATHON

**Facility Information**

**Facility Name:** HARMONY TERRACE COMMONS RCAC (0010849)

**Address:** 3312 TERRACE COURT, WAUSAU, WI 54401

**License Status:** REGULAR

**Licensed/Certified/Registered** 03/09/2005

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

**Survey History**

**Survey ID:** 0106544    **End Date:** 06/22/2010    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0106262    **End Date:** 03/24/2010    **Type:** ABBREVIATED    **Purpose:** SURVEY/SELF REPORT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0101649    **End Date:** 04/18/2008    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**This is Page 7 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (CERTIFIED)  
COUNTY: MARATHON

**Complaint History (HARMONY TERRACE COMMONS RCAC)**

**Date Complaint Received: 05/13/2010**

**Date Investigation Completed: 06/09/2010**

Subject Area(s)  
RESIDENT RIGHTS

Result  
NOT SUBSTANTIATED

SOD #

***This is Page 8 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (CERTIFIED)  
COUNTY: MARATHON

**Facility Information**

**Facility Name:** RIVERVIEW TERRACE (0010394)  
**Address:** 540 EAST THOMAS STREET, WAUSAU, WI 54403  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 09/01/2003  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0107067    **End Date:** 08/24/2010    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103968    **End Date:** 05/07/2009    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #OI5712    Served 05/12/2009

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.28(2)(a)1	RISK AGREEMENT	08/19/2010	Yes
89.28(6)	RISK AGREEMENT	08/19/2010	Yes

***This is Page 9 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (CERTIFIED)  
COUNTY: MARATHON

**Enforcement History (RIVERVIEW TERRACE)**

**Date: 05/11/2009**      **SOD #OI5712**

**Enforcement Appealed: No**

Sanctions

COMPLY WITH REQUIREMENT  
FORFEITURE---89.28(2)(a)1

--Facility Compliant 08/19/2010 12:00:00AM

***This is Page 10 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (CERTIFIED)  
COUNTY: MARATHON

**Complaint History (RIVERVIEW TERRACE)**

**Date Complaint Received: 07/16/2010**

**Date Investigation Completed: 08/19/2010**

Subject Area(s)  
PROGRAM SERVICES

Result  
NOT SUBSTANTIATED

SOD #

***This is Page 11 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (REGISTERED)  
COUNTY: MARATHON

**Facility Information**

**Facility Name:** TERRACE COURT ASSISTED LIVING (0010384)  
**Address:** 3402 TERRACE CT, WAUSAU, WI 54401  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 03/14/1997  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

No survey activity during the period 04/01/2008 through 03/31/2011.

***This is Page 12 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (CERTIFIED)  
COUNTY: MARATHON

**Facility Information**

**Facility Name:** THARENS PLACE (0011887)  
**Address:** 1813 MILWAUKEE AVENUE, WAUSAU, WI 54403  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 05/16/2007  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0107149    **End Date:** 09/17/2010    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103969    **End Date:** 05/07/2009    **Type:** STANDARD    **Purpose:** SURVEY/SELF REPORT

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #78FY11    Served 05/13/2009

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(2)(c)	CHANGE IN TYPE OF INDIVIDUAL SERVED	09/15/2010	Yes
88.06(3)(f)	REVIEW OF ISP	09/15/2010	Yes
88.10(3)(q)	MEDICATIONS	09/15/2010	Yes

***This is Page 13 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (REGISTERED)  
COUNTY: MARATHON

**Facility Information**

**Facility Name:** WAUSAU RETIREMENT LLC (0012757)  
**Address:** 2100 TOWNLINE ROAD, WAUSAU, WI 54403  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 06/16/2009  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0104170    **End Date:** 05/07/2009    **Type:** INITIAL    **Purpose:** SURVEY  
**Results:** LICENSE/CERT/REGISTRATION ISSUED

***This is Page 14 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (REGISTERED)  
COUNTY: MARATHON

**Complaint History (WAUSAU RETIREMENT LLC)**

**Date Complaint Received: 03/18/2011**

**Date Investigation Completed: 04/14/2011**

Subject Area(s)  
PROGRAM SERVICES

Result  
NOT SUBSTANTIATED

SOD #

***This is Page 15 of 16 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 04/01/2008 to 03/31/2011  
Residential Care Apartment Complex (CERTIFIED)  
COUNTY: MARATHON

**Facility Information**

**Facility Name:** RENAISSANCE WESTON (0013025)  
**Address:** 4602 BARBIAN AVENUE, WESTON, WI 54476  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 11/03/2009  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0105085    **End Date:** 10/29/2009    **Type:** INITIAL    **Purpose:** SURVEY  
**Results:** LICENSE/CERT/REGISTRATION ISSUED

***This is Page 16 of 16 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.***