Notes

This report includes Provider Inspection Summaries (Facility Profiles) for Residential Care Apartment Complexes in Fond Du Lac County. The report is a PDF (Adobe Acrobat) document and includes a total of 13.00 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.
**Facility Information**

Facility Name: GRANPARK TERRACE GRANCARE INC (0016701)
Address: 30 N KAYSER ST, FOND DU LAC, WI 54935
License Status: REGULAR
Licensed/Certified/Registered 12/13/2017 12:00:00AM
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5252

**Survey History**

<table>
<thead>
<tr>
<th>Survey ID</th>
<th>End Date</th>
<th>Type</th>
<th>Purpose</th>
<th>Results</th>
<th>Statement of Deficiency</th>
<th>Deficiencies Cited</th>
<th>Subject Area</th>
<th>Compliance Verified</th>
<th>Compliance Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>0136162</td>
<td>04/01/2021</td>
<td>OTHER</td>
<td>COMPLAINT/VV</td>
<td>ENFORCEMENT ACTION</td>
<td>#52CE12 Served 05/05/2021</td>
<td>89.23(2)(c) SERVICES</td>
<td></td>
<td></td>
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<tr>
<td>0133189</td>
<td>12/09/2019</td>
<td>STANDARD</td>
<td>SURVEY</td>
<td>ENFORCEMENT ACTION</td>
<td>#52CE11 Served 04/13/2020</td>
<td>89.23(4)(d)1 SERVICES</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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### Enforcement History (GRANPARK TERRACE GRANCARE INC--0016701)

<table>
<thead>
<tr>
<th>Date</th>
<th>SOD #</th>
<th>Appealed</th>
<th>Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>05/05/2021</td>
<td>52CE12</td>
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<td>PENDING</td>
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</tbody>
</table>

**Sanctions**
- COMPLY WITH DEPARTMENT PLAN OF CORRECTION
- ORDER TO COMPLY
- FORFEITURE---89.23(2)(c)
- FORFEITURE---89.23(4)(d)1
- FORFEITURE---89.23(4)(d)2.a

<table>
<thead>
<tr>
<th>Date</th>
<th>SOD #</th>
<th>Appealed</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/13/2020</td>
<td>52CE11</td>
<td></td>
</tr>
</tbody>
</table>

**Sanctions**
- FORFEITURE---89.34(16)

### Complaint History (GRANPARK TERRACE GRANCARE INC--0016701)

<table>
<thead>
<tr>
<th>Date Complaint Received:</th>
<th>Date Investigation Completed:</th>
<th>Result</th>
<th>SOD #</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/14/2020</td>
<td>04/01/2021</td>
<td>SUBSTANTIATED</td>
<td>52CE12</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Date Complaint Received:</th>
<th>Date Investigation Completed:</th>
<th>Result</th>
<th>SOD #</th>
</tr>
</thead>
<tbody>
<tr>
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<td>04/01/2021</td>
<td>SUBSTANTIATED</td>
<td>52CE12</td>
</tr>
</tbody>
</table>

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Provider Inspection Summary
For the period 11/03/2018 to 11/02/2021
Residential Care Apartment Complex (REGISTERED)

Facility Information

Facility Name: LAKE VIEW PLACE (0014655)
Address: 517 LUCCO RD, FOND DU LAC, WI 54935
License Status: REGULAR
Licensed/Certified/Registered 07/11/2013 12:00:00AM
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5252

Survey History

<table>
<thead>
<tr>
<th>Survey ID</th>
<th>End Date</th>
<th>Type</th>
<th>Purpose</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>0135391</td>
<td>01/06/2021</td>
<td>OTHER</td>
<td>COMPLAINT</td>
<td>NO STATEMENT OF DEFICIENCY ISSUED</td>
</tr>
<tr>
<td>0132401</td>
<td>01/15/2020</td>
<td>OTHER</td>
<td>COMPLAINT</td>
<td>NO STATEMENT OF DEFICIENCY ISSUED</td>
</tr>
<tr>
<td>0129673</td>
<td>03/27/2019</td>
<td>OTHER</td>
<td>COMPLAINT</td>
<td>NO STATEMENT OF DEFICIENCY ISSUED</td>
</tr>
</tbody>
</table>
## Provider Inspection Summary

For the period 11/03/2018 to 11/02/2021

Residential Care Apartment Complex (REGISTERED)

### Complaint History (LAKE VIEW PLACE--0014655)

<table>
<thead>
<tr>
<th>Date Complaint Received</th>
<th>Date Investigation Completed</th>
<th>Subject Area(s)</th>
<th>Result</th>
<th>SOD #</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/01/2020</td>
<td>01/06/2021</td>
<td>RESIDENT RIGHTS</td>
<td>NOT SUBSTANTIATED</td>
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<tr>
<td>11/25/2019</td>
<td>01/15/2020</td>
<td>RESIDENT RIGHTS</td>
<td>NOT SUBSTANTIATED</td>
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<tr>
<td>02/12/2019</td>
<td>03/27/2019</td>
<td>PROGRAM SERVICES</td>
<td>NOT SUBSTANTIATED</td>
<td></td>
</tr>
</tbody>
</table>

This is Page 5 of 13 total pages. If printing this report ensure that your printer is set to print only the desired pages.

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### Facility Information

**Facility Name:** MEADOWS OF FOND DU LAC LLC (THE) (0016187)

**Address:** 620 W ROLLING MEADOWS DR, FOND DU LAC, WI 54937

**License Status:** REGULAR

**Licensed/Certified/Registered:** 06/22/2016 12:00:00AM

**Regional Office:** NORTHEASTERN REGION (GREEN BAY), (920) 448-5252

### Survey History

**Survey ID:** 0136175  **End Date:** 05/05/2021  **Type:** STANDARD  **Purpose:** SURVEY/COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

### Complaint History (MEADOWS OF FOND DU LAC LLC (THE)–0016187)

<table>
<thead>
<tr>
<th>Date Complaint Received: 04/03/2020</th>
<th>Date Investigation Completed: 05/05/2021</th>
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</thead>
<tbody>
<tr>
<td>Subject Area(s)</td>
<td>Result</td>
</tr>
<tr>
<td>ADMINISTRATION</td>
<td>NOT SUBSTANTIATED</td>
</tr>
<tr>
<td>STAFF TRAINING AND PROFICIENCY</td>
<td>NOT SUBSTANTIATED</td>
</tr>
</tbody>
</table>
Provider Inspection Summary

For the period 11/03/2018 to 11/02/2021

Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: SAGE MEADOW FOND DU LAC AL (0017586)
Address: 597 KINGSWOOD AVE, FOND DU LAC, WI 54935
License Status: REGULAR
 Licensed/Certified/Registered 05/30/2019 12:00:00AM
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5252

Survey History

Survey ID: 0130326 End Date: 05/28/2019 Type: ABBREVIATED Purpose: CHOW--DESK REVIEW
Results: LICENSE/CERT/REGISTRATION ISSUED

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Provider Inspection Summary
For the period 11/03/2018 to 11/02/2021
Residential Care Apartment Complex (REGISTERED)

Facility Information

Facility Name: ST FRANCIS TERRACE (0010373)
Address: 345 E FIRST ST, FOND DU LAC, WI 54935
License Status: REGULAR
Licensed/Certified/Registered 11/19/1998 12:00:00AM
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5252

Survey History

No survey activity during the period 11/3/18 to 11/2/21
Facility Information

Facility Name: WOODLANDS SENIOR PARK (0010355)
Address: 77 WISCONSIN AMERICAN DR, FOND DU LAC, WI 54935
License Status: REGULAR
Licensed/Certified/Registered 09/17/2003 12:00:00AM
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5252

Survey History

Survey ID: 0136841 End Date: 07/21/2021 Type: STANDARD Purpose: SURVEY/COMPLAINT/VV
Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0132843 End Date: 10/10/2019 Type: ABBREVIATED Purpose: SURVEY
Results: ENFORCEMENT ACTION
Statement of Deficiency: #FMEY11 Served 03/02/2020
Deficiencies Cited Subject Area Compliance
89.22(4)(b) BUILDING REQUIREMENTS Verified Corrected
7/21/21 Yes

Enforcement History (WOODLANDS SENIOR PARK--0010355)

Date: 03/02/2020 SOD #FMEY11 Appealed: No
Sanctions
OTHER SANCTION

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### Complaint History (WOODLANDS SENIOR PARK--0010355)

<table>
<thead>
<tr>
<th>Date Complaint Received: 10/19/2020</th>
<th>Date Investigation Completed: 07/21/2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subject Area(s)</td>
<td>Result</td>
</tr>
<tr>
<td>PHYSICAL ENVIRONMENT/SAFETY</td>
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</tbody>
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Facility Information

Facility Name: VILLA ROSA ASSISTED LIVING (0011286)
Address: N8120 CTY RD WW, MT CALVARY, WI 53057
License Status: REGULAR
Licensed/Certified/Registered 01/18/2006 12:00:00AM
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5252

Survey History

Survey ID: 0131843 End Date: 10/09/2019 Type: ABBREVIATED Purpose: SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED
Provider Inspection Summary

For the period 11/03/2018 to 11/02/2021

Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: MAPLECREST MANOR (0010341)
Address: 150 N DOUGLAS ST, RIPON, WI 54971
License Status: REGULAR
Licensed/Certified/Registered 05/09/2003 12:00:00AM
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5252

Survey History

No survey activity during the period 11/3/18 to 11/2/21
Facility Information

Facility Name: PRAIRIE PLACE RCAC (0014485)
Address: 749 E OSHKOSH ST, RIPON, WI 54971
License Status: REGULAR
Licensed/Certified/Registered 01/23/2013 12:00:00AM
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5252

Survey History

Survey ID: 0136171   End Date: 05/03/2021   Type: ABBREVIATED   Purpose: SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED