

**Provider Inspection Summary**  
For the period 04/01/2008 to 03/31/2011  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Notes**

**This report includes Provider Inspection Summaries (Facility Profiles) for Adult Day Care Facilities in Milwaukee County.**

**The report is a PDF (Adobe Acrobat) document and includes a total of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** CLEMENT MANOR ADULT DAY SERVICES (0008702)  
**Address:** 3939 S 92ND ST, GREENFIELD, WI 53228  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 07/21/1999  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0107757    **End Date:** 11/18/2010    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

-----  
**Survey ID:** 0103317    **End Date:** 01/15/2009    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

-----  
**Survey ID:** 0101621    **End Date:** 04/10/2008    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

***This is Page 2 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Complaint History (CLEMENT MANOR ADULT DAY SERVICES)**

**Date Complaint Received: 12/22/2008**

**Date Investigation Completed: 01/15/2009**

Subject Area(s)  
SUPERVISION

Result  
NOT SUBSTANTIATED

SOD #

***This is Page 3 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** OPTIONS FOR COMMUNITY GROWTH INC (0012242)  
**Address:** 11823 W JANESVILLE RD, HALES CORNERS, WI 53130  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 01/07/2008  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0105641    **End Date:** 01/14/2010    **Type:** STANDARD    **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**This is Page 4 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** ALEXIAN ADULT DAY CENTER (300026)  
**Address:** 9255 N 76TH ST, MILWAUKEE, WI 53223  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 12/04/1995  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0102140    **End Date:** 07/01/2008    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #SJBO11    Served 07/23/2008

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
III.c.(4)	FIRE ALARM & SMOKE DETECTORS		

***This is Page 5 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** ALEXIAN VILLAGE ADULT DAY CARE GRANDVIEW ROOM (0011164)

**Address:** 9225 N 76TH ST, MILWAUKEE, WI 53223

**License Status:** REGULAR

**Licensed/Certified/Registered** 01/26/2006

**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

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

***This is Page 6 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** AURORA ADULT DAY CENTER (0008703)  
**Address:** 336 W WALNUT ST, MILWAUKEE, WI 53212  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 06/21/1999  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0104225    **End Date:** 06/15/2009    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103275    **End Date:** 01/05/2009    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #PTTG12    Served 01/27/2009

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
III.a.(8)	SANITATION-MECHANICAL WASHING COMMERICA	06/15/2009	Yes

***This is Page 7 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Complaint History (AURORA ADULT DAY CENTER)**

**Date Complaint Received: 04/30/2009**

**Date Investigation Completed: 06/09/2009**

Subject Area(s)

RESIDENT RIGHTS  
NUTRITION & FOOD SERVICES

Result

NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

***This is Page 8 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** CATHOLIC CHARITIES ADULT DAY SERVICES (300012)  
**Address:** 1919 N 60TH ST, MILWAUKEE, WI 53208  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 11/23/1991  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0101606      **End Date:** 04/15/2008      **Type:** ABBREVIATED      **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**This is Page 9 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** COREAN CARE CENTER (0013140)  
**Address:** 4251 N 22ND ST, MILWAUKEE, WI 53209  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 02/10/2011  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0108002    **End Date:** 02/10/2011    **Type:** INITIAL    **Purpose:** SURVEY  
**Results:** LICENSE/CERT/REGISTRATION ISSUED

***This is Page 10 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** DEPENDABLE ADULT DAY CARE (0010034)  
**Address:** 301 E RESERVOIR AVE, MILWAUKEE, WI 53212  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 11/04/2003  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0101679    **End Date:** 04/28/2008    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #292L12    Served 05/15/2008

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
III.c.(2)	FIRE EXTINGUISHER		

***This is Page 11 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** DISABILITIES UNLIMITED DAY PROGRAM SERVICES (0012209)

**Address:** 3808 W ELM ST, MILWAUKEE, WI 53209

**License Status:** REGULAR

**Licensed/Certified/Registered** 02/04/2008

**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0106494      **End Date:** 06/02/2010      **Type:** OTHER      **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

***This is Page 12 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

Survey ID: 0105319 End Date: 10/20/2009 Type: STANDARD Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #DO8611 Served 12/11/2009

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
I.b.(3)	SIGNED BY PARTICIPANT	06/02/2010	Yes
I.c.(2)(a)	PLAN-COMPREHENSIVE WRITTEN ASSESSMENT	06/02/2010	Yes
I.c.(3)	PLAN-REVIEWED & UPDATED EVERY 6 MONTHS	06/02/2010	Yes
I.c.(4)	PLAN-QUARTERLY DOCUMENTING	06/02/2010	Yes
I.d.(1)	PROGRAM SERVICES	06/02/2010	Yes
I.e.(1)	MEAL REQUIREMENTS	06/02/2010	Yes
I.e.(2)	MEAL DOCUMENTATION	06/02/2010	Yes
I.f.(3)(a)	MEDICATION-WRITTEN ORDER	06/02/2010	Yes
I.f.(3)(c)	MEDICATION-LOCKED SAFE PLACE	06/02/2010	Yes
I.f.(3)(f)	MEDICATION-DOCUMENTED IN INK	06/02/2010	Yes
II.d.(4)	TRAINING-CONTINUING EDUCATION	06/02/2010	Yes
III.a.(10)(b)	SANITATION-REFRIGERATED	06/02/2010	Yes
III.a.(10)(d)	SANITATION-THERMOMETER	06/02/2010	Yes
III.a.(11)	SANITATION-PREMISES CLEAN	06/02/2010	Yes
V.(1)	PROGRAM EVALUATION	06/02/2010	Yes
V.(2)	EVALUATION PROCESS	06/02/2010	Yes

**This is Page 13 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** GENERATIONS ADULT DAY CENTER (300047)  
**Address:** 2330 N PROSPECT AVE, MILWAUKEE, WI 53211  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 12/15/1997  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0107513      **End Date:** 10/04/2010      **Type:** STANDARD      **Purpose:** SURVEY/COMPLAINT  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

***This is Page 14 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Complaint History (GENERATIONS ADULT DAY CENTER)**

**Date Complaint Received: 08/02/2010**

**Date Investigation Completed: 10/04/2010**

Subject Area(s)

Result

SOD #

HOMELIKE ENVIRONMENT & CLEANLINESS

NOT SUBSTANTIATED

***This is Page 15 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** HOUSE OF DESTINY ADULT DAY CARE CENTER (0010893)

**Address:** 4701 N 76TH ST SUITE 101 & 200, MILWAUKEE, WI 53218

**License Status:** REGULAR

**Licensed/Certified/Registered** 11/22/2005

**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0102564    **End Date:** 08/18/2008    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #RDZ111    Served 09/29/2008

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
I.a.(1)	PROGRAM ADMINISTRATION-DESCRIPTION		
I.a.(2)	ORGANIZATIONAL CHART		
I.a.(5)	PROGRAM RIGHTS		
I.d.(1)	PROGRAM SERVICES		
II.d.(1)	STAFF TRAINING		
III.a.(11)	SANITATION-PREMISES CLEAN		
III.b.(5)	SAFETY-EMERGENCIES PLAN		
III.c.(4)	FIRE ALARM & SMOKE DETECTORS		
III.d.(4)	BUILDING-50 SQUARE FT/PARTICIPANT		
VI.(1)	LAWS AND CODES		

***This is Page 16 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** JEWISH HOME & CARE CENTER ADULT DAY CENTER (0009129)

**Address:** 1414 N PROSPECT AVE, MILWAUKEE, WI 53202

**License Status:** REGULAR

**Licensed/Certified/Registered** 09/08/2000

**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0102301      **End Date:** 07/28/2008      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

***This is Page 17 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** JODYS PLACE (0012631)

**Address:** 3862 N SHERMAN BLVD, MILWAUKEE, WI 53216

**License Status:** REGULAR

**Licensed/Certified/Registered** 03/24/2009

**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0103666      **End Date:** 03/24/2009      **Type:** INITIAL      **Purpose:** SURVEY

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

***This is Page 18 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** KAJSIAB SENIOR CENTER (0012376)  
**Address:** 3824 W VLIET ST, MILWAUKEE, WI 53208  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 04/29/2008  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0106776      **End Date:** 06/28/2010      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0101626      **End Date:** 04/29/2008      **Type:** INITIAL      **Purpose:** SURVEY

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

***This is Page 19 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name: KCAL SKILL & RECREATIONAL DEV CENTER I (0011163)**

**Address: 4726 N 37TH ST, MILWAUKEE, WI 53209**

**License Status: REGULAR**

**Licensed/Certified/Registered 11/18/2005**

**Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005**

**Survey History**

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

***This is Page 20 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name: KCAL SKILL & RECREATIONAL DEVELOP CENTER II (0013229)**

**Address: 4353 W FOND DU LACE AVE, MILWAUKEE, WI 53216**

**License Status: REGULAR**

**Licensed/Certified/Registered 03/23/2010**

**Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005**

**Survey History**

**Survey ID: 0106036    End Date: 03/23/2010    Type: INITIAL    Purpose: SURVEY**

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

***This is Page 21 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** MCFI OLDER ADULT DAY CENTER (0010711)  
**Address:** 2020 W WELLS ST, MILWAUKEE, WI 53233  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 09/24/2004  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0102316      **End Date:** 06/25/2008      **Type:** OTHER      **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0102320      **End Date:** 05/22/2008      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

***This is Page 22 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Complaint History (MCFI OLDER ADULT DAY CENTER)**

**Date Complaint Received: 06/12/2008**

**Date Investigation Completed: 06/25/2008**

Subject Area(s)

Result

SOD #

ABUSE

NOT SUBSTANTIATED

***This is Page 23 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** RIGHT WAY CENTER FOR INDEPENDENCE (THE) (0011958)

**Address:** 2943 N MARTIN LUTHER KING DR, MILWAUKEE, WI 532122301

**License Status:** REGULAR

**Licensed/Certified/Registered** 05/19/2008

**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0101888      **End Date:** 05/19/2008      **Type:** INITIAL      **Purpose:** SURVEY

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

***This is Page 24 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** ST ANN CTR FOR INTERGENERATIONAL CARE (0008513)

**Address:** 2801 E MORGAN AVE, MILWAUKEE, WI 53207

**License Status:** REGULAR

**Licensed/Certified/Registered** 01/14/1999

**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0107559    **End Date:** 10/04/2010    **Type:** STANDARD    **Purpose:** SURVEY/COMPLAINT

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #KSXI11    Served 12/08/2010

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
III.b.(5)	SAFETY-EMERGENCIES PLAN		

**Survey ID:** 0102756    **End Date:** 10/07/2008    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

***This is Page 25 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Complaint History (ST ANN CTR FOR INTERGENERATIONAL CARE)**

**Date Complaint Received: 09/03/2010**

**Date Investigation Completed: 10/04/2010**

Subject Area(s)

NUTRITION & FOOD SERVICES  
ADMINISTRATION  
PROGRAM SERVICES

Result

SUBSTANTIATED  
SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

KSXI11  
KSXI11

**Date Complaint Received: 09/30/2008**

**Date Investigation Completed: 10/07/2008**

Subject Area(s)

ABUSE

Result

NOT SUBSTANTIATED

SOD #

***This is Page 26 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** ST ANN CTR SHEPHERD HOUSE (300011)  
**Address:** 3221 S LAKE DR, MILWAUKEE, WI 53235  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 05/01/1992  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0105211    **End Date:** 11/04/2009    **Type:** ABBREVIATED    **Purpose:** SURVEY/COMPLAINT  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

***This is Page 27 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Complaint History (ST ANN CTR SHEPHERD HOUSE)**

**Date Complaint Received: 07/30/2009**

**Date Investigation Completed: 11/04/2009**

Subject Area(s)  
ABUSE  
PROGRAM SERVICES

Result  
NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 04/10/2009**

**Date Investigation Completed: 11/04/2009**

Subject Area(s)  
ADMINISTRATION

Result  
NOT SUBSTANTIATED

SOD #

***This is Page 28 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** ST GABRIELS CHURCH OF GOD IN CHRIST (0009618)  
**Address:** 5363 N 37TH ST, MILWAUKEE, WI 53209  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 05/06/2002  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

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

***This is Page 29 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name: UNITED COMMUNITY CENTER ADULT DAY CENTER (300022)**

**Address: 1028 S 9TH ST, MILWAUKEE, WI 53204**

**License Status: REGULAR**

**Licensed/Certified/Registered 02/29/1996**

**Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005**

**Survey History**

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

***This is Page 30 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** WE CARE WISCONSIN ADULT DAY CARE (0012827)  
**Address:** 4236 N TEUTONIA AVE, MILWAUKEE, WI 53209  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 05/21/2010  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0106378      **End Date:** 05/21/2010      **Type:** INITIAL      **Purpose:** SURVEY  
**Results:** LICENSE/CERT/REGISTRATION ISSUED

***This is Page 31 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name: EASTER SEALS SOUTHEAST WI ADULT DAY SERV PROG (0011453)**

**Address: 1016 MILWAUKEE AVE, SOUTH MILWAUKEE, WI 53172**

**License Status: REGULAR**

**Licensed/Certified/Registered 04/07/2006**

**Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005**

**Survey History**

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

***This is Page 32 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** ADULT DAY SERVICES OF WISCONSIN (0012883)  
**Address:** 6507 W FAIRVIEW AVE, WAUWATOSA, WI 53213  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 07/01/2010  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0106581      **End Date:** 07/01/2010      **Type:** INITIAL      **Purpose:** SURVEY  
**Results:** LICENSE/CERT/REGISTRATION ISSUED

***This is Page 33 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** EASTER SEALS SOUTHEAST WI ADULT DAY SERV PROG (0011998)

**Address:** 7111 W CENTER ST, WAUWATOSA, WI 53213

**License Status:** REGULAR

**Licensed/Certified/Registered** 07/19/2007

**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0108319    **End Date:** 03/10/2011    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0107910    **End Date:** 01/04/2011    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #J3JR11    Served 02/09/2011

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	
		<u>Verified</u>	<u>Corrected</u>
I.a.(5)(e)	PRIVACY AND CONFIDENTIALITY	03/10/2011	Yes
I.d.(1)	PROGRAM SERVICES	03/10/2011	Yes
II.c.(3)	STAFFING-1 PER 4 SEVERLY IMPAIRED	03/10/2011	Yes
IV.a.(2)	JOINT ACTIVITIES	03/10/2011	Yes

**Survey ID:** 0105506    **End Date:** 12/21/2009    **Type:** STANDARD    **Purpose:** SURVEY/SELF REPORT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

***This is Page 34 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Complaint History (EASTER SEALS SOUTHEAST WI ADULT DAY SERV PROG)**

**Date Complaint Received: 10/15/2010**

**Date Investigation Completed: 01/04/2011**

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
ADMINISTRATION	NOT SUBSTANTIATED	
STAFF TRAINING AND PROFICIENCY	NOT SUBSTANTIATED	
PROGRAM SERVICES	SUBSTANTIATED	J3JR11

***This is Page 35 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** LUTHER MANOR ADULT DAY SERVICES (300019)  
**Address:** 4545 N 92ND ST, WAUWATOSA, WI 53225  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 04/01/1994  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0103922    **End Date:** 03/26/2009    **Type:** ABBREVIATED    **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

***This is Page 36 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** LUTHERAN HOME ADULT DAY SERVICES (THE) (300046)

**Address:** 7500 W NORTH AVE, WAUWATOSA, WI 53213

**License Status:** REGULAR

**Licensed/Certified/Registered** 12/03/1997

**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0101911      **End Date:** 05/13/2008      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

***This is Page 37 of 38 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  
Adult Day Care Facility  
COUNTY: MILWAUKEE

**Facility Information**

**Facility Name:** MITCHELL MANOR (0012220)  
**Address:** 2360 S 54TH ST, WEST ALLIS, WI 53219  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 01/18/2008  
**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0106281    **End Date:** 05/05/2010    **Type:** STANDARD    **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

***This is Page 38 of 38 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.***