Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025

STATE OF WISCONSIN
Bureau of Assisted Living
P.O. Box 7940
Madison WI 53707-7940

Notes

This report includes Provider Inspection Summaries (Facility Profiles) for Assisted Living Facilities in Crawford County. The report is a PDF (Adobe Acrobat) document and includes a total of 9.00 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 01/30/2022 to 01/29/2025

Adult Day Care Center

Bureau of Assisted Living P.O. Box 7940 Madison WI 53707-7940

STATE OF WISCONSIN

Facility Information

Facility Name: UNITY ADULT DAY CENTER (0017038)

Address: 120 N BEAUMONT RD, PRAIRIE DU CHIEN, WI 53821

License Status: REGULAR

Licensed/Certified/Registered 06/01/2018 12:00:00AM

Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

No survey activity during the period 1/30/22 to 1/29/25

This is Page 2 of 9 total pages. If printing this report ensure that your printer is set to print only the desired pages.

Provider Inspection Summary

Bureau of Assisted Living P.O. Box 7940 Madison WI 53707-7940

STATE OF WISCONSIN

For the period 01/30/2022 to 01/29/2025

Adult Family Home

Facility Information

Facility Name: KNAPP CASS ST AFH (0018851)

Address: 216 W CASS ST, PRAIRIE DU CHIEN, WI 53821

License Status: REGULAR

Licensed/Certified/Registered 02/14/2022 12:00:00AM

Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0147954 End Date: 10/14/2024 Type: STANDARD Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #NO2P11 Served 10/29/2024

Compliance

Deficiencies Cited
88.07(2)(e)Subject AreaVerified
CorrectedCorrected48.07(2)(e)ANNUAL HEALTH EXAM12/13/24Yes

Survey ID: 0138961 End Date: 02/14/2022 Type: INITIAL Purpose: CHOW--DESK REVIEW

Results: LICENSE/CERT/REGISTRATION ISSUED

Enforcement History (KNAPP CASS ST AFH--0018851)

Date: 10/29/2024 SOD #NO2P11 Appealed: No

Sanctions

ORDER TO COMPLY

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Provider Inspection Summary

Bureau of Assisted Living P.O. Box 7940 Madison WI 53707-7940

STATE OF WISCONSIN

For the period 01/30/2022 to 01/29/2025

Adult Family Home

Facility Information

Facility Name: KNAPP STATE STREET (0018135)

Address: 500 S STATE ST, PRAIRIE DU CHIEN, WI 53821

License Status: REGULAR

Licensed/Certified/Registered 07/01/2020 12:00:00AM

Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0147860 End Date: 10/09/2024 Type: ABBREVIATED Purpose: SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0140624 End Date: 08/23/2022 Type: STANDARD Purpose: SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

Bureau of Assisted Living P.O. Box 7940 Madison WI 53707-7940

STATE OF WISCONSIN

For the period 01/30/2022 to 01/29/2025 Adult Family Home

Facility Information

Facility Name: Meadow Lane (0020525)

Address: 63808 Meadow Lane, Prairie du Chien, WI 53821

License Status: REGULAR

Licensed/Certified/Registered 02/10/2025 12:00:00AM

Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025

Adult Family Home

Bureau of Assisted Living P.O. Box 7940 Madison WI 53707-7940

STATE OF WISCONSIN

Facility Information

Facility Name: Parkview Court (0020529)

Address: 611 Parkview Court, Prairie du Chien, WI 53821

License Status: REGULAR

Licensed/Certified/Registered 02/10/2025 12:00:00AM

Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

This is Page 6 of 9 total pages. If printing this report ensure that your printer is set to print only the desired pages.

Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025

Adult Family Home

STATE OF WISCONSIN

Bureau of Assisted Living P.O. Box 7940 Madison WI 53707-7940

Facility Information

Facility Name: KANDOO 2 (0016497)

Address: 12358 EAST STREET, SOLDIERS GROVE, WI 54665

License Status: REGULAR

Licensed/Certified/Registered 08/01/2017 12:00:00AM

Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0141775 End Date: 12/19/2022 Type: STANDARD Purpose: SURVEY/COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #06U811 Served 01/09/2023

Compliance

Deficiencies CitedSubject AreaVerifiedCorrected50.065(2)(bb)DETERMINE FINAL DISPOSITION OF CHARGE2/23/23Yes

Enforcement History (KANDOO 2--0016497)

Date: 01/09/2023 SOD #06U811 Appealed: No

Sanctions

ORDER TO COMPLY

Complaint History (KANDOO 2--0016497)

Date Complaint Received: 11/29/2022 Date Investigation Completed: 12/12/2022

Subject Area(s) Result SOD #

PROGRAM SERVICES NOT SUBSTANTIATED

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

STATE OF WISCONSIN
Bureau of Assisted Living
P.O. Box 7940
Madison WI 53707-7940

Facility Information

Facility Name: BLUFF HAVEN ASSISTED LIVING (0012823)
Address: 720 S FREMONT ST, PRAIRIE DU CHIEN, WI 53821

License Status: REGULAR

Licensed/Certified/Registered 08/01/2010 12:00:00AM

Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0146690 End Date: 06/04/2024 Type: OTHER Purpose: COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0140620 End Date: 08/30/2022 Type: ABBREVIATED Purpose: SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Complaint History (BLUFF HAVEN ASSISTED LIVING--0012823)

Date Complaint Received: 04/22/2024 Date Investigation Completed: 06/04/2024

Subject Area(s) Result SOD #

PROGRAM SERVICES NOT SUBSTANTIATED

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Provider Inspection Summary

Bureau of Assisted Living P.O. Box 7940 Madison WI 53707-7940

STATE OF WISCONSIN

For the period 01/30/2022 to 01/29/2025

Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: RESIDENCE AT BLUFF HAVEN (0012866)

Address: 720 S FREMONT ST, PRAIRIE DU CHIEN, WI 53821

License Status: REGULAR

Licensed/Certified/Registered 08/03/2009 12:00:00AM

Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0140618 End Date: 08/23/2022 Type: ABBREVIATED Purpose: SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

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