

Provider Inspection Summary

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

Eau Claire

Notes

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

The report includes only facilities located within the City of EAU CLAIRE. 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 69.00 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: 1522 Omaha St Stable Living LLP (0019197)

Address: 1522 Omaha Street, Eau Claire, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 10/14/2022 12:00:00AM

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

Survey History

Survey ID: 0141106 **End Date:** 10/18/2022 **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: 1925 Taft Ave Stable Living LLP (0019150)

Address: 1925 Taft Ave, Eau Claire, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 08/26/2022 12:00:00AM

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

Survey History

Survey ID: 0140659 **End Date:** 08/26/2022 **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: AMBERS NATURE VIEW (0014175)

Address: 501 WEST HAMILTON AVE, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 05/21/2012 12:00:00AM

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

Survey History

Survey ID: 0142361 **End Date:** 03/02/2023 **Type:** OTHER **Purpose:** COMPLAINT/VV

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0141248 **End Date:** 10/27/2022 **Type:** ABBREVIATED **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #8CNL11 Served 11/08/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(3)(b)	COMPLETE BACKGROUND CHECK PROCESS	3/2/23	Yes
88.05(4)(d)2.c	SEMI-ANNUAL FIRE DRILLS	3/2/23	Yes
88.07(3)(a)	PRESCRIPTION MEDICATIONS	3/2/23	Yes

Enforcement History (AMBERS NATURE VIEW--0014175)

Date: 11/04/2022 **SOD #**8CNL11 **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 (AMBERS NATURE VIEW--0014175)

Date Complaint Received: 12/02/2022

Date Investigation Completed: 03/02/2023

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

NOT SUBSTANTIATED

Date Complaint Received: 10/24/2022

Date Investigation Completed: 10/27/2022

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

NOT SUBSTANTIATED

STAFF TRAINING AND PROFICIENCY

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: APPLE VALLEY HOME (0012299)

Address: 6700 HWY 53, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 03/01/2008 12:00:00AM

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

Survey History

Survey ID: 0142878 **End Date:** 04/19/2023 **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: AURORA RES ALTERNATIVES INC 083 (0009007)

Address: 7736 NINE MILE CREEK ROAD, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 05/26/2000 12:00:00AM

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

Survey History

Survey ID: 0147968 **End Date:** 10/24/2024 **Type:** STANDARD **Purpose:** SURVEY/VV

Results: ENFORCEMENT ACTION

Statement of Deficiency: #FL0M14 Served 10/31/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(3)(e)2.b	INSPECTIONS-GAS FURNACE		
88.07(3)(c)	MEDICATION ASSISTANCE		

Survey ID: 0143962 **End Date:** 07/14/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #FL0M13 Served 08/18/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.07(3)(a)	PRESCRIPTION MEDICATIONS	10/24/24	Yes

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Provider Inspection Summary

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

Adult Family Home

Survey ID: 0142754 **End Date:** 02/17/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #FL0M12 Served 04/12/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.07(3)(a)	PRESCRIPTION MEDICATIONS	7/14/23	No

Enforcement History (AURORA RES ALTERNATIVES INC 083--0009007)

Date: 10/31/2024 **SOD #**FL0M14 **Appealed:** No

Sanctions
ORDER TO COMPLY

Date: 08/18/2023 **SOD #**FL0M13 **Appealed:** No

Sanctions
COMPLY WITH DEPARTMENT PLAN OF CORRECTION
ORDER TO COMPLY

Date: 04/12/2023 **SOD #**FL0M12 **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: Aurora Residential Alternatives 115 (0020077)

Address: 912 W Shorewood Dr, Eau Claire, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 05/14/2024 12:00:00AM

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

Survey History

Survey ID: 0146521 **End Date:** 05/14/2024 **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: AURORA RESIDENTIAL ALTERNATIVES INC 071 (0017581)

Address: 914 W SHOREWOOD DR, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 06/11/2019 12:00:00AM

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

Survey History

Survey ID: 0148469 **End Date:** 01/03/2025 **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 85 (0010596)

Address: 1500 S EDGEWATER DRIVE, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 05/28/2004 12:00:00AM

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

Survey History

Survey ID: 0148188 **End Date:** 11/26/2024 **Type:** ABBREVIATED **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #OZT911 Served 12/02/2024

<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		
88.09(1)(a)	RESIDENT RECORDS		

Enforcement History (AURORA RESIDENTIAL ALTERNATIVES INC 85--0010596)

Date: 12/02/2024 **SOD #**OZT911 **Appealed:** No

Sanctions

ORDER TO COMPLY

Complaint History (AURORA RESIDENTIAL ALTERNATIVES INC 85--0010596)

Date Complaint Received: 07/10/2024 **Date Investigation Completed:** 11/26/2024

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
ADMINISTRATION	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: BRADLEY HOUSE AFH (0019026)

Address: 841 BRADLEY AVE, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 09/21/2022 12:00:00AM

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

Survey History

Survey ID: 0140816 **End Date:** 09/21/2022 **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: BRIDGE TO INDEPENDENCE KEITH HOUSE (0014924)

Address: 1010 KEITH STREET, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 01/01/2014 12:00:00AM

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

Survey History

Survey ID: 0143462 **End Date:** 06/21/2023 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0141110 **End Date:** 10/19/2022 **Type:** ABBREVIATED **Purpose:** SURVEY/COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Complaint History (BRIDGE TO INDEPENDENCE KEITH HOUSE--0014924)

Date Complaint Received: 04/24/2023

Date Investigation Completed: 06/21/2023

Subject Area(s)
PROGRAM SERVICES

Result
NOT SUBSTANTIATED

SOD #

Date Complaint Received: 06/17/2022

Date Investigation Completed: 10/19/2022

Subject Area(s)
PROGRAM SERVICES
RESIDENT RIGHTS

Result
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: BROTOLOC NORTH ABBE HILL (0015547)

Address: 2119 ABBE HILL, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 03/02/2015 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: BROTOLOC NORTH HASTINGS VIEW (0014377)

Address: 813 ZEPHYR HILL, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 11/05/2012 12:00:00AM

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

Survey History

Survey ID: 0143275 **End Date:** 06/02/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0141827 **End Date:** 12/20/2022 **Type:** STANDARD **Purpose:** COMPLAINT/VV

Results: ENFORCEMENT ACTION

Statement of Deficiency: #4C7X12 Served 01/12/2023

<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	6/2/23	Yes
88.06(3)(f)	REVIEW OF ISP	6/2/23	Yes

Survey ID: 0140352 **End Date:** 08/02/2022 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #4C7X11 Served 08/03/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(3)(a)	HOME ENVIRONMENT	12/20/22	Yes

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Provider Inspection Summary

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

Adult Family Home

Enforcement History (BROTOLOC NORTH HASTINGS VIEW--0014377)

Date: 01/12/2023 **SOD #**4C7X12 **Appealed:** No

Sanctions
ORDER TO COMPLY

Date: 08/03/2022 **SOD #**4C7X11 **Appealed:** No

Sanctions
ORDER TO COMPLY

Complaint History (BROTOLOC NORTH HASTINGS VIEW--0014377)

Date Complaint Received: 12/14/2022 **Date Investigation Completed:** 12/20/2022

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

Date Complaint Received: 03/06/2022 **Date Investigation Completed:** 08/02/2022

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
PHYSICAL ENVIRONMENT/SAFETY	SUBSTANTIATED	4C7X11
RESIDENT RIGHTS	NOT SUBSTANTIATED	
STAFF TRAINING AND PROFICIENCY	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: BROTOLOC NORTH WEST WIND (0014378)

Address: 815 ZEPHYR HILL, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 10/19/2012 12:00:00AM

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

Survey History

Survey ID: 0140356 **End Date:** 07/26/2022 **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: Calumet (0019850)

Address: 2511 Calumet Rd, Eau Claire, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 01/11/2024 12:00:00AM

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

Survey History

Survey ID: 0145247 **End Date:** 01/10/2024 **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: Casa UpNorth Inc (0019383)

Address: 3041 Kilbourne Ave., Eau Claire, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 03/31/2023 12:00:00AM

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

Survey History

Survey ID: 0142632 **End Date:** 03/31/2023 **Type:** INITIAL **Purpose:** CHOW--LICENSURE

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: Country Haven (0019454)

Address: 2914 / 2916 Shady Grove Rd, Eau Claire, WI 54703

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: 0145970 **End Date:** 01/31/2024 **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: DEARWOOD LLC (0011643)

Address: 2011 N 60TH AVE, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 10/24/2006 12:00:00AM

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

Survey History

Survey ID: 0142635 **End Date:** 03/31/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0141760 **End Date:** 10/20/2022 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #BO4I11 Served 01/06/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(3)(b)	COMPLETE BACKGROUND CHECK PROCESS	3/31/23	Yes

Enforcement History (DEARWOOD LLC--0011643)

Date: 01/06/2023 **SOD #**BO4I11 **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

Complaint History (DEARWOOD LLC--0011643)

Date Complaint Received: 07/29/2022

Date Investigation Completed: 10/20/2022

Subject Area(s)
ADMINISTRATION
RESIDENT RIGHTS

Result
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: FOLSOM REM WISCONSIN III INC (0016640)
Address: 2111 FOLSOM ST, EAU CLAIRE, WI 54703
License Status: REGULAR
Licensed/Certified/Registered 07/25/2017 12:00:00AM
Regional Office: NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

Survey History

Survey ID: 0147509 **End Date:** 08/09/2024 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #S43511 Served 09/05/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(5)(a)	TRAINING-15 HOURS WITHIN 6 MONTHS		
88.07(3)(e)1	MEDICATION- RECORD KEEPING		

Enforcement History (FOLSOM REM WISCONSIN III INC--0016640)

Date: 09/05/2024 **SOD #**S43511 **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: GCBK GROUP HOME INC (0011061)

Address: 2821 BEVERLY HILLS DR, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 09/07/2005 12:00:00AM

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

Survey History

Survey ID: 0146445 **End Date:** 05/16/2024 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0143651 **End Date:** 07/14/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0142874 **End Date:** 04/19/2023 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #D50111 Served 04/24/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	
		<u>Verified</u>	<u>Corrected</u>
88.07(3)(a)	PRESCRIPTION MEDICATIONS	7/14/23	Yes
88.10(3)(b)	PRIVACY	7/14/23	Yes

Enforcement History (GCBK GROUP HOME INC--0011061)

Date: 04/21/2023 **SOD #**D50111 **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 (GCBK GROUP HOME INC--0011061)

Date Complaint Received: 03/06/2024

Date Investigation Completed: 05/16/2024

Subject Area(s)
PROGRAM SERVICES
RESIDENT RIGHTS

Result
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: Haanstad (0019852)

Address: 2617 Haanstad Rd, Eau Claire, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 01/11/2024 12:00:00AM

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

Survey History

Survey ID: 0146235 **End Date:** 04/17/2024 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0145252 **End Date:** 01/10/2024 **Type:** INITIAL **Purpose:** SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

Complaint History (Haanstad--0019852)

Date Complaint Received: 03/15/2024

Date Investigation Completed: 04/17/2024

Subject Area(s)
PROGRAM SERVICES

Result
NOT SUBSTANTIATED

SOD #

Date Complaint Received: 01/12/2024

Date Investigation Completed: 04/17/2024

Subject Area(s)
PROGRAM SERVICES

Result
NOT SUBSTANTIATED

SOD #

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: HILLVIEW HOME (0016166)

Address: 2220 ORCHARD PLACE, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 08/01/2016 12:00:00AM

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

Survey History

Survey ID: 0142756 **End Date:** 04/03/2023 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #GXSB11 Served 04/12/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u> <u>Verified</u>	<u>Corrected</u>
88.07(2)(b)4	RECORD OF MEDICAL VISITS AND REPORTS	5/27/23	
88.07(3)(d)	MEDICATION- WRITTEN ORDER	5/27/23	

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: JULIUS REM WISCONSIN III INC (0017069)

Address: 6977 JULIUS DR, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 04/03/2018 12:00:00AM

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

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: Lexington (0019854)

Address: 710 E Lexington Blvd, Eau Claire, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 01/11/2024 12:00:00AM

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

Survey History

Survey ID: 0145253 **End Date:** 01/10/2024 **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: LONDON RAILS AFH (0016610)

Address: 4014/4016 LONDON ROAD, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 04/13/2017 12:00:00AM

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

Survey History

Survey ID: 0147067 **End Date:** 07/19/2024 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0145521 **End Date:** 12/05/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #NIWJ12 Served 02/10/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.07(3)(a)	PRESCRIPTION MEDICATIONS	7/19/24	Yes

Survey ID: 0141090 **End Date:** 08/30/2022 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #NIWJ11 Served 11/11/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(3)(a)	HOME ENVIRONMENT	12/5/23	Yes
88.06(3)(a)	INDIVIDUAL SERVICE PLAN & ASSESSMENT	12/5/23	Yes
88.07(3)(a)	PRESCRIPTION MEDICATIONS	12/5/23	No
88.11(1)	REPORTING OF ABUSE AND NEGLECT	12/5/23	Yes

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Provider Inspection Summary

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

Adult Family Home

Enforcement History (LONDON RAILS AFH--0016610)

Date: 02/07/2024 **SOD #**NIWJ12 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
ORDER TO COMPLY

Date: 10/19/2022 **SOD #**NIWJ11 **Appealed:** No

Sanctions

ORDER TO COMPLY

Complaint History (LONDON RAILS AFH--0016610)

Date Complaint Received: 07/25/2022

Date Investigation Completed: 08/30/2022

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

SUBSTANTIATED

NIWJ11

Date Complaint Received: 05/05/2022

Date Investigation Completed: 08/30/2022

Subject Area(s)

Result

SOD #

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: MARCIE CARES LLC (0015817)

Address: 1024 PERSHING STREET, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 09/02/2015 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: MCMAHON HOME (590091)

Address: 3555 CURVUE ROAD, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 09/01/1996 12:00:00AM

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

Survey History

Survey ID: 0147914 **End Date:** 10/21/2024 **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: MIKE WILSON HOUSE (THE) (0019027)

Address: 2409 RUDOLPH RD, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 09/21/2022 12:00:00AM

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

Survey History

Survey ID: 0140817 **End Date:** 09/21/2022 **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: NORTH CROSSINGS (0018232)

Address: 2304 ABBE HILL DRIVE, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 11/05/2020 12:00:00AM

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

Survey History

Survey ID: 0143554 **End Date:** 06/22/2023 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT/SELF REPORT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #H93411 Served 06/30/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(3)(a)	HOME ENVIRONMENT	9/5/23	

Complaint History (NORTH CROSSINGS--0018232)

Date Complaint Received: 03/06/2023

Date Investigation Completed: 06/22/2023

Subject Area(s)
PROGRAM SERVICES

Result
NOT SUBSTANTIATED

SOD #

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: PALS HAVEN (0015557)

Address: 2543 KENORA PARKWAY, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 03/03/2015 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: POPLAR PLACE (590118)

Address: 3012 MILTON ROAD, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 08/19/1996 12:00:00AM

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

Survey History

Survey ID: 0146719 **End Date:** 06/13/2024 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Complaint History (POPLAR PLACE--590118)

Date Complaint Received: 05/13/2024

Date Investigation Completed: 06/13/2024

Subject Area(s)
PROGRAM SERVICES

Result
NOT SUBSTANTIATED

SOD #

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: POSITIVE ALTERNATIVE LIVING SERVICES (0015095)

Address: 2549 KENORA PARKWAY, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 05/27/2014 12:00:00AM

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

Survey History

Survey ID: 0147604 **End Date:** 09/11/2024 **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: PRESTON II (0016841)

Address: 3008 MAY ST, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 11/28/2017 12:00:00AM

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

Survey History

Survey ID: 0148210 **End Date:** 12/02/2024 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0144779 **End Date:** 09/13/2023 **Type:** ABBREVIATED **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #GFDO11 Served 11/10/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.10(3)(l)	SAFE PHYSICAL ENVIRONMENT	12/2/24	Yes
88.10(3)(p)	PROMPT AND ADEQUATE TREATMENT	12/2/24	Yes

Enforcement History (PRESTON II--0016841)

Date: 11/09/2023 **SOD #**GFDO11 **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

Complaint History (PRESTON II--0016841)

Date Complaint Received: 05/24/2023

Date Investigation Completed: 09/13/2023

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

SUBSTANTIATED

GFDO11

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: PROMISING PALS AFH (0016609)

Address: 4020/4022 LONDON ROAD, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 04/13/2017 12:00:00AM

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

Survey History

Survey ID: 0140469 **End Date:** 08/05/2022 **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: PUTNAM PLACE (0018231)

Address: 2715 MAY STREET, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 10/13/2020 12:00:00AM

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

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: REM WI 5560 CYNDI COURT (0014466)

Address: 5560 CYNDI COURT, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 12/12/2012 12:00:00AM

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

Survey History

Survey ID: 0144637 **End Date:** 10/18/2023 **Type:** OTHER **Purpose:** COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #ZJ1H11 Served 10/26/2023

<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	1/3/24	
88.06(3)(d)1	DESCRIPTION OF SERVICES	1/3/24	

Survey ID: 0141740 **End Date:** 12/21/2022 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0140747 **End Date:** 08/31/2022 **Type:** ABBREVIATED **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #GNO811 Served 09/14/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(5)(a)	TRAINING-15 HOURS WITHIN 6 MONTHS	12/21/22	Yes
88.04(5)(b)	TRAINING-8 HOURS ANNUALLY	12/21/22	Yes
88.05(3)(e)2.b	INSPECTIONS-GAS FURNACE	12/21/22	Yes

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Provider Inspection Summary

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

Adult Family Home

Enforcement History (REM WI 5560 CYNDI COURT--0014466)

Date: 09/14/2022 **SOD #**GNO811 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
ORDER TO COMPLY

Complaint History (REM WI 5560 CYNDI COURT--0014466)

Date Complaint Received: 07/06/2023 **Date Investigation Completed:** 10/18/2023

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
RESIDENT RIGHTS	SUBSTANTIATED	ZJ1H11

Date Complaint Received: 07/27/2022 **Date Investigation Completed:** 08/31/2022

<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: REM WI 5562 CYNDI CT (0014467)

Address: 5562 CYNDI COURT, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 12/12/2012 12:00:00AM

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

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: REM WISCONSIN III INC - SHOREWOOD #2 (0013235)

Address: 908 SHOREWOOD DR, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 04/19/2010 12:00:00AM

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

Survey History

Survey ID: 0147557 **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: REM WISCONSIN III INC - SHOREWOOD#1 (0013240)

Address: 906 SHOREWOOD DR, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 04/19/2010 12:00:00AM

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

Survey History

Survey ID: 0147556 **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: REM WISCONSIN III INC - WINGET (0012501)

Address: 5502 WINGET DRIVE, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 09/11/2008 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: REM WISCONSIN III INC REDWOOD (0015387)

Address: S7935 REDWOOD DRIVE, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 11/24/2014 12:00:00AM

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

Survey History

Survey ID: 0147853 **End Date:** 09/04/2024 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT/SELF REPORT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #K1LK11 Served 10/16/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	
		<u>Verified</u>	<u>Corrected</u>
88.05(3)(a)	HOME ENVIRONMENT	1/30/25	Yes
88.06(2)(c)8	RESIDENT RIGHTS AND GRIEVANCE	1/30/25	Yes
88.07(2)(a)	SERVICES	1/30/25	Yes
88.07(3)(d)	MEDICATION- WRITTEN ORDER	1/30/25	Yes

Survey ID: 0143201 **End Date:** 05/24/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0142278 **End Date:** 11/15/2022 **Type:** OTHER **Purpose:** OTHER

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

Survey ID: 0141076 **End Date:** 07/21/2022 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #1BP412 Served 10/18/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(3)(b)	FREE OF HAZARDS	5/24/23	Yes
88.06(3)(d)	INDIVIDUAL SERVICE PLAN	5/24/23	Yes

Survey ID: 0139269 **End Date:** 03/29/2022 **Type:** ABBREVIATED **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #1BP411 Served 04/18/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(3)(a)	HOME ENVIRONMENT		
88.05(3)(b)	FREE OF HAZARDS		
88.05(4)(b)2	SMOKE DETECTORS-TESTING AND MAINTENANCE		
88.06(3)(d)	INDIVIDUAL SERVICE PLAN		

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Provider Inspection Summary

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

Adult Family Home

Enforcement History (REM WISCONSIN III INC REDWOOD--0015387)

Date: 10/16/2024 **SOD #**K1LK11 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
ORDER TO COMPLY

Date: 10/18/2022 **SOD #**1BP412 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
ORDER TO COMPLY

Date: 04/18/2022 **SOD #**1BP411 **Appealed:** No

Sanctions

ORDER TO COMPLY

Complaint History (REM WISCONSIN III INC REDWOOD--0015387)

Date Complaint Received: 06/06/2024

Date Investigation Completed: 09/04/2024

Subject Area(s)

Result

SOD #

STAFF TRAINING AND PROFICIENCY

SUBSTANTIATED

K1LK11

Date Complaint Received: 01/24/2022

Date Investigation Completed: 03/29/2022

Subject Area(s)

Result

SOD #

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: REM WISCONSIN NOBLE DRIVE (0014321)

Address: 2009 NOBLE DRIVE, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 08/13/2012 12:00:00AM

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

Survey History

Survey ID: 0140470 **End Date:** 07/29/2022 **Type:** OTHER **Purpose:** COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #8FEL11 Served 08/17/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.03(8)(a)	MONITORING OF HOME	10/21/22	
88.09(1)(a)	RESIDENT RECORDS	10/21/22	

Complaint History (REM WISCONSIN NOBLE DRIVE--0014321)

Date Complaint Received: 03/22/2022

Date Investigation Completed: 07/29/2022

Subject Area(s)

Result

SOD #

PHYSICAL ENVIRONMENT/SAFETY
PROGRAM SERVICES
RESIDENT RIGHTS

NOT SUBSTANTIATED
NOT SUBSTANTIATED
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: ROOTS AGNES STREET LLC (0018847)

Address: 2415 AGNES STREET, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 05/11/2022 12:00:00AM

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

Survey History

Survey ID: 0139768 **End Date:** 05/11/2022 **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: Runway (0019855)

Address: 3210 Runway Ave, Eau Claire, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 01/11/2024 12:00:00AM

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

Survey History

Survey ID: 0145254 **End Date:** 01/10/2024 **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: STABLE LIVING LLP - 2905 PATTON ST (0018845)

Address: 2905 PATTON STREET, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 05/04/2022 12:00:00AM

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

Survey History

Survey ID: 0143207 **End Date:** 05/25/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0141570 **End Date:** 10/28/2022 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #C87X11 Served 12/12/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.06(3)(f)	REVIEW OF ISP	5/25/23	Yes
88.07(1)(a)	RESIDENT CARE-GENERAL REQUIREMENTS	5/25/23	Yes

Survey ID: 0140597 **End Date:** 08/26/2022 **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

Survey ID: 0140032 **End Date: 06/17/2022** **Type: OTHER** **Purpose: COMPLAINT**

Results: ENFORCEMENT ACTION

Statement of Deficiency: #SKYI11 Served 07/07/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(3)(1)	BEDROOMS-PRIVACY	8/26/22	Yes

Survey ID: 0139494 **End Date: 05/04/2022** **Type: INITIAL** **Purpose: SURVEY**

Results: LICENSE/CERT/REGISTRATION ISSUED

Enforcement History (STABLE LIVING LLP - 2905 PATTON ST--0018845)

Date: 12/12/2022 **SOD #C87X11** **Appealed: No**

Sanctions
ORDER TO COMPLY

Date: 07/06/2022 **SOD #SKYI11** **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 (STABLE LIVING LLP - 2905 PATTON ST--0018845)

Date Complaint Received: 09/07/2022

Date Investigation Completed: 10/28/2022

Subject Area(s)
RESIDENT RIGHTS

Result
NOT SUBSTANTIATED

SOD #

Date Complaint Received: 06/14/2022

Date Investigation Completed: 06/17/2022

Subject Area(s)
ADMINISTRATION
RESIDENT RIGHTS

Result
SUBSTANTIATED
SUBSTANTIATED

SOD #
SKYI11
SKYI11

Date Complaint Received: 06/07/2022

Date Investigation Completed: 06/17/2022

Subject Area(s)
PHYSICAL ENVIRONMENT/SAFETY

Result
NOT SUBSTANTIATED

SOD #

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: Stable Living LLP - 3120 Kohlhepp Rd (0019562)

Address: 3120 Kohlhepp Rd, Eau Claire, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 05/25/2023 12:00:00AM

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

Survey History

Survey ID: 0143241 **End Date:** 05/25/2023 **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: Stable Living LLP 2601 Kane Rd (0020201)

Address: 2601 Kane Road, Eau Claire, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 05/30/2024 12:00:00AM

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

Survey History

Survey ID: 0146630 **End Date:** 05/30/2024 **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: Stable Living LLP 2603 Kane Rd (0020184)

Address: 2603 Kane Rd, Eau Claire, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 05/30/2024 12:00:00AM

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

Survey History

Survey ID: 0146632 **End Date:** 05/30/2024 **Type:** INITIAL **Purpose:** SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

Complaint History (Stable Living LLP 2603 Kane Rd--0020184)

Date Complaint Received: 10/17/2024

Date Investigation Completed: 12/19/2024

Subject Area(s)
PROGRAM SERVICES

Result
SUBSTANTIATED

SOD #
NOT RECORDED

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: STABLE LIVING LLP 312 FERRY STREET (0018508)

Address: 312 FERRY STREET, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 05/14/2021 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: Stable Living LLP 324 Ferry St (0019372)

Address: 324 Ferry St, Eau Claire, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 01/11/2023 12:00:00AM

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

Survey History

Survey ID: 0141826 **End Date:** 01/11/2023 **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: STABLE LIVING LLP ILLINOIS ST (0017774)

Address: 104/106 ILLINOIS ST, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 08/20/2019 12:00:00AM

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

Survey History

Survey ID: 0142092 **End Date:** 01/13/2023 **Type:** OTHER **Purpose:** SELF REPORT/VV

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0140379 **End Date:** 05/12/2022 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #V1J712 Served 08/04/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(3)(a)	HOME ENVIRONMENT	1/13/23	Yes
88.05(3)(g)	WINDOWS AND VENTILATION	1/13/23	Yes
88.05(4)(b)1	FIRE SAFETY-SMOKE DETECTORS	1/13/23	Yes

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Provider Inspection Summary

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

Adult Family Home

Enforcement History (STABLE LIVING LLP ILLINOIS ST--0017774)

Date: 08/04/2022 **SOD #**V1J712 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
ORDER TO COMPLY

Date: 02/08/2022 **SOD #**V1J711 **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: STABLE LIVING LLP (0017141)

Address: 466 FERRY ST, EAU CLAIRE, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 07/23/2018 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: Vesta (0019856)

Address: 5087 Vesta Ct, Eau Claire, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 01/11/2024 12:00:00AM

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

Survey History

Survey ID: 0145255 **End Date:** 01/10/2024 **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: Waller (0019827)

Address: 2527 Waller St, Eau Claire, WI 54703

License Status: REGULAR

Licensed/Certified/Registered 05/03/2024 12:00:00AM

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

Survey History

Survey ID: 0146306 **End Date:** 05/03/2024 **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: WEBSTER HOUSE (0017027)

Address: 1515 WEBSTER AVENUE, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 02/26/2018 12:00:00AM

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

Survey History

Survey ID: 0143349 **End Date:** 06/09/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0142451 **End Date:** 03/09/2023 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #0VDR11 Served 03/13/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.10(3)(1)	SAFE PHYSICAL ENVIRONMENT	6/9/23	Yes

Enforcement History (WEBSTER HOUSE--0017027)

Date: 03/12/2023 **SOD #**0VDR11 **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: YOLO HOMES STEIN HOUSE (0016027)

Address: 2833 STEIN BLVD, EAU CLAIRE, WI 54701

License Status: REGULAR

Licensed/Certified/Registered 03/28/2016 12:00:00AM

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

Survey History

Survey ID: 0139990 **End Date:** 06/23/2022 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0139398 **End Date:** 04/22/2022 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #Z7VM11 Served 04/28/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(3)(b)	FREE OF HAZARDS	6/23/22	Yes

Enforcement History (YOLO HOMES STEIN HOUSE--0016027)

Date: 04/28/2022 **SOD #**Z7VM11 **Appealed:** No

Sanctions

ORDER TO COMPLY

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