

**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Notes**

**This report includes Provider Inspection Summaries (Facility Profiles) for Adult Family Homes in Chippewa County.**

**The report includes only facilities located within the City of Chippewa Falls. Reports for facilities located in other communities are listed separately on the DQA Facility Profile webpage.**

**The report is a PDF (Adobe Acrobat) document and includes a total of 26 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 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** AURORA RESIDENTIAL ALTERNATIVES INC #012 (0011485)

**Address:** 3942-139TH STREET, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 06/01/2006

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

**Survey History**

**Survey ID:** 0104756      **End Date:** 08/31/2009      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**This is Page 2 of 26 total pages. If printing this report ensure that your printer is set to print only the desired pages.**

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** EVERGREEN (0013199)

**Address:** 1126/1128 EVERGREEN LANE, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 08/27/2010

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

**Survey History**

**Survey ID:** 0107057    **End Date:** 08/27/2010    **Type:** INITIAL    **Purpose:** SURVEY

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

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** FOXBORO (0013223)

**Address:** 4053/4055-136TH ST, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 03/16/2010

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

**Survey History**

**Survey ID:** 0105927    **End Date:** 03/16/2010    **Type:** INITIAL    **Purpose:** SURVEY

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

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** INDEPENDENT OUTLOOK INC HOUSE #2 (0011692)

**Address:** 16389 - 61ST AVENUE, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 03/26/2007

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

**Survey History**

**Survey ID:** 0104766      **End Date:** 09/01/2009      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** INDEPENDENT OUTLOOK INC (0010574)  
**Address:** 5093-160TH STREET, CHIPPEWA FALLS, WI 54729  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 07/06/2004  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0104765    **End Date:** 09/01/2009    **Type:** ABBREVIATED    **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** JOHNSON AFH (0010575)  
**Address:** 13784 CTY HWY OO, CHIPPEWA FALLS, WI 54729  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 02/01/2005  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0105392    **End Date:** 12/16/2009    **Type:** ABBREVIATED    **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** KORNS ADULT FAMILY HOME (0009341)  
**Address:** 957 PINE CONE LANE, CHIPPEWA FALLS, WI 54729  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 05/07/2001  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0105079    **End Date:** 10/20/2009    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #5KKD11    Served 10/27/2009

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** LANDMARK HOME (0013166)  
**Address:** 12701 - 42ND AVE, CHIPPEWA FALLS, WI 54729  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 02/01/2010  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0105674    **End Date:** 02/01/2010    **Type:** INITIAL    **Purpose:** SURVEY  
**Results:** LICENSE/CERT/REGISTRATION ISSUED

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** NORTHWEST PATHWAYS TO INDEPENDENCE#2 (0013362)

**Address:** 7338 - 203RD ST, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 07/15/2010

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

**Survey History**

**Survey ID:** 0109590      **End Date:** 11/18/2011      **Type:** OTHER      **Purpose:** OTHER

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0106681      **End Date:** 07/15/2010      **Type:** INITIAL      **Purpose:** SURVEY

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

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** NPI - 10 (0013550)

**Address:** 5729 - 166TH STREET, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 12/15/2010

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

**Survey History**

**Survey ID:** 0109014    **End Date:** 07/27/2011    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0107818    **End Date:** 12/15/2010    **Type:** INITIAL    **Purpose:** SURVEY

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

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Complaint History (NPI - 10)**

**Date Complaint Received: 06/28/2011**

**Date Investigation Completed: 07/27/2011**

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
RESIDENT BEHAVIOR/FACILITY PRACTICE	NOT SUBSTANTIATED	
HOMELIKE ENVIRONMENT & CLEANLINESS	NOT SUBSTANTIATED	
MEDICATIONS	NOT SUBSTANTIATED	
STAFF TRAINING AND PROFICIENCY	NOT SUBSTANTIATED	
QUALITY OF LIFE	NOT SUBSTANTIATED	

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** NPI #4 PINE GROVE (0009709)  
**Address:** 15241 50TH AVE, CHIPPEWA FALLS, WI 54729  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 06/26/2002  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0105898    **End Date:** 03/10/2010    **Type:** ABBREVIATED    **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** PLEASURES OF HOME INC II (0011633)  
**Address:** 12282-120TH AVE, CHIPPEWA FALLS, WI 54729  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 09/08/2006  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

<b>Survey ID:</b> 0107444	<b>End Date:</b> 11/09/2010	<b>Type:</b> OTHER	<b>Purpose:</b> COMPLAINT
<b>Results:</b> NO STATEMENT OF DEFICIENCY ISSUED			
<b>Survey ID:</b> 0107284	<b>End Date:</b> 10/12/2010	<b>Type:</b> OTHER	<b>Purpose:</b> COMPLAINT
<b>Results:</b> NO STATEMENT OF DEFICIENCY ISSUED			
<b>Survey ID:</b> 0104663	<b>End Date:</b> 08/18/2009	<b>Type:</b> STANDARD	<b>Purpose:</b> SURVEY
<b>Results:</b> NO STATEMENT OF DEFICIENCY ISSUED			

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Complaint History (PLEASURES OF HOME INC II)**

**Date Complaint Received: 10/25/2010**

**Date Investigation Completed: 11/09/2010**

Subject Area(s)  
RESIDENT RIGHTS

Result  
NOT SUBSTANTIATED

SOD #

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

**Date Investigation Completed: 10/12/2010**

Subject Area(s)  
PHYSICAL PLANTS & SAFETY HAZARDS

Result  
NOT SUBSTANTIATED

SOD #

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** PLEASURES OF HOME INC (0010636)  
**Address:** 12286 120TH AVENUE, CHIPPEWA FALLS, WI 54729  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 07/16/2004  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0107283      **End Date:** 10/12/2010      **Type:** OTHER      **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0105089      **End Date:** 10/20/2009      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Complaint History (PLEASURES OF HOME INC)**

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

**Date Investigation Completed: 10/12/2010**

Subject Area(s)

Result

SOD #

PHYSICAL PLANTS & SAFETY HAZARDS

NOT SUBSTANTIATED

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** WESTRIDGE (590134)  
**Address:** 3841 96TH STREET, CHIPPEWA FALLS, WI 54729  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 03/13/1997  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0104895    **End Date:** 09/22/2009    **Type:** ABBREVIATED    **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** WHISPERING WOODS IN WISSOTA (0012027)  
**Address:** 20376-72ND AVE, CHIPPEWA FALLS, WI 54729  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 01/11/2008  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0106091    **End Date:** 03/23/2010    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0104668    **End Date:** 07/29/2009    **Type:** STANDARD    **Purpose:** SURVEY/COMPLAINT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #GXY611    Served 08/20/2009

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	
		<u>Verified</u>	<u>Corrected</u>
50.065(2)(b)intro	ENTITY BACKGROUND CHECK REQUIREMENTS	03/23/2010	Yes
88.03(2)(b)2	PROGRAM STATEMENT	03/23/2010	Yes
88.04(2)(a)	RESPONSIBILITIES	03/23/2010	Yes
88.04(2)(g)1	HEALTH SCREENING FOR STAFF	03/23/2010	Yes
88.04(5)(a)	TRAINING-15 HOURS WITHIN 6 MONTHS	03/23/2010	Yes
88.05(3)(d)	ANNUAL WELL WATER INSPECTIONS	03/23/2010	Yes
88.05(4)(d)2.a	FIRE SAFETY EVACUATION PLAN REVIEW	03/23/2010	Yes
88.05(4)(d)2.c	SEMI-ANNUAL FIRE DRILLS	03/23/2010	Yes
88.06(2)(a)	ADMISSION-HEALTH EXAM	03/23/2010	Yes
88.06(2)(b)	SERVICE AGREEMENT EXCEPT RESPITE	03/23/2010	Yes
88.07(2)(b)4	RECORD OF MEDICAL VISITS AND REPORTS	03/23/2010	Yes
88.07(2)(b)6	NOTIFICATION OF CHANGES	03/23/2010	Yes

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

88.10(3)(p)

PROMPT AND ADEQUATE TREATMENT

03/23/2010

Yes

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Enforcement History (WHISPERING WOODS IN WISSOTA)**

**Date: 08/19/2009      SOD #GXY611      Enforcement Appealed: No**

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION	--Facility Compliant 03/23/2010
NO NEW ADMISSIONS	--Facility Compliant 03/23/2010
PROVIDE TRAINING	--Facility Compliant 03/23/2010
OTHER SANCTION	--Facility Compliant 03/23/2010

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Complaint History (WHISPERING WOODS IN WISSOTA)**

**Date Complaint Received: 07/20/2009**

**Date Investigation Completed: 07/28/2009**

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE  
MEDICATIONS  
STAFF TRAINING AND PROFICIENCY

Result

NOT SUBSTANTIATED  
NOT SUBSTANTIATED  
SUBSTANTIATED

SOD #

GXY611

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** WILD ROSE (0013205)

**Address:** 4033/4035-136TH ST, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 02/23/2010

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

**Survey History**

**Survey ID:** 0105771      **End Date:** 02/23/2010      **Type:** INITIAL      **Purpose:** SURVEY

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

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** WOODWARD LANE (590112)  
**Address:** 3142 CO HWY P, CHIPPEWA FALLS, WI 54729  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 08/01/1996  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0105753    **End Date:** 02/19/2010    **Type:** ABBREVIATED    **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**  
For the period 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** YOUR HOME INC #2 (0013544)  
**Address:** 12058 125TH ST, CHIPPEWA FALLS, WI 54729  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 11/09/2010  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0107462    **End Date:** 11/09/2010    **Type:** INITIAL    **Purpose:** SURVEY  
**Results:** LICENSE/CERT/REGISTRATION ISSUED

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***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 01/01/2009 to 12/31/2011  
Adult Family Home  
COUNTY: CHIPPEWA

**Facility Information**

**Facility Name:** YOUR HOME INC (0013019)  
**Address:** 12022-125TH ST, CHIPPEWA FALLS, WI 54729  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 10/20/2009  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0105033    **End Date:** 10/20/2009    **Type:** INITIAL    **Purpose:** SURVEY  
**Results:** LICENSE/CERT/REGISTRATION ISSUED

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