

**Provider Inspection Summary**  
For the period 04/01/2008 to 03/31/2011

COUNTY: TREMPEALEAU

**Notes**

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

**The report is a PDF (Adobe Acrobat) document and includes a total of 19 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: TREMPPEALEAU

**Facility Information**

**Facility Name:** CHURCH STREET COMMUNITY CLUB (0013549)  
**Address:** 13197 CHURCH STREET, PIGEON FALLS, WI 54760  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 11/05/2010  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0107398    **End Date:** 11/05/2010    **Type:** INITIAL    **Purpose:** SURVEY  
**Results:** LICENSE/CERT/REGISTRATION ISSUED

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**This is Page 2 of 19 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 04/01/2008 to 03/31/2011  
Adult Family Home  
COUNTY: TREMPPEALEAU

**Facility Information**

**Facility Name:** HICKORY RIDGE ADULT FAMILY HOME (0011796)

**Address:** W17306 ARNESON RIDGE RD, BLAIR, WI 54616

**License Status:** REGULAR

**Licensed/Certified/Registered** 02/01/2007

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

**Survey History**

**Survey ID:** 0107672      **End Date:** 12/28/2010      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103168      **End Date:** 12/30/2008      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**  
For the period 04/01/2008 to 03/31/2011  
Adult Family Home  
COUNTY: TREMPPEALEAU

**Facility Information**

**Facility Name:** COUNTRY HOME (A) (0011561)  
**Address:** W14272 BECKER LANE, ETTRICK, WI 54627  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 10/18/2006  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0107937    **End Date:** 02/08/2011    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103169    **End Date:** 12/30/2008    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**  
For the period 04/01/2008 to 03/31/2011  
Adult Family Home  
COUNTY: TREMPPEALEAU

**Facility Information**

**Facility Name:** APPLE WAY ADULT FAMILY HOME (0011249)  
**Address:** 23094 WHITEHALL RD, INDEPENDENCE, WI 54747  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 01/15/2006  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0108171      **End Date:** 03/14/2011      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103562      **End Date:** 03/11/2009      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**  
For the period 04/01/2008 to 03/31/2011  
Adult Family Home  
COUNTY: TREMPPEALEAU

**Facility Information**

**Facility Name:** CLOVER WAY ADULT FAMILY HOME (0012375)  
**Address:** 36125 EAST END RD, INDEPENDENCE, WI 54747  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 05/16/2008  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0106108      **End Date:** 04/21/2010      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0101739      **End Date:** 05/16/2008      **Type:** INITIAL      **Purpose:** SURVEY

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

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**Provider Inspection Summary**  
For the period 04/01/2008 to 03/31/2011  
Adult Family Home  
COUNTY: TREMPPEALEAU

**Facility Information**

**Facility Name:** RIVER WAY NORTH ADULT FAMILY HOME (0011601)

**Address:** 39906 COMMERCIAL AVENUE, PIGEON FALLS, WI 54760

**License Status:** REGULAR

**Licensed/Certified/Registered** 09/14/2006

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

**Survey History**

**Survey ID:** 0107576      **End Date:** 12/01/2010      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0102476      **End Date:** 09/10/2008      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**  
For the period 04/01/2008 to 03/31/2011  
Adult Family Home  
COUNTY: TREMPEALEAU

**Facility Information**

**Facility Name:** RIVER WAY SOUTH (0011602)  
**Address:** 39910 COMMERCIAL AVENUE, PIGEON FALLS, WI 54760  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 09/14/2006  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0107601    **End Date:** 12/01/2010    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0102471    **End Date:** 09/10/2008    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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## Provider Inspection Summary

For the period 04/01/2008 to 03/31/2011

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

COUNTY: TREMPEALEAU

### Facility Information

**Facility Name:** AURORA RES ALTERNATIVES INC 094 (510355)

**Address:** 624 SOBOTTA ST, ARCADIA, WI 54612

**License Status:** REGULAR

**Licensed/Certified/Registered** 02/06/1997

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

### Survey History

**Survey ID:** 0108192      **End Date:** 03/14/2011      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103563      **End Date:** 03/11/2009      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**

For the period 04/01/2008 to 03/31/2011

Community Based Residential Facility--CLASS ANA (NONAMBULATORY)

COUNTY: TREMPPEALEAU

**Facility Information**

**Facility Name:** FAMILY CIRCLE (510123)

**Address:** 211 6TH AVE N PO BOX 187, STRUM, WI 54770

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/15/1989

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

**Survey History**

**Survey ID:** 0106652    **End Date:** 07/16/2010    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0106207    **End Date:** 04/21/2010    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #GW7611    Served 05/03/2010

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.37(2)(c)	MEDICATION ADMINISTRATION NOT SUPERVISED	06/02/2010	Yes
83.37(3)(c)	MEDICATION STORAGE: LOCKED CABINET	06/02/2010	Yes

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## Provider Inspection Summary

For the period 04/01/2008 to 03/31/2011

Community Based Residential Facility--CLASS ANA (NONAMBULATORY)

COUNTY: TREMPLEALEAU

**Survey ID: 0105935**    **End Date: 02/26/2010**    **Type: STANDARD**    **Purpose: SURVEY**

**Results: ENFORCEMENT ACTION**

**Statement of Deficiency: #E0GC11**    Served 03/09/2010

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(2)(b)intro	ENTITY BACKGROUND CHECK REQUIREMENTS	04/01/2010	Yes
83.20(2)(b)	TRAINING IN FIRE SAFETY	04/01/2010	Yes
83.36(1)(b)	QUALIFIED STAFF IN CHARGE, ON DUTY AND AWAKE	04/01/2010	Yes
83.37(1)(e)	MEDICATION REGIMEN, ADMINISTRATION REVIEW	04/21/2010	No
83.59(1)(g)	PROPER EXIT LOCATIONS, SIDEWALKS, DRIVEWAYS	04/01/2010	Yes
83.59(7)(a)	EMERGENCY EGRESS LIGHTING PROVIDED	04/01/2010	Yes

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**Provider Inspection Summary**  
For the period 04/01/2008 to 03/31/2011  
Community Based Residential Facility--CLASS ANA (NONAMBULATORY)  
COUNTY: TREMPPEALEAU

**Enforcement History (FAMILY CIRCLE)**

**Date: 04/28/2010**      **SOD #GW7611**

**Enforcement Appealed: No**

Sanctions

COMPLY WITH REQUIREMENT

--Facility Compliant 06/02/2010 12:00:00AM

FORFEITURE---83.37(2)(c)

FORFEITURE---83.37(3)(c)

**Date: 03/08/2010**      **SOD #E0GC11**

**Enforcement Appealed: No**

Sanctions

COMPLY WITH REQUIREMENT

FORFEITURE---83.20(2)(b)

FORFEITURE---83.36(1)(b)

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### Provider Inspection Summary

For the period 04/01/2008 to 03/31/2011

Community Based Residential Facility--CLASS ANA (NONAMBULATORY)

COUNTY: TREMPLEAU

#### Complaint History (FAMILY CIRCLE)

**Date Complaint Received: 03/12/2010**

**Date Investigation Completed: 04/21/2010**

Subject Area(s)

HOMELIKE ENVIRONMENT & CLEANLINESS  
NUTRITION & FOOD SERVICES  
MEDICATIONS  
PROGRAM SERVICES  
QUALITY OF LIFE

Result

NOT SUBSTANTIATED  
NOT SUBSTANTIATED  
SUBSTANTIATED  
NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

GW7611

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## Provider Inspection Summary

For the period 04/01/2008 to 03/31/2011

Community Based Residential Facility--CLASS CS (SEMIAMBULATORY)

COUNTY: TREMPPEALEAU

### Facility Information

**Facility Name:** FARNAM COMMUNITY LIVING CENTER (510103)

**Address:** 18425 DODGE ST, WHITEHALL, WI 54773

**License Status:** REGULAR

**Licensed/Certified/Registered** 04/24/1980

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

### Survey History

**Survey ID:** 0104398    **End Date:** 07/17/2009    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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

**Facility Information**

**Facility Name:** CLOVER WAY RCAC (0012483)  
**Address:** 36125 E END RD, INDEPENDENCE, WI 54747  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 02/01/2009  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0107953      **End Date:** 02/10/2011      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103341      **End Date:** 01/29/2009      **Type:** INITIAL      **Purpose:** SURVEY

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

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

**Facility Information**

**Facility Name:** LUTHER MIDELFORT OAKRIDGE-MAYO HLTH SYST (0010275)

**Address:** 13025 EIGHTH STREET, OSSEO, WI 54758

**License Status:** REGULAR

**Licensed/Certified/Registered** 03/01/2003

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

**Survey History**

**Survey ID:** 0104311      **End Date:** 07/02/2009      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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

**Facility Information**

**Facility Name:** COUNTRY RIDGE (0010272)  
**Address:** 13197 CHURCH STREET, PIGEON FALLS, WI 54760  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 01/03/2002  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0107673      **End Date:** 12/28/2010      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103037      **End Date:** 12/08/2008      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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

**Facility Information**

**Facility Name:** BROOKSIDE RCAC (0012596)  
**Address:** 35974 CLAIRE ST, WHITEHALL, WI 54773  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 01/01/2009  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0107935    **End Date:** 02/08/2011    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0104473    **End Date:** 07/24/2009    **Type:** OTHER    **Purpose:** OTHER

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103874    **End Date:** 04/22/2009    **Type:** OTHER    **Purpose:** OTHER

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103208    **End Date:** 12/30/2008    **Type:** INITIAL    **Purpose:** SURVEY

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

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

**Facility Information**

**Facility Name:** SUNRISE MANOR (0010273)  
**Address:** 36024 PARK STREET, WHITEHALL, WI 54773  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 11/01/2002  
**Regional Office:** WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History**

**Survey ID:** 0108246      **End Date:** 03/29/2011      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0105137      **End Date:** 10/29/2009      **Type:** OTHER      **Purpose:** DESK REVIEW

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0103475      **End Date:** 02/12/2009      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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