State of Wisconsin
Department of Health Services

Jim Doyle, Governor
Karen E. Timberlake, Secretary

December 22, 2008

The Honorable Mark Miller, Co-Chair
Joint Finance Committee
409 South, State Capitol
Madison, WI 53702

The Honorable Kitty Rhoades, Co-Chair
Joint Finance Committee
Room 309 East, State Capitol
Madison, WI 53702

Dear Senator Miller and Representative Rhoades:

In accordance with Section 51.06 (8), Wisconsin Statutes, enclosed is a copy of the report on people relocated and diverted from nursing homes, intermediate care facilities for the mentally retarded (ICFs-MR), and State Centers for the Developmentally Disabled in state fiscal year (SFY) 2008. This report provides information related to four programs, the ICF-MR Restructuring Initiative, Relocations from the State Centers for the Developmentally Disabled, the Community Relocation Initiative, and the Nursing Home Diversion Initiative.

The Department's relocation and diversion programs have been highly successful, providing the opportunity in SFY08 for 895 elderly individuals and people with physical and developmental disabilities who otherwise would have resided in ICFs-MR and Nursing Facilities to live in community based settings. Since FY 2006, approximately 2,545 elders and people with physical and developmental disabilities have successfully relocated from institutional settings and an additional approximately 492 individuals were diverted from admission to a nursing home through the Department's programs. The quality of life for these 3,037 individuals has been enhanced through the opportunity to live in the community and be near family and friends and more fully involved in community activities.

Highlights of the relocation and diversion initiatives include:

- 600 people with developmental disabilities, many of whom resided in institutions for decades, moved to the community and participated in community activities that were not available to them when they resided in institutions.

- 1,331 frail elders who resided in nursing facilities chose to live in the community near their families and friends. Prior to this initiative, these people would have been on a

waiting list for home and community-based care, and few would have had the opportunity to return to the community.

- 614 people with physical disabilities chose to live in the community where they were able to access community activities, rather than live in nursing facilities.

- People with developmental disabilities have been served in the community at a cost that is within the institutional budget for this population.

- Frail elders and people with physical disabilities are being served in the community at a cost below that of institutional care, resulting in a level of savings under the Medical Assistance Program in SFY 2008 of $4 million for the people relocated during the year.

- 338 elders and 154 people with physical disabilities, who were determined to be at imminent risk of having to move to a nursing facility, were able to remain in community-based settings because diversion funding was made available.

I trust you will find the enclosed report useful. Please contact Sinikka Santala, Administrator of the Division of Long Term Care at 608-266-0554 if you have any questions.

Sincerely,

Karen E. Timberlake
Secretary

SFY 2008 REPORT on RELOCATIONS and DIVERSIONS from INSTITUTIONS

As required by s. 51.06 (8)

Executive Summary

Through four programs, the Department provides elders, people with physical and developmental disabilities and people with co-occurring mental illness residing in nursing facilities and Intermediate Care Facilities for the Mentally Retarded (ICFs-MR) the opportunity to relocate to community-based settings. Under another program, the Department provides support to a limited number of individuals who are at imminent risk of entering a nursing home to be diverted from nursing home admission and remain in community settings.

The Department's relocation and diversion programs have been highly successful, providing the opportunity in State Fiscal Year (SFY) 08 for 895 elderly individuals and people with physical and developmental disabilities to live in community settings, closer to family and friends and community activities. As shown in the summary table below, 571 or almost 64%, of all relocations and diversions were frail elders; 270 or 30%, were persons with physical disabilities; 52 or almost 6% were individuals with developmental disabilities and about .2% were people with serious mental illness and a co-occurring physical disability.

Community Relocations and Diversions in FY08					
	Persons with Developmental Disabilities (DD)	Frail Elders	Persons with Physical Disabilities (PD)	Persons with Mental Illness and Physical Disability	Total
Relocations	52	438	220	2	712
Nursing Home Diversions		133	50		183
Total	52	571	270	2	895
% of Total	5.8%	63.8%	30.2%	.2%	

Since SFY 2006, 2,545 elders and people with physical and developmental disabilities have successfully relocated from institutional settings and an additional 492 individuals were diverted from admission to a nursing home through the Department's programs. The quality of life for these 3,037 individuals has been enhanced through the opportunity to live in the community and be near family and friends and more fully engaged in community activities. The experience of the past three years is summarized in the table below.

Community Relocations and Diversions								
	Persons with DD		Frail Elders		Persons with PD*		Total	
SFY	Relocations	Diversions	Relocations	Diversions	Relocations	Diversions	Relocations	Diversions
2006	372		409	98	152	47	933	145
2007	176		484	107	240	57	900	164
2008	52		438	133	222	50	712	183
Total	600		1,331	338	614	154	2,545	492
GRAND TOTAL							3,037	

* Includes two people with co-occurring mental illness relocated through COR waiver.

As shown in the table, highlights of the relocation and diversions initiatives over the past three years include:

- 600 people with developmental disabilities, many of whom resided in institutions for decades, moved to the community and participated in community activities that were not available to them when they resided in institutions.

- 1,331 frail elders who resided in nursing facilities chose to live in the community near their families and friends. Prior to this initiative, these people would have been on a waiting list for home and community-based care, and few would have had the opportunity to return to the community.

- 614 people with physical disabilities chose to live in the community where they were able to access community activities, rather than live in nursing facilities.

- People with developmental disabilities have been served in the community at a cost that is within the institutional budget for this population.

- Frail elders and people with physical disabilities are being served in the community at a cost below that of institutional care, resulting in a level of savings under the Medical Assistance Program in SFY 2008 of $4 million for the people relocated during the year.

- 338 elders and 154 people with physical disabilities, who were determined to be at imminent risk of having to move to a nursing facility, were able to remain in community-based settings because diversion funding was made available.

In January 2007 the Department was awarded a federal "Money Follows the Person" (MFP) Medicaid grant to support rebalancing of the long-term care system through further relocations from institutions to the community. Starting October 2007 and continuing to October 2011, the federal government will pay an enhanced matching rate higher than the standard Medicaid matching rate for the costs of certain relocated individuals. Wisconsin is projected to earn up to $15 million of increased federal funding over the grant period. Although the program has gotten off to a slower than anticipated start, the Department expects to earn almost $400,000 in increased federal funding for the twelve individuals enrolled in the federal Money Follows the Person program in SFY 2008. The Money Follows the Person federal grant will help sustain the momentum for Wisconsin's relocation initiatives in the next biennium.

Background

Relocation Initiatives

The Department provides elders and people with physical and developmental disabilities residing in nursing facilities and ICFs-MR the opportunity to relocate to community-based living arrangements under the following four programs:

- ICF-MR Restructuring Initiative
- Community Integration Program 1A
- Community Relocation Initiative
- Community Opportunities for Recovery

ICF-MR Restructuring Initiative

The ICF-MR Restructuring Initiative serves persons with developmental disabilities receiving active treatment in a non-state-owned Intermediate Care Facility for the Mentally Retarded (ICF-MR) or a non-state-owned nursing facility. (Relocations from the three State Centers for the Developmentally Disabled are part of the Community Integration Program 1A described below.) The initiative was authorized in the 2003-05 biennial budget bill and became effective on January 1, 2005. Under the initiative, counties are required to prepare a community plan for every person residing in an ICF-MR and for every person seeking admission to an ICF-MR. The plan must be submitted to the court and the court must consider the plan, along with other information presented to the court. If the court determines that the community is the most integrated setting appropriate to the needs of the individual, the court must order the person to be served in the community. If the person with a developmental disability was a resident of an ICF-MR or a nursing facility, the initiative allows money that was previously used to fund his/her institutional care to follow the person into the community to fund community-based care. Funding can also be used under this initiative for community placements for people relocated from facilities that are closing or downsizing. Under this initiative, the entire cost of the person's care plan is funded by the state. Therefore, no county tax levy funding has been required to fund these relocations.

In fiscal year 2008, a total of 39 individuals with developmental disabilities relocated into the community from ICFs-MR and nursing facilities under this initiative. In their new community settings, these individuals had their care needs fully met and participated in community activities that were not available to them when they resided in institutions.

The ICF-MR Restructuring Initiative has significantly rebalanced the long term care system for individuals with developmental disabilities. Since the start of this initiative in January 2005 through June 2008, a total of 616 individuals transitioned to community settings. As of December 2007, only 496 individuals, less than half of the population in ICFs-MR other than the State Centers at the start of the initiative, are residing in ICFs-MR other than the State Centers. 15 ICFs-MR, accounting for half of all ICFs-MR other than the State Centers, closed over the course of the initiative.

Relocations under the ICF-MR Restructuring (effective January 2005)	
SFY05	94
SFY06	340
SFY07	143
SFY08	39
TOTAL	616

Community Integration Program (CIP) 1A

The Community Integration Program 1A supports relocations of individuals with developmental disabilities from the three State Centers for the Developmentally Disabled to community settings. The CIP 1A program began in 1981. Currently under the CIP 1A program, the state provides up to $325/day for an individual's community costs. The institutional cost of the Center is reduced by $325/day for each relocated resident. In fiscal year 2008, 13 people were relocated from the State Centers into the community. Northern Wisconsin Center no longer provides long term care and treatment for individuals. All three Centers provide short-term intensive treatment for individuals with developmental disabilities residing in the community.

Community Relocation Initiative

The Community Relocation initiative provides elders and persons with physical disabilities residing in nursing homes the opportunity to relocate to community settings. People being cared for in nursing homes have a choice to remain in their current setting, or move to the community, if their care needs can be met at home, in an apartment or in an assisted living setting. The funding being used for an individual's institutional care "follows" the person into the community to be used in the home and community-based waiver. The Community Relocation Initiative was authorized in the 05-07 biennial budget bill and began in August 2006. In fiscal year 2008, a total of 658 people relocated from nursing homes under the Community Relocation Initiative. Of the 658 total, 438 were elders and 220 were people with physical disabilities. These individuals chose to live in the community where they could be closer to family and friends and more fully access community activities. An additional 152 individuals residing in nursing homes enrolled in the Family Care program. These individuals may relocate to the community in the future.

Individuals of all ages chose to relocate to community settings under the Community Relocation Initiative, as shown in the chart below. It is particularly striking that 155, or nearly one-quarter, of the individuals who chose to relocate were age 85 or older.

Age of Individuals Relocated under the Community Relocation Initiative: FY08						
18-49	50-64	65-74	75-84	85-99	>99	Total
62	158	114	169	155	0	658

Individuals with both relatively short-term and long-term stays chose to relocate, as shown in the chart below. Of the people relocated, 463 or approximately 70% had been in the nursing home more than 100 days; 311 or approximately 47% for six months or more, and 153 or more than 23% relocated after having been in the nursing home for more than one year.

Length of Time in Nursing Home Prior to Relocation: FY08				
≤100 days	101-179 days	6 mo-1 year	> 1 year	Total
195	152	158	153	658

Community Opportunities for Recovery

The Community Opportunities for Recovery waiver was approved by the federal Centers for Medicare and Medicaid Services (CMS) in July of 2007. This waiver serves people with a primary diagnosis of serious mental illness who also meet a skilled nursing home level of care due to a co-occurring physical impairment. COR provides a package of waiver services that better address the needs of participants with serious mental illness than do traditional long term care waivers. The first COR participant relocated from a nursing home in May 2008. Two individuals relocated from nursing homes in SFY 2008 as a result of the COR waiver. These individuals are included in the nursing home relocation data tables under physical disability or in the applicable age category.

Diversions

Nursing Home Diversion Program

The Nursing Home Diversion Program provides support to a limited number of individuals who are at imminent risk of entering a nursing home to be diverted from nursing home admission and remain in community settings. The program was authorized in 2005 Wisconsin Act 355 and began in April 2006. Participants in this program are served under the Community Integration Program II (CIP II) Medicaid home and community-based waiver. To be eligible for these diversion funds, a person is required to meet certain risk criteria as defined by the Department in addition to meeting the functional and financial eligibility criteria for CIP II. The statute authorizes the Department to provide an enhanced CIP II rate for up to 150 individuals who are diverted from imminent entry into a nursing home and to provide diversion opportunities for additional individuals, subject to the concurrence of the legislature. To date, funding for 450 individuals has been authorized by the Legislature and contracted out to counties for individuals who meet the diversion criteria. This funding is reallocated to new individuals as a result of attrition.

To be eligible for diversion funding, an individual must meet all of the following criteria:

- Belong to a target group served by CIP II (elderly age 65 or older and/or have a physical disability)
- Be functionally and financially eligible for the CIP II program;
- Reside or intend to reside in a community setting that is eligible for CIP II;
- Meet high risk criteria for imminent entry into a nursing home;
- The costs of the person's Medicaid funded community care plan must be no greater than the Medicaid costs the person would have incurred in the nursing home. The care must be cost-neutral.

As a part of the diversion initiative, the Department was required to develop and utilize criteria to determine who is at imminent risk of entry into a nursing home. In developing the criteria, the Department reviewed national studies, analyzed Wisconsin data and consulted with county long-term support coordinators and staff. Factors that are considered in the criteria include:

- Meeting an intensive skilled nursing (ISN) level of care;
- Facing an imminent loss of current living arrangement;
- Having a fragile or insufficient informal caregiver arrangement;
- Having a terminal illness;
- Having multiple other factors that are associated with nursing home entry.

Under the Nursing Home Diversion program in fiscal year 2008, a total of 183 individuals were diverted from nursing home admission and remained in community-based settings, staying close to family and friends and involved in the community. This included 150 new diversion slots approved by the Joint Committee on Finance in January 2008 and 33 slots that became available through attrition. Of the total, 133 were elders and 50 were individuals with physical disabilities. There is a strong and widespread demand for diversion opportunities. The diversion opportunities were utilized in 52 counties.

Individuals of all ages benefited from the Nursing Home Diversion program, as shown in the chart below. Significantly, 62 or approximately one-third, of the individuals diverted from nursing homes were age 85 or older.

Age of Individuals Relocated under the Nursing Home Diversion Initiative: FY08						
18-49	50-64	65-74	75-84	85-99	>99	Total
25	25	23	48	61	1	183

Nature of Living Arrangement

The following table shows the living arrangement for individuals relocated in FY 2008. Elderly individuals primarily relocate to Community Based Residential Facilities (CBRF); this setting accounts for 219 or half of all elderly clients. Another 160 or more than one third of elderly relocated individuals moved into a home or apartment, either alone or with family.

Individuals with physical disabilities primarily relocate to a home or apartment; 126 or 57% of individuals with physical disabilities successfully relocated to their own home or apartment. Another 62 or 28% of individuals with physical disabilities relocated to CBRFs.

Individuals with developmental disabilities primarily relocate to Adult Family Homes (AFHs); 37 or 71% of individuals with developmental disabilities utilized this setting. A small number relocated to CBRFs, 5 or almost 10%; and to a home or apartment, 10 or nearly 20%.

Overall, 296 or more than 40% of all individuals relocated to a home or apartment.

Living Arrangement for Individuals Relocated in FY08				
	Elderly	Persons with PD	Persons with DD	Total
Home or Apartment	160	126	10	296
Adult Family Home	19	24	37	80
Community-Based Residential Facility	219	62	5	286
Residential Care Apartment Complex (RCAC)	28	3		31
Not determined	12	5		17
TOTAL	438	220	52	710

Appendix A provides information about the living arrangements for individuals relocated under the Community Relocation Initiative by the program under which they were served.

The living arrangements of individuals diverted from nursing home admission under the Nursing Home Diversion program are summarized below. Almost all individuals remained in their same living arrangement. Almost 60 % remained in a home or apartment. Almost one-third are living in CBRFs while a significant number are in Residential Care Apartment Complexes.

Living Arrangement for Individuals Diverted from Nursing Homes in FY08		
	Prior Living Arrangement	Living Arrangement on Program
Home or Apartment	113	107
Adult Family Home	1	4
CBRF	52	60
RCAC	14	12
Hospital/Other	3	n/a
TOTAL	183	183

Duration of Relocations

Of the 658 individuals relocated in FY08 through the Community Relocation Program, 28 died of natural causes and 30 returned to a nursing home. The remaining individuals continue to live in the community and virtually all continue to receive services through a home and community-based waiver program.

Of the 39 individuals with developmental disabilities who relocated in FY08 to the community under the ICF-MR Restructuring Initiative, 1 died of natural causes and 3 returned to an institutional setting (some of these may be short-term placements). All of the 13 individuals with

developmental disabilities who relocated to the community in FY08 from the State Centers under the CIP 1A program were still living in the community at the end of SFY 08.

Costs Under the Medicaid Program

To determine the net Medicaid cost of the relocation programs, Medicaid costs were calculated for both the period when the person was in an institution and the period when the person was living in the community. The analysis examined the following two components: (a) the institutional or home and community-based waiver costs; and (b) other Medicaid costs, termed MA Card Costs, which include the Medicaid costs for personal care services, therapeutic services, and all other MA services. This provides a comprehensive presentation of the person's Medicaid costs in each setting.

Waiver services are administered through state/county contracts on a calendar year basis. Precise costs for the January-June 2008 period are not fully reconciled and available until after the full calendar year is completed. For this reason, this report uses an estimate of the January-June 2008 waiver costs, based on average per person costs for relocations that occurred between July 1, 2007 and November 30, 2007. Relocations in December 2007 were excluded in the calculation of the average per person cost because the first month of a relocation is unrepresentative of the average monthly cost due to one-time costs related to start-up of a community placement.

Community Relocation Initiative

As summarized in the table below, in FY08 the average daily cost in the nursing facility for individuals before they relocated under the Community Relocation Initiative was $142.70. In contrast, the average daily cost in the community after relocation for these same individuals was $103.36. Community relocations under the CRI were cost effective, producing an average daily savings of $39.34, representing a 27% cost reduction.

Preliminary Cost Information - Average Daily Costs for Individuals Relocated in FY08

		(1)	(2)	(3)	(4)	(5)	(6)	
Program	**#**	**Facility Costs**	**Facility Card Costs**	**Facility Total**	**Prelim. Program Costs**	**Community Card Costs**	**Community Total**	**Average Savings**
CRI	658	124.15	18.55	142.70	76.85	26.51	103.36	39.34
CIP II – CRI	503	128.40	17.75	146.15	80.61	31.95	112.56	33.59
Family Care – CRI	132	110.63	23.84	134.47	79.63	9.61	89.24	45.23
PACE/Partnership-CRI	23	105.28	5.04	110.32	95.00	-	95.00	15.32

As shown in the table below, the total MA cost in FY08 of serving the 658 individuals who relocated to the community under the Community Relocation Initiative during the period they lived in their new community settings was $12.5 million. If instead these individuals had remained in their institutional settings during this time period, their MA cost of services would

have been more than $16.5 million. Due to the difference between institutional and community costs, the Community Relocation Initiative produced total savings of more than $4 million in FY08.

Estimated Total FY08 Costs of Community Relocation Initiative

Program	#	(1) Aver. MA Costs in Community	No. of Days	(2) Total MA Costs in Community	(3) Ttl. MA Costs in Facility for same period	(4) Difference Between Facility and Community Costs	(5)
FY08 Relocations							
CIP II – CRI	503	112.56	88,613	9,974,279	12,999,527		
Family Care – CRI	132	89.24	23,524	2,099,282	3,163,272		
PACE/Partnership-CRI	23	95.00	4,367	414,865	481,767		
TOTAL CRI	658		116,504	12,488,426	16,644,566	4,156,140	

Notes

1. All Medicaid costs related to nursing home stay are based on paid claims as reported in MMIS averaged over prior three months. Some lag exists in data.
2. Includes allowance for county administrative costs.
3. Estimated card costs

ICF-MR Restructuring

The ICF-MR Restructuring Initiative establishes a set amount of funding to be used for the costs of all individuals eligible for the initiative either in institutional or community settings. In FY08, the total ICF-MR Restructuring budget equaled $98.3 million All Funds. The Department is expected to manage the cost of serving those individuals remaining in institutions and the cost of new community relocations so as to stay within the global ICF-MR Restructuring budget.

In FY08, the average daily MA cost of individuals in an ICF-MR was $187.82, of which $177.40 was facility cost and $10.43 was card costs. The average daily MA cost of serving the individuals in the community after relocation was $260.02, of which $205.00 was waiver costs and $55.02 was card costs. The state MA program fully funds these community costs, with the result that counties do not bear any new costs due to this initiative.

Although the average cost of relocated individuals was higher than their institutional cost, the total expenditures were within the budgeted level, primarily because institutional costs were lower than expected due to deaths. In total, under the ICF-MR Restructuring Initiative in FY08, approximately $39.5 million All Funds (AF) was spent on waiver costs, $8.6 million AF for the increased cost of MA card services for relocated individuals in the community, and $36.7 million AF for the costs of individuals residing in ICF-MR or nursing home institutions for a total program cost of $84.9 million AF. Thus, the cost of the entire ICF-MR program for FY08, $84.9 million AF, was within the SFY 08 budgeted level of $98.3 million AF.

CIP 1A Program

As noted above, individuals with developmental disabilities relocated under the CIP 1A program are funded by the state MA program for their community costs up to $325 per day. The institutional cost at the state DD Center where they resided is decreased by $325 per day, making the program cost-neutral.

Nursing Home Diversion Program
The average daily community cost of individuals served under the nursing home diversion program in FY08 was $77.15, of which $48.26 was waiver costs and $28.89 was card costs. The projected daily MA cost of serving these individuals if they had entered a nursing home is $123.49, assuming that their institutional costs would have been similar to those of the individuals served under the Community Relocation Initiative.

The estimated cost of the individuals served under the nursing home diversion program in SFY08 is $1,397,838 AF. The projected cost of serving these individuals in nursing homes, if they had needed to enter a nursing home, during the same time period was almost double this amount, at $2.4 million AF.

Impact on Health and Safety

Assuring the health and safety of frail elders and individuals with developmental and physical disabilities is a paramount goal of the Department whether these individuals live in institutions or community settings.

Individuals with developmental disabilities relocated from the State Centers or from other ICFs-MR under the ICF-MR Restructuring Initiative are served in the community through the Medicaid Home and Community Based Waiver program called the Community Integration Program (CIP) 1A and 1B; or through Family Care, a Medicaid managed care long-term care program. Elders and individuals with physical disabilities who are relocated or diverted from nursing homes are served in the community under the Community Integration Program (CIP) II, an MA Home and Community Based waiver; Family Care; or PACE/Partnership, a fully integrated Medicaid/Medicare managed care program for individuals with long-term care needs.

Individuals with Developmental Disabilities: CIP 1A and 1B
For individuals with developmental disabilities served under the CIP 1A and 1B programs, Department staff work cooperatively with county care management staff in developing initial care plans for the people who relocate from ICFs-MR and nursing facilities. During the development of the initial care plan, health and safety concerns are identified and addressed comprehensively. The person's health and safety history is examined closely so that adequate protections can be put in place in the community. Through the care planning process, interdisciplinary teams, including those with nursing and behavioral expertise, work collaboratively with the individual and those who know the person best to design services and supports that are appropriate, cost-effective, and address the person's health and safety needs.

Under Wisconsin's Home and Community-Based Waiver programs, the Department ensures the health, safety and welfare of Home and Community-based Waiver participants. The Department shares this responsibility with county agencies in the State-County Contract by requiring county compliance with the Medicaid Waivers Manual.

The Department requires each county agency administering these waivers to have a system to ensure waiver participants are adequately protected from physical, verbal, and sexual abuse as well as maltreatment, neglect and financial exploitation and violation of their rights under law.

The Department also requires counties to have an effective response system when incidents of this kind arise. Counties are required to report alleged or actual incidents to the Department.

There are several systems and processes in place that allow Wisconsin to achieve high levels of health and safety for citizens with disabilities living in community settings. For every person with a developmental disability who is relocated from an ICF-MR or nursing facility, the Department or county staff conduct an in-depth plan review 30 days after the person relocates, usually in the person's home. Additionally, in-depth plan reviews continue to be conducted on an as needed basis and as often as necessary.

Based on the follow-up reports available for persons relocated in fiscal year 2008 and reviewed by state staff under the ICF-MR Restructuring, 100 % had their medical needs appropriately met. County case managers work with clients to address those situations where medical needs were not fully met.

Frail Elders and People with Physical Disabilities: CIP II
For frail elders and people with physical disabilities served under the CIP II program, each person's care plan is reviewed by the State's quality assurance contractor prior to state approval to ensure that critical needs are addressed with adequate services. Within 30 days after relocation, the care manager visits the participant to ensure that services are being provided and are appropriate to the person's needs and the person is safe. The care manager prepares a written report on his/her findings for the agency file and sends a report to the state. The care manager makes, at a minimum, monthly contacts with the participant or family or any provider to check on the person's progress and make any needed changes. The care manager is required to visit the participant 90 days after starting on the program, again checking on progress and making needed changes to the care/service plan. As part of these required visits, the care manager completes a 30-day and 90-day questionnaire with the client for submission to the Department.

Every year, half of the counties administering the CIP II program receive a quality assurance monitoring review by the state's quality assurance contractor. These reviews include a review of client files at the local agency to ensure that all requirements are adhered to. Also, each year a random sample of 500 participants receive a home visit by the quality assurance contractor to check on the health, safety and well-being of participants. The State's quality assurance contractor conducts a telephone interview with individuals who left the program and return to the nursing home or with the families of persons who died after relocating. The purpose of these contacts is to determine whether any changes could have made the process better.

The 90-day questionnaire for individuals relocated under the Community Relocation Initiative and served under the CIP II programs during state fiscal year 2008 indicates that the health status of relocated individuals is as good, and in many cases better, in their new setting and that health and safety issues are being met. Specifically,

- The functional status remained the same for 32% of participants and improved for 64% of participants after relocating.
- 14% of participants had health and safety issues identified since relocating. County case managers work with the clients to address these issues.

Family Care and Partnership

The methods to ensure safety and high-quality care for people who are served in Family Care and Partnership do not vary by target group. Department staff works cooperatively with the MCO's care management staff in developing initial care plans for community care before the person leaves institutional care. The interdisciplinary care management team, which includes a nurse, completes an initial service plan within 10 days of enrollment, which may precede relocation. During the development of the initial care plan, health and safety concerns are identified and addressed comprehensively. A comprehensive assessment is completed within 30 days of enrollment, and a comprehensive services plan within 60 days. Completeness, consumer choice, appropriateness of services, and coordination between long-term care and primary and acute medical care are subject to contractual requirements. The person's health and safety history is examined closely so that adequate protections can be put in place in the community. Through the care planning process, interdisciplinary teams (IDTs), including those with nursing and behavioral expertise, work collaboratively with the individual and those who know the person best to design services and supports that are appropriate, cost-effective, and address the person's health and safety needs. For people with developmental disabilities relocating from an ICF-MR the MCO is required to submit the care plan and cost information to the Department for approval prior to the relocation. The Department provides Member Care Quality Specialists as consultants for all relocations. They assist with the processes the IDTs are required to follow to relocate someone, finding resources, assessing safety and risk, providing technical assistance and generally being proactive with problem solving to ensure that relocations go smoothly from the member's perspective.

The Department requires each managed-care agency to ensure members are adequately protected from physical, verbal, and sexual abuse as well as maltreatment, neglect and financial exploitation and violation of their rights under law. The Department also requires MCOs to have an effective response system when incidents of this kind arise. Counties are required to report actual incidents of abuse and neglect and the results of their investigation and response, to the Department.

Family Care and Partnership care managers make home visits to the relocated members on a schedule determined by each member's need or at least once every 90 days to assess success of the care, needs, adequacy of services, and consumer satisfaction and choice. Depending on the member's individual needs and preferences, these visits may involve the nurse care manager or the social services coordinator, or both. The MCO interdisciplinary team is responsible for monitoring the person's physical health, quality of services and supports in the home and quality of life as defined by the person. Documented re-assessments and care plan revisions occur as needed or at least once every six months. The Department Member Care Quality Specialists are required to visit persons with a developmental disability relocated from an ICF-MR within the first thirty days of a relocation and again within 90 days to assure from an independent perspective that the Department approved care plan is being followed and the person's outcomes are being met in their new community placement.

The MCOs' review activities include internal quality-assurance activities that ensure completeness of the care plan, delivery of authorized services, member satisfaction, provider

quality, and other aspects of quality care. Internal care-plan quality-control procedures may include supervisory review or peer review or both.

Department field staff work with the MCO continuously to identify and resolve potential member-care quality issues, while independent, external quality-assurances reviews for individuals served by managed-care organizations are conducted by an External Quality Review Organization (EQRO). Following federally-developed review protocols, the external quality reviews annually examine each MCO's compliance with care-planning quality standards, continuity and coordination of care, provider-quality oversight requirements, quality-assurance activities, other practice guidelines, and coverage and authorization of services. Review activities include home visits, interviews, and document review. Among other elements, the EQRO reviews the frequency of care-manager contact and collaboration within the care-management team. Additional or targeted reviews occur throughout the year for quality oversight related to complaints, appeals, grievances, critical incidents, and follow-up to previous findings. In the EQRO's 2007-2008 contract year, the EQRO determined that the Family Care MCOs obtained and could provide evidence that authorized services were implemented in 98.7 percent of the cases, and that the MCO had conducted follow-up to ensure that the provided services were effective in 81.5 percent of the cases. For the Partnership/PACE MCOs, for the same quality standards, success rates were 97.3 percent and 93.4 percent, respectively.

Regulatory Oversight
The Division of Quality Assurance conducts regular on-site surveys of licensed community residential facilities (3-4 bed Adult Family Homes and Community-Based Residential Facilities) much like it does for ICFs-MR, using state guidelines and standards. Counties are responsible for assuring high quality services and environments for individuals living in smaller settings. Residential and day-service providers also have procedures and practices that maintain each person's safety and health. Because they interact with each person on a constant basis, medical conditions are monitored, social and environmental situations are structured, and individuals with special needs are given sufficient supports.

The Department oversees these programs and service delivery systems by having staff disbursed throughout the state to facilitate and monitor these efforts through several types of activities, including: random unannounced visits, in-depth annual plan review, as well as on-going dialogue with all stakeholders (including consumers and their families/guardians). The Department issues guidelines, and establishes policies and procedures whenever necessary, when gaps are identified or suspected.

The federal Centers for Medicare and Medicaid Services (CMS) requires the provision of health, safety and well-being of all waiver participants, while assuring patient rights, promoting individual and informed choice, community participation, and making sure that that each person experiences a meaningful day. State staff currently conduct satisfaction surveys, and monitor information accumulated from a variety of sources. In addition to waiver services and supports, individuals also receive community health services such as physician and dental visits, hospital care, personal care in their home, and pharmacy. Assessments are methodically completed and updated, and many counties and providers now employ nursing personnel as part of their care management teams.

Actual or suspected events
Any actual or suspected event that threatens the health or safety of an individual is investigated and reviewed by each provider and county. Counties are required to report all such instances to designated Department staff, who, depending on the nature and seriousness of the report, may investigate or involve others (such as police or the judicial system). All deaths in licensed or certified settings are reported to and scrutinized by a state review committee, who looks for negative trends associated with providers, counties, or the approaches that are used by the service delivery system with the intent of preventing further instances. Concerns are then shared with appropriate entities who are required to make systemic improvements or take corrective actions, which creates a constant cycle of improvement. Instances of abuse or neglect are remedied swiftly. Access to necessary medical services is closely monitored.

Involvement of Guardians or Family Members

Counties are required to prepare a plan for home or community-based care for all individuals residing in ICFs-MR and nursing homes who are at a developmental disability level of care. For ICFs-MRs other than the State Centers, these plans are part of the statutorily required annual court review (know as the Watts review) to determine the most integrated setting appropriate to the person's needs. Counties involve guardians in the preparation of these plans and state law requires that the county provide a copy of the plan to the guardian prior to the Watts review.

When a person is relocated from a State Center or other ICF-MR or nursing home facility, the plan for that individual's care is signed by the guardian indicating his/her acceptance of the plan. Of the 39 persons relocated under the ICF-MR Restructuring Initiative in FY 2008, guardians all agreed with the plan that was developed. Guardians agreed with the plans of all 13 persons relocated from the State Centers in FY08 under the CIP 1A program.

Most elderly persons and persons with physical disabilities relocated under the Community Relocation Initiative do not have guardians. However, in cases where people do have guardians, the guardians are involved in the efforts to relocate or divert individuals from institutions.

For persons who are competent to make their own decisions, family members are involved to the extent preferred by the individual participant. The Department does not keep a record of family involvement in care planning for individuals who are competent to make their own decisions.

Staff turnover

Appendix B provides 2007 staff turnover rates for Intermediate Care Facilities for the Mentally Retarded and Nursing Facilities. The rates are calculated based on information provided by nursing homes and ICFs-MR in response to the 2007 Annual Staffing Survey. The attachment sorts the facilities by county and identifies the city or town where the facility is located. Staff turnover rates are provided for both full and part time staff for three professions: Registered Nurses (RNs), Licensed Practical Nurses (LPNs), and Nursing Assistants (NAs). The turnover rate is calculated by dividing the new staff hired in 2007 by the number of staff on the payroll on 12/31/07, and multiplying this result by 100.

The 2007 statewide turnover rates are provided in the table below:

Staff Turnover Rates: 2007		
	Nursing Homes	ICF-MRs
Full time RNs	32%	13%
Part time RNs	49%	19%
Full time LPNs	29%	6%
Part time LPNs	53%	38%
Full time NAs	42%	18%
Part time NAs	72%	45%

APPENDIX A

Placement of Relocations under the Community Relocation Initiative by Program - SFY 2008

	Home/ Apartment	CBRF	RCAC	AFH	Not Determined	Total
Elderly						
CIP II	126	180	22	12		340
Family Care.	26	35	5	7	11	84
PACE/Partnership	8	4	1		1	14
Total	160	219	28	19	12	438
% of total	36.53%	50.00%	6.39%	4.34%	2.74%	100.00%
Persons with PD						
CIP II	94	46	3	20		163
Family Care.	23	16		4	5	48
PACE/Partnership	9					9
Total	126	62	3	24	5	220
% of total	57.27%	28.18%	1.36%	10.91%	2.27%	100.00%
TOTAL						
CIP II	220	226	25	32	0	503
Family Care.	49	51	5	11	16	132
PACE/Partnership	17	4	1	0	1	23
Total	286	281	31	43	17	658
% of total	43.47%	42.71%	4.71%	6.53%	2.58%	100.00%

APPENDIX B
2007 Staff Turnover in Nursing Facilities

Name	City	County	Full Time Registered Nurses	Part Time Registered Nurses	Full Time Licensed Pratical Nurses	Part Time Licensed Pratical Nurses	Full Time Nursing Assistants	Part Time Nursing Assistants
Affinity Subacute Care	APPLETON	OUTAGAMIE	200	67	NS	NS	100	100
Alden Meadow Park HCC Inc	CLINTON	ROCK	0	0	0	0	21	46
Alexian Village Of Milwaukee	MILWAUKEE	MILWAUKEE	75	100	0	27	44	65
Algoma Long Term Care Unit	ALGOMA	KEWAUNEE	0	60	22	60	21	52
All About Life Rehabilitation Center	FOND DU LAC	FOND DU LAC	29	NS	0	30	19	35
Allis Care Center	WEST ALLIS	MILWAUKEE	100	71	20	64	5	34
American Heritage Care Center	HAMMOND	SAINT CROIX	60	0	13	60	53	90
American Lutheran Home Menomonie	MENOMONIE	DUNN	0	40	0	0	55	72
American Lutheran Home Mondovi	MONDOVI	BUFFALO	14	33	0	55	53	52
Anna John Nursing Home	DE PERE	BROWN	0	NS	0	100	15	100
Arcadia Nursing Home	ARCADIA	TREMPEALEAU	0	25	0	13	0	29
Area Nursing Home Inc	COLFAX	DUNN	0	14	0	100	18	75
Ashland Health And Rehabilitation Center	ASHLAND	ASHLAND	80	200	50	33	100	88
Aspirus Lillian Kerr Healthcare Center	PHELPS	VILAS	0	100	0	0	28	60
Aspirus Pleasant View	PHILLIPS	PRICE	67	30	0	20	56	42
Attic Angel Place HC	MIDDLETON	DANE	0	64	100	57	13	104
Augusta Area Nursing Home	AUGUSTA	EAU CLAIRE	20	25	0	NS	0	71
Badger Prairie Health Care Center	VERONA	DANE	0	44	0	42	0	52
Baldwin Care Center Inc	BALDWIN	SAINT CROIX	0	20	13	0	185	52
Barron Care and Rehabilitation	BARRON	BARRON	0	40	0	50	90	100
Becker Shoop Center	RACINE	RACINE	14	60	0	0	0	93
Beechwood Rest Home Inc	KEWASKUM	SHEBOYGAN	0	50	NS	0	17	25
Bel Air Care Center	MILWAUKEE	MILWAUKEE	100	33	0	139	0	57
Belmont Nursing and Rehabilitation Center	MADISON	DANE	71	50	38	60	48	100
Beloit Health And Rehabilitation Center	BELOIT	ROCK	108	25	75	71	33	95
Bethany Home	WAUPACA	WAUPACA	11	27	0	21	29	68
Bethany Riverside	LA CROSSE	LA CROSSE	20	13	11	54	73	51
Bethany St Joseph Care Center	LA CROSSE	LA CROSSE	10	22	0	54	4	86
Bethel Center	ARPIN	WOOD	8	0	86	33	109	59
Bethel Home And Services Inc	VIROQUA	VERNON	71	11	0	20	94	56
Bethel Home Inc	OSHKOSH	WINNEBAGO	30	83	27	88	21	45
Birch Hill Care Center	SHAWANO	SHAWANO	50	33	13	67	29	46
Bloomfield Manor Nursing Home	DODGEVILLE	IOWA	44	75	100	50	5	42
Bornemann Nursing Home	GREEN BAY	BROWN	7	40	0	57	9	57
Brewster Village	APPLETON	OUTAGAMIE	14	67	0	33	16	34
Center	BROOKFIELD	WAUKESHA	64	129	100	146	104	165
Brookside Care Center	KENOSHA	KENOSHA	14	29	0	43	0	43
Brown County Health Care Center	GREEN BAY	BROWN	17	0	0	50	4	5
Burnett Medical Center	GRANTSBURG	BURNETT	0	0	0	33	35	44
Cameo Care Center Inc	MILWAUKEE	MILWAUKEE	100	86	100	143	67	262

APPENDIX B
2007 Staff Turnover in Nursing Facilities

Name	City	County	Full Time Registered Nurses	Part Time Registered Nurses	Full Time Licensed Pratical Nurses	Part Time Licensed Pratical Nurses	Full Time Nursing Assistants	Part Time Nursing Assistants
Care Age Of Brookfield	BROOKFIELD	WAUKESHA	50	20	0	20	144	67
Cedar Crest Health Center	JANESVILLE	ROCK	67	71	150	42	19	40
Cedar Lake Health and Rehabilitation Center	WEST BEND	WASHINGTON	11	45	70	57	73	68
Center	CEDARBURG	OZAUKEE	29	60	57	67	71	57
Chilton Care Center	CHILTON	CALUMET	67	13	17	50	19	28
Chippewa Manor Nursing Home	CHIPPEWA FALLS	CHIPPEWA	9	25	0	25	67	117
Christian Community Home	HUDSON	SAINT CROIX	22	0	0	50	28	52
Christian Home and Rehabilitation Center	WAUPUN	DODGE	50	0	33	25	200	160
City View Nursing Home	MADISON	DANE	0	150	50	100	80	317
Clairemont Nursing and Rehab	EAU CLAIRE	EAU CLAIRE	46	50	131	82	88	109
Clairidge House	KENOSHA	KENOSHA	50	17	17	67	40	156
Clark County Healthcare Center	OWEN	CLARK	18	0	10	17	18	33
Clearview North	JUNEAU	DODGE	0	25	0	0	12	41
Clearview South	JUNEAU	DODGE	0	0	0	0	5	20
Clement Manor Health Care Center	GREENFIELD	MILWAUKEE	20	8	0	29	50	33
Colonial Center	COLBY	CLARK	29	100	20	100	97	129
Colonial Manor Medical Rehabilitation Center	WAUSAU	MARATHON	6	100	33	100	78	87
Colony Oaks Care Center	APPLETON	OUTAGAMIE	60	125	71	100	135	106
Columbia Health Care Center	WYOCENA	COLUMBIA	67	47	25	64	4	65
Columbus Nursing and Rehabilitation Center	COLUMBUS	COLUMBIA	29	NS	83	100	130	150
Cornell Area Care Center	CORNELL	CHIPPEWA	40	100	20	40	74	92
Countryside Home	JEFFERSON	JEFFERSON	38	100	33	25	10	32
Crandon Nursing Home	CRANDON	FOREST	0	20	33	100	20	36
Crest View	NEW LISBON	JUNEAU	14	29	0	33	0	40
Crystal Lake Manor	STRUM	TREMPEALEAU	50	25	0	50	38	44
Crystal River Nursing And Rehabilitation	WAUPACA	WAUPACA	17	33	67	57	30	30
Cumberland Memorial Hospital ECU	CUMBERLAND	BARRON	0	0	NS	33	20	41
Dallas Care and Rehabilitation	DALLAS	BARRON	33	200	75	150	111	218
Divine Savior Healthcare Inc	PORTAGE	COLUMBIA	14	17	43	13	40	65
Door Cty Memorial Hospital SNF	STURGEON BAY	DOOR	50	17	NS	13	0	33
Dove Health Care At Glendale	MILWAUKEE	MILWAUKEE	250	180	82	96	140	221
Dove Healthcare Nursing and Rehabilitation	EAU CLAIRE	EAU CLAIRE	24	0	63	29	61	64
Dr Kate Newcomb Convalescent Center	WOODRUFF	ONEIDA	0	13	50	33	36	100
Dunn County Health Care Center	MENOMONIE	DUNN	0	10	14	57	13	109
Convalescent Center	MILWAUKEE	MILWAUKEE	0	NS	0	NS	12	45
Eastside Rehabilitation Center	MILWAUKEE	MILWAUKEE	29	33	17	92	24	84
Eastview Medical And Rehabilitation Center	ANTIGO	LANGLADE	14	20	27	0	32	109
Edgerton Care Center	EDGERTON	ROCK	20	67	17	44	62	68
Edgewater Haven Nursing Home	PORT EDWARDS	WOOD	8	43	0	33	8	87
Ellsworth Care Center	ELLSWORTH	PIERCE	0	0	0	29	0	100

APPENDIX B
2007 Staff Turnover in Nursing Facilities

Name	City	County	Full Time Registered Nurses	Part Time Registered Nurses	Full Time Licensed Pratical Nurses	Part Time Licensed Pratical Nurses	Full Time Nursing Assistants	Part Time Nursing Assistants
Evansville Manor	EVANSVILLE	ROCK	0	8	20	0	6	41
Evergreen Care Center	SHAWANO	SHAWANO	0	20	17	20	20	56
Evergreen Health Center	OSHKOSH	WINNEBAGO	0	20	100	14	0	57
Fair View Home	MAUSTON	JUNEAU	13	0	0	50	0	60
Fairhaven Corporation	WHITEWATER	WALWORTH	17	11	33	25	39	57
Fall Creek Valley Care Center	FALL CREEK	EAU CLAIRE	0	71	50	50	62	116
Family Heritage Care Center	FALLS	JACKSON	0	0	0	0	0	58
Fond Du Lac Cty Health Care	FOND DU LAC	FOND DU LAC	20	30	17	50	5	75
Fond Du Lac Lutheran Home Inc	FOND DU LAC	FOND DU LAC	100	100	NS	100	100	100
Fort Atkinson Subacute CC	FORT ATKINSON	JEFFERSON	0	17	0	41	0	47
Fountain View Care Center	RIPON	FOND DU LAC	40	80	25	60	0	57
Four Winds Manor	VERONA	DANE	100	50	33	100	93	81
Franciscan Care and Rehabilitation Center	APPLETON	OUTAGAMIE	50	36	0	44	44	80
Franciscan Villa	MILWAUKEE	MILWAUKEE	45	42	0	14	45	97
Community	FREDERIC	POLK	67	NS	33	150	10	400
Friendly Village Nursing and Rehab Center	RHINELANDER	ONEIDA	25	50	14	133	24	50
Geneva Lake Manor	LAKE GENEVA	WALWORTH	20	67	25	100	54	100
Gilman Care Center, LLC	GILMAN	TAYLOR	100	100	100	NS	100	100
Glenhaven Inc	GLENWOOD CITY	SAINT CROIX	75	0	25	20	39	40
Golden Age Manor	AMERY	POLK	0	0	0	33	4	44
Golden LivingCenter-Beaver Dam	BEAVER DAM	DODGE	33	120	44	250	93	111
Golden LivingCenter-Bradley	MILWAUKEE	MILWAUKEE	100	100	100	100	100	57
Golden LivingCenter-Colonial Manor	MILWAUKEE	MILWAUKEE	78	38	76	60	94	28
Golden LivingCenter-Continental Manor	ABBOTSFORD	MARATHON	33	50	25	100	60	83
Golden LivingCenter-Court Manor	ASHLAND	ASHLAND	10	0	17	0	27	100
Golden LivingCenter-Dorchester	STURGEON BAY	DOOR	0	33	0	70	23	89
Golden LivingCenter-Florence	FLORENCE	FLORENCE	29	100	0	NS	6	0
Golden LivingCenter-Fort Atkinson	FORT ATKINSON	JEFFERSON	13	0	40	0	36	122
Golden LivingCenter-Golden Age	TOMAHAWK	LINCOLN	20	11	38	0	16	114
Golden LivingCenter-Heritage Square	GREENDALE	MILWAUKEE	79	33	27	200	93	113
Golden LivingCenter-Kenosha	KENOSHA	KENOSHA	100	NS	100	171	188	209
Golden LivingCenter-Randolph	RANDOLPH	DODGE	40	57	25	50	52	56
Golden LivingCenter-Rib Lake	RIB LAKE	TAYLOR	25	0	20	0	56	75
Golden LivingCenter-Riverdale	MUSCODA	GRANT	100	100	100	100	100	100
Golden LivingCenter-Riverview	TOMAHAWK	LINCOLN	14	50	0	100	62	0
Golden LivingCenter-Sheboygan	SHEBOYGAN	SHEBOYGAN	17	100	0	NS	53	75
Golden LivingCenter-Silver Spring	GLENDALE	MILWAUKEE	67	100	50	30	30	71
Golden LivingCenter-South Shore	SAINT FRANCIS	MILWAUKEE	50	100	100	67	100	100
Golden LivingCenter-Superior	SUPERIOR	DOUGLAS	17	50	40	45	104	76
Golden LivingCenter-Three Oaks	MARSHFIELD	WOOD	50	33	67	67	39	46

APPENDIX B
2007 Staff Turnover in Nursing Facilities

Name	City	County	Full Time Registered Nurses	Part Time Registered Nurses	Full Time Licensed Pratical Nurses	Part Time Licensed Pratical Nurses	Full Time Nursing Assistants	Part Time Nursing Assistants
Golden LivingCenter-Valley of Hayward	HAYWARD	SAWYER	67	25	33	0	39	90
Golden LivingCenter-Village Gardens	GREEN BAY	BROWN	14	50	50	100	79	81
Golden LivingCenter-Watertown	WATERTOWN	DODGE	38	40	43	40	62	39
Golden LivingCenter-Wisconsin Dells	WISCONSIN DELLS	COLUMBIA	29	100	44	100	78	69
Golden Years Hlth Center	WALWORTH	WALWORTH	0	43	0	200	57	23
Golden Years Hlth Center	WALWORTH	WALWORTH	0	43	0	200	57	23
Good Samaritan Society-Fennimore	FENNIMORE	GRANT	100	NS	100	100	100	100
Good Samaritan Society-Lodi	LODI	COLUMBIA	14	33	67	40	50	38
Good Samaritan Society-Scandia Village	SISTER BAY	DOOR	17	17	33	0	59	10
Good Samaritan Society-St Croix Valley	ST CROIX FALLS	POLK	100	NS	100	100	100	100
Good Shepherd Services Inc	SEYMOUR	OUTAGAMIE	19	17	0	14	43	20
Grancare Nursing And Rehab Center	FOND DU LAC	FOND DU LAC	50	33	67	100	68	133
Grancare Nursing Center	GREEN BAY	BROWN	63	100	0	133	111	63
Grand View Care Center Inc	BLAIR	TREMPEALEAU	0	33	25	43	17	57
Center	PLEASANT PRAIRIE	KENOSHA	79	44	50	100	21	158
Grays Nursing Home	PLATTEVILLE	GRANT	0	17	100	60	200	22
Greentree Health And Rehab Center	CLINTONVILLE	WAUPACA	0	NS	0	100	44	71
Greenway Manor	SPRING GREEN	SAUK	25	67	0	0	19	150
Hales Corners Care Center	HALES CORNERS	MILWAUKEE	29	55	22	83	46	77
Hamilton Memorial Home	TWO RIVERS	MANITOWOC	55	80	0	25	7	44
Hayward Nursing Home	HAYWARD	SAWYER	50	63	67	0	25	100
Heartland Country Village	BLACK EARTH	DANE	50	33	0	25	33	43
Heartland HCC Pewaukee	WAUKESHA	WAUKESHA	114	50	31	50	83	47
Heartland HCC Platteville	PLATTEVILLE	GRANT	67	0	38	40	70	61
Heartland HCC Washington Manor	KENOSHA	KENOSHA	71	100	56	50	62	63
Heritage Manor	RICE LAKE	BARRON	10	NS	13	50	16	50
Heritage Manor	ELROY	JUNEAU	13	0	0	20	32	93
Heritage Nursing and Rehabilitation Center	WASHINGTON	OZAUKEE	67	63	40	80	105	67
Heritage Of Elmwood Nursing Home	ELMWOOD	PIERCE	33	50	20	25	43	71
Hetzel Care Center Inc	BLOOMER	CHIPPEWA	0	300	100	100	60	68
Highland Heights Healthcare Center	MILWAUKEE	MILWAUKEE	60	67	38	86	100	69
Highlands At Newcastle Place	MEQUON	OZAUKEE	0	25	11	25	45	30
Hillside Manor	BEAVER DAM	DODGE	31	100	44	50	29	53
Hillview Health Care Center	LA CROSSE	LA CROSSE	10	9	0	43	13	37
Holton Manor	ELKHORN	WALWORTH	20	NS	50	100	16	75
Homestead Care Center, LLC	NEW HOLSTEIN	CALUMET	40	25	25	50	15	43
Homme Home For The Aging	WITTENBERG	SHAWANO	33	22	0	44	30	45
Hope Health And Rehabilitation	LOMIRA	DODGE	50	NS	0	25	82	220
Hospitality Nursing Rehabilitation Center	KENOSHA	KENOSHA	56	25	100	31	78	162
Ingleside Nursing Home	MOUNT HOREB	DANE	13	22	0	30	92	29

APPENDIX B
2007 Staff Turnover in Nursing Facilities

Name	City	County	Full Time Registered Nurses	Part Time Registered Nurses	Full Time Licensed Pratical Nurses	Part Time Licensed Pratical Nurses	Full Time Nursing Assistants	Part Time Nursing Assistants
Iola Living Assistance	IOLA	WAUPACA	0	36	0	67	31	67
Jewish Home And Care Center	MILWAUKEE	MILWAUKEE	57	78	52	55	16	32
Juliette Manor	BERLIN	GREEN LAKE	0	50	NS	14	9	34
Karmenta Center	MADISON	DANE	50	67	42	57	126	146
Kennedy Park Medical And Rehabilitation	SCHOFIELD	MARATHON	24	13	29	43	30	35
Kewaunee Care Center	KEWAUNEE	KEWAUNEE	25	25	29	33	16	45
Kinnic Long Term Care	RIVER FALLS	PIERCE	0	33	0	75	43	55
Kiwanis Manor Inc	EAST TROY	WALWORTH	33	50	17	0	130	314
Knapp Haven Nursing Home	CHETEK	BARRON	0	13	0	29	30	42
L O Simenstad Nursing Care Unit	OSCEOLA	POLK	100	40	25	150	150	140
La Crosse Nursing Home	LA CROSSE	LA CROSSE	0	33	NS	50	0	30
Ladysmith Nursing Home	LADYSMITH	RUSK	14	0	20	100	52	160
Lafayette Manor	DARLINGTON	LAFAYETTE	17	0	0	33	0	38
Lakeland Health Care Center	ELKHORN	WALWORTH	10	67	0	33	0	32
Lakeview Health Center	WEST SALEM	LA CROSSE	6	13	8	0	18	31
Lakeview Manor	WEYAUWEGA	WAUPACA	0	15	0	38	0	11
Lancaster Care Center	LANCASTER	GRANT	25	0	0	33	6	45
Lasata Care Center	CEDARBURG	OZAUKEE	16	63	40	33	50	63
Ledge View Nursing Center Inc	DE PERE	BROWN	0	100	0	50	0	67
Lincoln Village Convalescent Center	RACINE	RACINE	80	133	75	75	23	74
Lindengrove Menomonee Falls	FALLS	WAUKESHA	47	43	47	80	63	44
Lindengrove Mukwonago	MUKWONAGO	WAUKESHA	50	33	20	50	23	73
Lindengrove New Berlin	NEW BERLIN	WAUKESHA	20	22	7	86	58	98
Lindengrove Waukesha	WAUKESHA	WAUKESHA	21	67	67	60	48	61
Luther Home	MARINETTE	MARINETTE	13	55	0	20	10	52
Luther Manor	MILWAUKEE	MILWAUKEE	12	20	31	28	29	50
Health System	BLOOMER	CHIPPEWA	0	0	0	0	13	25
System	BARRON	BARRON	0	0	0	100	0	64
System	OSSEO	TREMPEALEAU	0	0	0	50	0	14
Lutheran Home	WAUWATOSA	MILWAUKEE	100	250	0	140	71	100
Lutheran Home River Falls	RIVER FALLS	PIERCE	0	0	0	33	24	163
Manawa Community Nursing Center	MANAWA	WAUPACA	33	67	0	25	23	133
Manitowoc Health Care Center	MANITOWOC	MANITOWOC	13	NS	0	0	0	13
Manorcare Health Services	FOND DU LAC	FOND DU LAC	63	13	13	57	31	45
Manorcare Health Services	APPLETON	OUTAGAMIE	120	200	14	50	28	100
Manorcare Health Services East	GREEN BAY	BROWN	29	100	20	NS	55	60
Manorcare Health Services West	GREEN BAY	BROWN	50	NS	27	100	44	114
ManorCare Health Services-Shawano	SHAWANO	SHAWANO	80	NS	27	0	59	50
Maple Lane Health Care Center	SHAWANO	SHAWANO	33	20	0	25	4	58
Center	MILWAUKEE	MILWAUKEE	114	400	80	140	130	217

APPENDIX B
2007 Staff Turnover in Nursing Facilities

Name	City	County	Full Time Registered Nurses	Part Time Registered Nurses	Full Time Licensed Pratical Nurses	Part Time Licensed Pratical Nurses	Full Time Nursing Assistants	Part Time Nursing Assistants
Maplewood Center	WEST ALLIS	MILWAUKEE	13	39	25	50	19	27
Maplewood of Sauk Prairie	SAUK CITY	SAUK	0	0	NS	8	36	36
Marinuka Manor	GALESVILLE	TREMPEALEAU	33	60	0	14	7	39
Markesan Resident Home Inc	MARKESAN	GREEN LAKE	33	83	33	50	27	21
Marquardt Memorial Manor	WATERTOWN	DODGE	0	10	0	9	15	18
Marshfield Care Center, LLC	MARSHFIELD	WOOD	8	27	0	25	26	31
Mary Jude Nursing Home	WEST ALLIS	MILWAUKEE	67	80	50	40	0	113
Maryhill Manor Inc	NIAGARA	MARINETTE	20	20	67	67	0	67
Marywood Convalescent Center	WAUSAU	MARATHON	18	44	0	25	28	55
Masonic Health Care Center	DOUSMAN	WAUKESHA	25	18	0	15	62	30
Mayville Nursing Rehabilitation Center	MAYVILLE	DODGE	100	100	100	100	100	100
Meadow View Manor	SHEBOYGAN	SHEBOYGAN	25	0	67	50	30	48
Mellen Manor	MELLEN	ASHLAND	50	33	0	67	50	75
Memorial Nursing And Rehabilitation Center	MEDFORD	TAYLOR	0	0	0	33	12	40
Memorial Nursing Home	BOSCOBEL	GRANT	25	0	0	33	17	0
Menomonee Falls Health Care Center	FALLS	WAUKESHA	67	33	44	22	133	100
Mercy Manor Transition Center	JANESVILLE	ROCK	100	100	NS	100	100	100
Mercy Medical Center Subacute	OSHKOSH	WINNEBAGO	NS	10	NS	0	NS	80
Mercy Residential and Rehabilitation Center	MILWAUKEE	MILWAUKEE	0	0	14	60	7	37
Meriter Health Center	MADISON	DANE	20	0	0	38	33	77
Middle River HCC	SOUTH RANGE	DOUGLAS	0	11	0	11	0	65
Middleton Village Nursing and Rehabilitation	MIDDLETON	DANE	167	100	129	200	58	200
Millway Care Center	MILWAUKEE	MILWAUKEE	67	100	50	70	51	55
Milwaukee Catholic Home	MILWAUKEE	MILWAUKEE	0	36	0	21	24	19
Rehabilitation Central	MILWAUKEE	MILWAUKEE	14	13	0	0	3	42
Mineral Point Care Center	MINERAL POINT	IOWA	25	11	50	38	33	42
Mitchell Manor	WEST ALLIS	MILWAUKEE	67	50	0	92	37	77
Monroe Manor Nursing And Rehabilitation	MONROE	GREEN	100	100	57	25	72	150
Montello Care Center	MONTELLO	MARQUETTE	0	200	0	NS	43	14
Morningside Health Center	SHEBOYGAN	SHEBOYGAN	0	0	100	25	25	22
Morrow Memorial Home	SPARTA	MONROE	20	23	29	86	4	35
Moundview Memorial Extended Care	FRIENDSHIP	ADAMS	0	0	33	50	0	40
Mount Carmel Health And Rehabilitation	MILWAUKEE	MILWAUKEE	21	28	38	35	90	55
Mount Carmel Medical And Rehabilitation	BURLINGTON	RACINE	55	40	89	60	96	276
Mulder Health Care Facility	WEST SALEM	LA CROSSE	17	14	20	50	40	38
Muskego Health Care Center	MUSKEGO	WAUKESHA	20	150	NS	56	94	143
Nazareth Health and Rehabilitation Center	STOUGHTON	DANE	100	100	100	100	100	100
Neillsville Memorial Home	NEILLSVILLE	CLARK	22	NS	0	0	16	52
New Glarus Home Inc	NEW GLARUS	GREEN	0	38	0	33	0	75
New Richmond Meadows	NEW RICHMOND	SAINT CROIX	0	100	100	40	0	29

APPENDIX B
2007 Staff Turnover in Nursing Facilities

Name	City	County	Full Time Registered Nurses	Part Time Registered Nurses	Full Time Licensed Pratical Nurses	Part Time Licensed Pratical Nurses	Full Time Nursing Assistants	Part Time Nursing Assistants
Newcare Inc	CRIVITZ	MARINETTE	0	125	17	60	31	80
Norseland Nursing Home	WESTBY	VERNON	0	0	0	14	31	67
North Central Health Care	WAUSAU	MARATHON	33	23	400	17	87	33
Center	MANITOWOC	MANITOWOC	0	100	10	0	11	14
Northern Lights HCC	WASHBURN	BAYFIELD	20	27	0	75	19	35
Northpoint Medical and Rehabilitation Center	OSHKOSH	WINNEBAGO	183	67	54	150	82	109
Norwood HC Central	MARSHFIELD	WOOD	0	NS	0	NS	0	0
Norwood Health Center-Pathways	MARSHFIELD	WOOD	0	NS	0	NS	0	40
Nu Roc Community Healthcare Inc	LAONA	FOREST	60	50	33	0	46	55
Oak Park Nursing and Rehabilitation Center	MADISON	DANE	300	56	71	109	113	141
Oak Ridge Care Center	UNION GROVE	RACINE	33	0	100	250	89	186
Oakbrook Health And Rehabilitation	THORP	CLARK	20	0	17	0	22	50
Oakridge Gardens Nursing Center	MENASHA	WINNEBAGO	10	40	18	0	47	54
Oakview Care Center	DURAND	PEPIN	20	NS	0	0	8	20
Oakwood Lutheran Home Hebron Oaks	MADISON	DANE	54	26	33	69	35	85
Oakwood Villa	ALTOONA	EAU CLAIRE	70	100	25	36	56	88
Odd Fellow Home	GREEN BAY	BROWN	17	0	0	33	11	61
Omro Healthcare, LLC	OMRO	WINNEBAGO	58	50	50	40	30	78
Onalaska Care Center	ONALASKA	LA CROSSE	0	22	0	21	0	48
Orchard Manor	LANCASTER	GRANT	0	21	NS	20	0	32
Oregon Manor Ltd	OREGON	DANE	67	200	100	33	53	62
Palmer Center	WEST ALLIS	MILWAUKEE	0	0	0	0	20	0
Park Manor Ltd	PARK FALLS	PRICE	10	14	0	50	20	37
Park View Health Center	OSHKOSH	WINNEBAGO	0	29	0	0	0	50
Park View Healthcare Rehabilitation Pavillion	OSHKOSH	WINNEBAGO	0	0	0	17	0	78
Park View Home	WOODVILLE	SAINT CROIX	50	100	20	0	53	93
Parkside Care Center	LITTLE CHUTE	OUTAGAMIE	50	25	60	33	35	38
Parkview Manor Healthcare, LLC	GREEN BAY	BROWN	122	83	40	200	29	94
Peabody Manor Inc	APPLETON	OUTAGAMIE	0	33	0	64	25	35
Pepin Manor	PEPIN	PEPIN	100	100	100	100	100	100
Pigeon Falls HCC	PIGEON FALLS	TREMPEALEAU	0	0	0	NS	23	83
Pine Crest Nursing Home	MERRILL	LINCOLN	9	6	0	100	0	38
Pine Haven Christian Home	SHEBOYGAN FALLS	SHEBOYGAN	0	20	0	25	40	42
Pine Manor HCC	CLINTONVILLE	WAUPACA	20	50	25	100	53	156
Pine Valley Health Care Rehabilitation	RICHLAND CENTER	RICHLAND	0	0	0	20	0	50
Pine View Care Center	FALLS	JACKSON	120	100	150	50	89	67
Pioneer Nursing Home	PRAIRIE FARM	BARRON	0	200	100	150	53	77
Pleasant View Nursing Home	MONROE	GREEN	11	18	0	50	3	55
Plum City Care Center	PLUM CITY	PIERCE	0	25	NS	13	33	72
Plymouth Care Center	PLYMOUTH	SHEBOYGAN	40	17	0	40	33	64

APPENDIX B
2007 Staff Turnover in Nursing Facilities

Name	City	County	Full Time Registered Nurses	Part Time Registered Nurses	Full Time Licensed Pratical Nurses	Part Time Licensed Pratical Nurses	Full Time Nursing Assistants	Part Time Nursing Assistants
Portage County Health Care Center	STEVENS POINT	PORTAGE	0	27	0	40	0	38
Prairie Maison	PRAIRIE DU CHIEN	CRAWFORD	0	100	0	43	11	38
Premier Rehabilitation Skilled Nursing	BELOIT	ROCK	20	57	0	30	56	31
Community	PRESCOTT	PIERCE	0	57	50	55	14	56
Rennes Health Center Appleton	APPLETON	OUTAGAMIE	38	33	60	50	37	50
Rennes Health Center Depere	DE PERE	BROWN	23	25	38	25	24	31
Rennes Health Center East	PESHTIGO	MARINETTE	0	31	0	24	9	57
Rennes Health Center West	PESHTIGO	MARINETTE	0	33	0	38	0	54
Rest Haven Health Care Center	VERONA	DANE	0	100	67	300	0	160
Rice Lake Convalescent Center	RICE LAKE	BARRON	50	50	33	25	51	50
Ridgeview Terrace Long Term Care	REEDSBURG	SAUK	0	100	33	0	38	29
Ridgewood Care Center	RACINE	RACINE	13	11	43	50	0	84
River Hills West Health Care Center	PEWAUKEE	WAUKESHA	18	20	0	0	57	182
Rivers Bend Health Rehabilitation	MANITOWOC	MANITOWOC	69	57	86	150	79	105
Rock Haven	JANESVILLE	ROCK	NS	6	0	25	4	8
Rocky Knoll Health Care Facility	PLYMOUTH	SHEBOYGAN	0	13	0	10	0	13
Rolling Hills RehabilitationCenter	SPARTA	MONROE	63	75	0	117	14	96
Rolling Meadows Nursing and Rehabilitation	FOND DU LAC	FOND DU LAC	NS	0	0	0	0	7
Home	LADYSMITH	RUSK	0	0	0	50	12	38
Samaritan Health Center	WEST BEND	WASHINGTON	0	NS	5	38	27	19
Samaritan's Cedar Crossing Subacute Unit	WEST BEND	WASHINGTON	0	50	NS	67	33	167
San Luis Medical And Rehabilitation	GREEN BAY	BROWN	120	33	78	400	88	40
Sannes Skogdalen Heim	SOLDIERS GROVE	CRAWFORD	0	125	0	50	0	52
Santa Maria Nursing Home Inc	GREEN BAY	BROWN	20	100	0	100	6	57
Sarah Chudnow Campus	MEQUON	OZAUKEE	17	NS	0	200	67	129
Sauk County Health Care Center	REEDSBURG	SAUK	0	22	0	0	0	74
Schmitt Woodland Hills Inc	RICHLAND CENTER	RICHLAND	0	43	NS	NS	100	78
Seven Oaks	GLENDALE	MILWAUKEE	33	38	0	33	8	43
Shady Lane Nursing Care Center	MANITOWOC	MANITOWOC	15	13	50	25	38	39
Sharpe Care	OCONTO FALLS	OCONTO	0	44	0	14	43	60
Sheboygan Progressive Care Center	SHEBOYGAN	SHEBOYGAN	11	100	25	14	36	31
Sheboygan Senior Community Inc	SHEBOYGAN	SHEBOYGAN	25	31	100	20	47	90
Sheridan Medical Complex	KENOSHA	KENOSHA	67	100	60	40	79	67
Shorehaven Health & Rehabilitation Center	OCONOMOWOC	WAUKESHA	0	13	0	0	11	22
Skaalen Sunset Home Inc	STOUGHTON	DANE	9	0	20	41	26	22
Sky View Nursing Center	HURLEY	IRON	0	NS	0	60	29	60
Southpointe Healthcare Center	GREENFIELD	MILWAUKEE	38	43	133	58	29	86
Southwest Health Center	CUBA CITY	GRANT	0	10	0	0	25	37
Spooner Health System	SPOONER	WASHBURN	13	0	0	22	0	114
Spring Valley HCC	SPRING VALLEY	PIERCE	0	0	20	20	13	43

APPENDIX B
2007 Staff Turnover in Nursing Facilities

Name	City	County	Full Time Registered Nurses	Part Time Registered Nurses	Full Time Licensed Pratical Nurses	Part Time Licensed Pratical Nurses	Full Time Nursing Assistants	Part Time Nursing Assistants
St Annes Home For The Elderly	MILWAUKEE	MILWAUKEE	0	30	0	70	23	69
St Anns Rest Home	MILWAUKEE	MILWAUKEE	0	0	20	100	20	100
St Camillus Health Center	WAUWATOSA	MILWAUKEE	25	50	14	44	11	0
St Clare Meadows Care Center	BARABOO	SAUK	0	7	NS	20	0	45
St Croix Health Center	NEW RICHMOND	SAINT CROIX	0	70	0	67	0	57
St Dominic Villa	HAZEL GREEN	GRANT	25	0	0	0	30	15
St Elizabeths Nursing Home	JANESVILLE	ROCK	0	50	67	100	150	31
St Francis Home	FOND DU LAC	FOND DU LAC	0	10	0	9	23	43
Rehabilitation Center	SUPERIOR	DOUGLAS	50	58	0	29	9	81
St Johns on the Lake	MILWAUKEE	MILWAUKEE	0	25	25	25	8	30
St Joseph Residence	NEW LONDON	WAUPACA	38	67	40	0	56	70
St Josephs Home	KENOSHA	KENOSHA	30	20	0	43	57	78
St Josephs Nursing Home	HILLSBORO	VERNON	33	0	0	0	18	42
St Josephs Rehabilitation Center	LA CROSSE	LA CROSSE	55	100	0	33	58	53
St Marys Care Center	MADISON	DANE	38	27	100	29	42	62
St Marys Home For The Aged	MANITOWOC	MANITOWOC	0	0	14	33	2	64
St Michaels Lutheran Home	FOUNTAIN CITY	BUFFALO	0	NS	33	60	36	214
St Paul Elder Services, Inc	KAUKAUNA	OUTAGAMIE	0	38	NS	29	11	45
Stevens Point Care Center	STEVENS POINT	PORTAGE	25	33	38	70	16	32
Center	RAPIDS	WOOD	11	25	17	50	15	81
Sun Prairie Health Care Center	SUN PRAIRIE	DANE	0	0	0	20	0	32
Sunny Hill Health Care Center	MADISON	DANE	17	40	25	44	67	61
Sunny Ridge Health and Rehabilitation Center	SHEBOYGAN	SHEBOYGAN	29	63	27	33	42	114
Sunnyview Health Care Center	PRINCETON	GREEN LAKE	0	NS	33	0	17	67
Sunrise Care Center Inc	MILWAUKEE	MILWAUKEE	100	100	100	100	100	100
Syverson Lutheran Home	EAU CLAIRE	EAU CLAIRE	23	0	0	62	49	91
Taylor Park Nursing and Rehabilitation Center	RHINELANDER	ONEIDA	75	44	50	0	35	23
Terraceview Living Center, Inc	SHELL LAKE	WASHBURN	0	25	33	14	50	50
THI of Wisconsin at Hartford LLC	HARTFORD	WASHINGTON	80	175	20	57	62	86
Tomah Health Care Center	TOMAH	MONROE	0	100	40	100	65	86
Transitional Care Unit	FOND DU LAC	FOND DU LAC	33	0	0	17	0	44
Trempealeau County HCC IMD	WHITEHALL	TREMPEALEAU	0	0	0	NS	13	120
Tri County Memorial Nursing Home	WHITEHALL	TREMPEALEAU	0	NS	33	0	23	90
Trinity Village	MILWAUKEE	MILWAUKEE	33	114	0	67	60	19
Tudor Oaks Health Center	MUSKEGO	WAUKESHA	44	NS	0	100	0	59
United Pioneer Home Inc	LUCK	POLK	0	63	100	25	88	122
Upland Hills Nursing and Rehabilitation	DODGEVILLE	IOWA	0	0	NS	17	33	22
Vallhaven Care Center	NEENAH	WINNEBAGO	27	100	13	167	85	81
Vernon Manor	VIROQUA	VERNON	0	43	29	75	15	52
Villa Loretto Nursing Home	MOUNT CALVARY	FOND DU LAC	0	0	NS	20	40	30

APPENDIX B
2007 Staff Turnover in Nursing Facilities

Name	City	County	Full Time Registered Nurses	Part Time Registered Nurses	Full Time Licensed Pratical Nurses	Part Time Licensed Pratical Nurses	Full Time Nursing Assistants	Part Time Nursing Assistants
Villa Maria Health Rehabilitation Center	HURLEY	IRON	17	NS	29	0	38	NS
Villa Marina Health Rehabilitation	SUPERIOR	DOUGLAS	25	0	0	17	11	50
Villa Pines Living Center	FRIENDSHIP	ADAMS	43	57	0	0	71	60
Virginia Health and Rehabilitation Center	WAUKESHA	WAUKESHA	17	50	17	0	57	47
Virginia Highlands Health Rehabilitation	GERMANTOWN	WASHINGTON	257	133	108	136	113	111
Center	WAUKESHA	WAUKESHA	33	75	59	60	72	45
Waunakee Manor Health Care Center	WAUNAKEE	DANE	17	67	0	50	58	46
Wausau Manor	WAUSAU	MARATHON	50	33	40	0	38	40
Weyauwega Health Care Center	WEYAUWEGA	WAUPACA	56	200	0	60	111	153
Wheaton Franciscan HC - Franciscan Woods	BROOKFIELD	WAUKESHA	0	20	0	28	57	58
Wheaton Franciscan HC - Lakeshore Manor	RACINE	RACINE	17	8	NS	40	50	66
Center, Inc	MILWAUKEE	MILWAUKEE	19	20	41	50	51	73
St Francis, Inc.	MILWAUKEE	MILWAUKEE	0	71	33	86	44	47
Whispering Oaks Care Center	PESHTIGO	MARINETTE	100	75	0	80	71	300
WI Veterans Home Ainsworth 800	KING	WAUPACA	0	19	2	40	0	66
WI Veterans Home MacArthur 422	KING	WAUPACA	0	19	2	40	0	66
WI Veterans Home Olson 600	KING	WAUPACA	0	19	2	40	0	66
WI Veterans Home Stordock 700	KING	WAUPACA	0	19	2	40	0	66
Wi Veterans Home-Boland Hall	UNION GROVE	RACINE	114	186	40	80	71	104
Wild Rose Manor	WILD ROSE	WAUSHARA	67	50	150	25	40	50
Williams Bay Care Center	WILLIAMS BAY	WALWORTH	0	27	33	43	22	40
Willow Ridge Healthcare	AMERY	POLK	20	300	0	67	48	73
Willowbrook Nursing and Rehabilitation	LAKE MILLS	JEFFERSON	17	0	20	0	39	40
Willowcrest Care Center	MILWAUKEE	MILWAUKEE	50	45	27	80	61	85
Willowdale Nursing and Rehabilitation Center	NEW HOLSTEIN	CALUMET	0	50	0	0	33	67
Willowfield Nursing and Rehabilitation	DELAVAN	WALWORTH	40	20	50	NS	100	120
Willows Nursing and Rehabilitation	SUN PRAIRIE	DANE	100	NS	38	100	106	188
Wisconsin Lutheran Care Center	MILWAUKEE	MILWAUKEE	50	86	67	81	28	16
Wisconsin Rapids Care Center	RAPIDS	WOOD	13	50	0	38	3	79
Wissota Health and Regional Vent Center	CHIPPEWA FALLS	CHIPPEWA	85	100	80	106	120	117
Woodland Village Nursing Home	SURING	OCONTO	0	NS	25	100	39	63
Woodlands Of Gillett	GILLETT	OCONTO	33	0	0	0	63	50
Woodlands Of Oconto	OCONTO	OCONTO	150	200	50	100	83	140
Woods Crossing At Woods Point	BRODHEAD	GREEN	0	14	NS	43	100	50
Woodside Lutheran Home	GREEN BAY	BROWN	40	22	0	18	0	35
Woodstock Health and Rehabilitation	KENOSHA	KENOSHA	58	75	33	47	35	94

APPENDIX B

2007 Staff Turnover Rates in Intermediate Care Facilities for the Mentally Retarded

Name	City	County	Full Time Registered Nurses	Part Time Registered Nurses	Full Time Licensed Pratical Nurses	Part Time Licensed Pratical Nurses	Full Time Nursing Assistants	Part Time Nursing Assistants
Bethesda LHS Clara Werner FDD	WATERTOWN	Jefferson	NS	NS	0	33	0	0
Bethesda LHS Dierker Olson FDD	WATERTOWN	Jefferson	0	0	0	0	32	23
Central WI Center FDD	MADISON	Dane	23	32	29	24	28	25
Clark County Health Care Center FDD	OWEN	Clark	0	NS	0	50	11	14
Clearview Fdd	JUNEAU	Dodge	0	0	0	0	3	0
Lakeview Health Center FDD	WEST SALEM	LaCrosse	NS	NS	0	100	14	71
Maple Lane Health Care Center FDD	SHAWANO	Shawano	33	20	0	25	4	58
McCarthy Nursing Home FDD	STOUGHTON	Dane	0	0	NS	0	0	0
Milwaukee County MHC FDD	WAUWATOSA	Milwaukee	0	27	0	32	11	53
Northern WI Center FDD	CHIPPEWA FALLS	Chippewa	67	0	0	0	5	NS
Norwood Health Center Fdd	MARSHFIELD	Wood	0	NS	NS	0	0	20
Orchard Manor FDD	LANCASTER	Grant	0	21	NS	20	0	32
Pine Manor HCC FDD	CLINTONVILLE	Waupaca	20	50	25	100	53	156
Racine Residential Care FDD	RACINE	Racine	0	0	0	33	22	100
Rolling Hills Rehabilitation Center FDD	SPARTA	Monroe	63	75	0	117	14	96
Sheltered Village Of Ripon FDD	RIPON	Fond du Lac	NS	NS	NS	100	93	NS
Southern WI Center FDD	UNION GROVE	Racine	4	25	38	0	23	0
St Coletta of Wisconsin Inc Alverno FDD	JEFFERSON	Jefferson	0	NS	0	FDD	20	29
Trempealeau County HCC FDD	WHITEHALL	Trempealeau	0	0	0	NS	6	80