

## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

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 33.00 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 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** 113th (0020091)

**Address:** 4127 113th St, Chippewa Falls, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 02/01/2024 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0145602      **End Date:** 02/13/2024      **Type:** INITIAL      **Purpose:** CHOW--DESK REVIEW

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

**This is Page 2 of 33 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 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** 203rd (0019849)

**Address:** 7338 203rd St, Chippewa Falls, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 02/01/2024 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0145609      **End Date:** 02/14/2024      **Type:** INITIAL      **Purpose:** CHOW--DESK REVIEW

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

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** ACE FAMILY HOMES LLC 11658 SIDE (0017392)

**Address:** 11658 40TH AVE, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 06/19/2019 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0146908    **End Date:** 07/08/2024    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #RKSBB11    Served 07/10/2024

Deficiencies Cited

50.065(2)(bb)

50.065(4m)(c)

Subject Area

DETERMINE FINAL DISPOSITION OF CHARGE

COMPLETE BACKGROUND INFORMATION

DISCLOSURE FORM

Compliance

Verified

Corrected

### Enforcement History (ACE FAMILY HOMES LLC 11658 SIDE--0017392)

**Date:** 07/10/2024

**SOD #**RKSBB11

**Appealed:** No

Sanctions

ORDER TO COMPLY

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** ACE FAMILY HOMES LLC 11660 SIDE (0017391)

**Address:** 11660 40TH AVE, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 06/19/2019 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0146892      **End Date:** 07/08/2024      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** AURORA RESIDENTIAL ALTERNATIVES INC 044 (0014113)

**Address:** 6939 CO HWY T, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 04/03/2012 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

No survey activity during the period 1/21/22 to 1/20/25

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** BEACON SPECIALIZED LIVING CHIPPEWA FALLS (0018620)

**Address:** 3355 120TH ST, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 09/15/2021 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0148303    **End Date:** 10/16/2024    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #KA3E11    Served 12/12/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(2)(d)	COPY OF RULES AVAILABLE		
88.04(2)(f)	CONDITION WHICH REPRESENTS RISK OR HARM		
88.04(5)(a)	TRAINING-15 HOURS WITHIN 6 MONTHS		
88.06(3)(a)	INDIVIDUAL SERVICE PLAN & ASSESSMENT		
88.06(3)(d)5	SIGNED STATEMENT OF AGREEMENT		

**Survey ID:** 0143888    **End Date:** 08/08/2023    **Type:** STANDARD    **Purpose:** SURVEY/COMPLAINT

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #YQN511    Served 08/09/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(2)(bm)	OUT OF STATE BACKGROUND CHECKS	10/13/23	

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

Survey ID: 0140961 End Date: 10/05/2022 Type: OTHER Purpose: COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

### Enforcement History (BEACON SPECIALIZED LIVING CHIPPEWA FALLS--0018620)

Date: 12/12/2024 SOD #KA3E11 Appealed: No

#### Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION  
ORDER TO COMPLY

### Complaint History (BEACON SPECIALIZED LIVING CHIPPEWA FALLS--0018620)

Date Complaint Received: 08/27/2024 Date Investigation Completed: 10/16/2024

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
PROGRAM SERVICES	SUBSTANTIATED	KA3E11

Date Complaint Received: 05/31/2023 Date Investigation Completed: 08/08/2023

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
RESIDENT RIGHTS	NOT SUBSTANTIATED	

Date Complaint Received: 07/28/2022 Date Investigation Completed: 10/05/2022

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

Date Complaint Received: 06/01/2022 Date Investigation Completed: 10/05/2022

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
PROGRAM SERVICES	NOT SUBSTANTIATED	

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** BEACON SPECIALIZED LIVING LAKE HALLIE (0018621)

**Address:** 11250 27TH AVE, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 09/15/2021 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0142921      **End Date:** 04/27/2023      **Type:** STANDARD      **Purpose:** SURVEY/COMPLAINT

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #15T711      Served 04/28/2023

Deficiencies Cited  
88.05(3)(d)

Subject Area  
ANNUAL WELL WATER INSPECTIONS

Compliance  
Verified  
6/12/23

Corrected

**Survey ID:** 0141889      **End Date:** 01/12/2023      **Type:** OTHER      **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Complaint History (BEACON SPECIALIZED LIVING LAKE HALLIE--0018621)

**Date Complaint Received:** 03/20/2023

**Date Investigation Completed:** 04/27/2023

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

NOT SUBSTANTIATED

**Date Complaint Received:** 12/15/2022

**Date Investigation Completed:** 01/12/2023

Subject Area(s)

Result

SOD #

ADMINISTRATION

NOT SUBSTANTIATED

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** DACHEL ADULT FAMILY HOME (0018356)

**Address:** 633 WOODWARD AVENUE, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 02/17/2021 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

No survey activity during the period 1/21/22 to 1/20/25

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** EZ View Group Home 4 (0020687)

**Address:** 12022 125th St, Chippewa Falls, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 12/11/2024 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0148304      **End Date:** 12/11/2024      **Type:** INITIAL      **Purpose:** SURVEY

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

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** EZ View Group Home 5 (0020690)

**Address:** 12058 125th St, Chippewa Falls, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 12/11/2024 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0148310      **End Date:** 12/11/2024      **Type:** INITIAL      **Purpose:** SURVEY

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

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** FORSTER AFH (0015009)

**Address:** 21 WELL STREET, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 03/28/2014 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0142389      **End Date:** 03/02/2023      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** GUDMANSON AFH (0016548)

**Address:** 620 SUPERIOR STREET, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 04/10/2017 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0147532      **End Date:** 09/05/2024      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** IMPECKABLE CARE INC (0014780)

**Address:** 19082 40TH AVENUE, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 11/14/2013 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0142064      **End Date:** 01/25/2023      **Type:** ABBREVIATED      **Purpose:** SURVEY/COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

### Complaint History (IMPECKABLE CARE INC--0014780)

**Date Complaint Received:** 11/02/2022

**Date Investigation Completed:** 01/25/2023

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

NOT SUBSTANTIATED

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** INDEPENDENT OUTLOOK 1 (0015607)

**Address:** 5093 160TH STREET, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 05/31/2015 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0148369      **End Date:** 12/17/2024      **Type:** OTHER      **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0144943      **End Date:** 11/28/2023      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

### Complaint History (INDEPENDENT OUTLOOK 1--0015607)

**Date Complaint Received:** 09/16/2024

**Date Investigation Completed:** 12/17/2024

Subject Area(s)

Result

SOD #

PHYSICAL ENVIRONMENT/SAFETY

NOT SUBSTANTIATED

PROGRAM SERVICES

NOT SUBSTANTIATED

RESIDENT RIGHTS

NOT SUBSTANTIATED

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** INDEPENDENT OUTLOOK 2 (0015608)

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

**License Status:** REGULAR

**Licensed/Certified/Registered** 06/01/2015 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0143431      **End Date:** 06/21/2023      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** INDEPENDENT OUTLOOK 3 (0015609)

**Address:** 5034 174TH STREET, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 06/01/2015 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0144944      **End Date:** 11/28/2023      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** MAKE A DIFFERENCE HOMES 16107 CTY HWY OO (0015840)

**Address:** 16107 CTY HWY OO, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/15/2015 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0140971      **End Date:** 08/01/2022      **Type:** OTHER      **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** MAKE A DIFFERENCE HOMES 4133 130TH ST (0016491)

**Address:** 4133 130TH ST, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 02/15/2017 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0138597      **End Date:** 01/31/2022      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

### Survey History

No survey activity during the period 1/21/22 to 1/20/25

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** MAKE A DIFFERENCE HOMES 4135 130TH ST (0016492)

**Address:** 4135 130TH ST, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 03/15/2017 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0138596      **End Date:** 01/31/2022      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

### Survey History

No survey activity during the period 1/21/22 to 1/20/25

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** MAKE A DIFFERENCE HOMES 4320 132ND ST (0015309)

**Address:** 4320 132ND STREET, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/09/2014 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0138594      **End Date:** 01/31/2022      **Type:** ABBREVIATED      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

### Survey History

No survey activity during the period 1/21/22 to 1/20/25

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** MAKE A DIFFERENCE HOMES BRIDGEWATER (0014678)

**Address:** 434 BRIDGEWATER AVE, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 07/15/2013 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0140334    **End Date:** 07/28/2022    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0139370    **End Date:** 02/04/2022    **Type:** ABBREVIATED    **Purpose:** SURVEY/COMPLAINT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #V5UV11    Served 04/27/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(2)(f)	CONDITION WHICH REPRESENTS RISK OR HARM	7/28/22	Yes
88.08	TERMINATION OF PLACEMENT	7/28/22	Yes

### Enforcement History (MAKE A DIFFERENCE HOMES BRIDGEWATER--0014678)

**Date:** 04/27/2022    **SOD #**V5UV11    **Appealed:** No

#### Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION  
ORDER TO COMPLY

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** MAKE A DIFFERENCE HOMES LLC (0014333)

**Address:** 4322 132ND STREET, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/01/2012 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0143427      **End Date:** 06/20/2023      **Type:** OTHER      **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** SECOND SPRINGS AFH (0014049)

**Address:** 5472 178TH STREET, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 02/01/2013 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0144495      **End Date:** 10/10/2023      **Type:** OTHER      **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0143283      **End Date:** 03/31/2023      **Type:** OTHER      **Purpose:** VERIFICATION VISIT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #9BRT12      Served 06/07/2023

Deficiencies Cited  
88.06(3)(f)

Subject Area  
REVIEW OF ISP

Compliance  
Verified  
10/10/23

Corrected  
Yes

### Enforcement History (SECOND SPRINGS AFH--0014049)

**Date:** 06/07/2023      **SOD #**9BRT12      **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION  
ORDER TO COMPLY

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** Touch of Home Adult Family Care (0019214)

**Address:** 12282 120th Ave, Chippewa Falls, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 01/03/2023 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0141717      **End Date:** 01/02/2023      **Type:** INITIAL      **Purpose:** SURVEY

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

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** WESTRIDGE (590134)

**Address:** 3841 96TH STREET, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 03/13/1997 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0148187    **End Date:** 11/19/2024    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #M6LF11    Served 12/02/2024

Deficiencies Cited

88.10(3)(m)

88.11(5)

Subject Area

FREEDOM FROM ABUSE

COMPLETED INVESTIGATION NOTIFICATION

Compliance

Verified

Corrected

**Survey ID:** 0144989    **End Date:** 12/04/2023    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

### Enforcement History (WESTRIDGE--590134)

**Date:** 12/02/2024    **SOD #**M6LF11    **Appealed:** No

Sanctions

ORDER TO COMPLY

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Complaint History (WESTRIDGE--590134)

**Date Complaint Received: 07/26/2024**

**Date Investigation Completed: 11/19/2024**

Subject Area(s)

Result

SOD #

PHYSICAL ENVIRONMENT/SAFETY  
PROGRAM SERVICES

NOT SUBSTANTIATED  
SUBSTANTIATED

M6LF11

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### 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 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0146564    **End Date:** 05/21/2024    **Type:** ABBREVIATED    **Purpose:** SURVEY/COMPLAINT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #8FG311    Served 05/30/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.03(5)(e)1	SIGNIFICANT CHANGE TO THE RESIDENT		
88.05(3)(a)	HOME ENVIRONMENT		
88.05(3)(b)	FREE OF HAZARDS		

### Enforcement History (WOODWARD LANE--590112)

**Date:** 05/30/2024    **SOD #**8FG311    **Appealed:** No

Sanctions

ORDER TO COMPLY

### Complaint History (WOODWARD LANE--590112)

**Date Complaint Received:** 01/17/2024    **Date Investigation Completed:** 05/21/2024

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
PROGRAM SERVICES	SUBSTANTIATED	8FG311

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Facility Information

**Facility Name:** YOU ARE HOME A (0018694)

**Address:** 12022 125TH ST, CHIPPEWA FALLS, WI 54729

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/22/2021 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0148225    **End Date:** 12/04/2024    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0145612    **End Date:** 01/05/2024    **Type:** OTHER    **Purpose:** COMPLAINT/VV

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #LCO312    Served 02/15/2024

Deficiencies Cited  
88.07(3)(a)

Subject Area  
PRESCRIPTION MEDICATIONS

Compliance  
Verified  
12/4/24

Corrected  
Yes

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

Survey ID: 0143005    End Date: 03/14/2023    Type: STANDARD    Purpose: SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #LCO311    Served 05/09/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	<u>Corrected</u>
		<u>Verified</u>	
50.06	CERTAIN ADMISSIONS TO FACILITIES	1/5/24	Yes
88.03(3)(b)	CRIMINAL RECORDS CHECK	1/5/24	Yes
88.03(5)(e)1	SIGNIFICANT CHANGE TO THE RESIDENT	1/5/24	Yes
88.04(2)(f)	CONDITION WHICH REPRESENTS RISK OR HARM	1/5/24	Yes
88.04(2)(g)1	HEALTH SCREENING FOR STAFF	1/5/24	Yes
88.04(5)(a)	TRAINING-15 HOURS WITHIN 6 MONTHS	1/5/24	Yes
88.05(3)(b)	FREE OF HAZARDS	1/5/24	Yes
88.07(3)(a)	PRESCRIPTION MEDICATIONS	1/5/24	No
88.07(4)(c)	FOOD PREPARED AND STORED SANITARY WAY	1/5/24	Yes
88.09(1)(a)	RESIDENT RECORDS	1/5/24	Yes
88.09(2)(c)	LOCATION AND RETENTION PERIOD	1/5/24	Yes

### Enforcement History (YOU ARE HOME A--0018694)

Date: 02/15/2024    SOD #LCO312    Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION  
COMPLY WITH REQUIREMENT

Date: 05/09/2023    SOD #LCO311    Appealed: No

Sanctions

ORDER TO COMPLY

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## Provider Inspection Summary

For the period 01/21/2022 to 01/20/2025

Adult Family Home

### Complaint History (YOU ARE HOME A--0018694)

**Date Complaint Received: 12/02/2023**

**Date Investigation Completed: 01/05/2024**

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

NOT SUBSTANTIATED

**Date Complaint Received: 09/18/2023**

**Date Investigation Completed: 01/05/2024**

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

NOT SUBSTANTIATED

**Date Complaint Received: 02/14/2023**

**Date Investigation Completed: 03/14/2023**

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

SUBSTANTIATED

LCO311

**Date Complaint Received: 01/05/2023**

**Date Investigation Completed: 03/14/2023**

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

NOT SUBSTANTIATED

**Date Complaint Received: 12/12/2022**

**Date Investigation Completed: 03/14/2023**

Subject Area(s)

Result

SOD #

STAFF TRAINING AND PROFICIENCY

NOT SUBSTANTIATED

PROGRAM SERVICES

SUBSTANTIATED

LCO311

STAFF TRAINING AND PROFICIENCY

SUBSTANTIATED

LCO311

PROGRAM SERVICES

SUBSTANTIATED

LCO311

STAFF TRAINING AND PROFICIENCY

SUBSTANTIATED

LCO311

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