

Provider Inspection Summary

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

Notes

This report includes Provider Inspection Summaries (Facility Profiles) for Assisted Living Facilities in Green Lake County.

The report is a PDF (Adobe Acrobat) document and includes a total of 31.00 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 Family Home

Facility Information

Facility Name: EVERGREEN PINES (0014846)

Address: 343 E CUMBERLAND ST, BERLIN, WI 54923

License Status: REGULAR

Licensed/Certified/Registered 11/04/2013 12:00:00AM

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

Survey History

Survey ID: 0145928 **End Date:** 03/19/2024 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: SCHULTZ AFH PRINCETON (0018337)

Address: W4861 VILLAGE ACRES LN, PRINCETON, WI 54968

License Status: REGULAR

Licensed/Certified/Registered 02/25/2021 12:00:00AM

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

Survey History

Survey ID: 0148635 **End Date:** 01/29/2025 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

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

Community Based Residential Facility--CLASS AA (AMBULATORY)

Facility Information

Facility Name: BERLIN PINES INC (0014731)

Address: 642 BROADWAY ST, BERLIN, WI 54923

License Status: REGULAR

Licensed/Certified/Registered 05/04/2015 12:00:00AM

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

Survey History

Survey ID: 0141103 **End Date:** 10/21/2022 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

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

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: BROWN WILCOX RETIREMENT HOME (410143)

Address: 347 E HURON ST, BERLIN, WI 54923

License Status: REGULAR

Licensed/Certified/Registered 02/01/1980 12:00:00AM

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

Survey History

Survey ID: 0148366 **End Date:** 12/17/2024 **Type:** OTHER **Purpose:** OTHER

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0140946 **End Date:** 10/05/2022 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

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

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: MOUND STREET (0016057)

Address: 284 MOUND ST, BERLIN, WI 54923

License Status: REGULAR

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

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

Survey History

Survey ID: 0144036 **End Date:** 08/17/2023 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #3FMU11 Served 08/29/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.35(3)(d)	SERVICE PLANS UPDATED ANNUALLY OR ON CHANGES	10/28/23	Yes
83.43(1)	ENVIRONMENT SAFE, CLEAN, AND COMFORTABLE	10/28/23	Yes
83.44(2)(a)	ROOMS CLEAN AND FREE FROM ODORS	10/28/23	Yes

Complaint History (MOUND STREET--0016057)

Date Complaint Received: 05/16/2023

Date Investigation Completed: 08/17/2023

Subject Area(s)
RESIDENT RIGHTS

Result
NOT SUBSTANTIATED

SOD #

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Provider Inspection Summary

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

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: PATRIOT PLACE CBRF (0016752)

Address: 609 BROADWAY STREET, BERLIN, WI 54923

License Status: REGULAR

Licensed/Certified/Registered 03/01/2019 12:00:00AM

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

Survey History

Survey ID: 0147815 **End Date:** 10/11/2024 **Type:** OTHER **Purpose:** COMPLAINT/VV

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0146481 **End Date:** 02/14/2024 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #L6KP12 Served 05/21/2024

Deficiencies Cited
83.35(3)(d)

Subject Area
SERVICE PLANS UPDATED ANNUALLY OR ON
CHANGES

Compliance
Verified
10/11/24

Corrected
Yes

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Provider Inspection Summary

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

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

Survey ID: 0145069 **End Date:** 09/15/2023 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #L6KP11 Served 12/15/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	<u>Corrected</u>
		<u>Verified</u>	
83.15(3)(a)	ADMINISTRATOR SHALL SUPERVISE DAILY OPERATION	2/14/24	Yes
83.32(3)(i)	RIGHTS OF RESIDENTS: PROMPT AND ADEQUATE TREATMENT	2/14/24	Yes
83.44(2)(a)	ROOMS CLEAN AND FREE FROM ODORS	2/14/24	Yes
83.45(4)	PEST CONTROL	2/14/24	Yes

Survey ID: 0143853 **End Date:** 07/31/2023 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #ZTH411 Served 08/07/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	<u>Corrected</u>
		<u>Verified</u>	
441.301(c)(4)(vi)(B)	RESIDENTIAL SETTING: PRIVATE ROOMS, LOCKS	2/14/24	Yes
83.37(2)(d)	DOCUMENTATION OF MEDICATION ADMINISTRATION	2/14/24	Yes
83.38(1)(b)	SUPERVISION	2/14/24	Yes

Survey ID: 0142971 **End Date:** 04/26/2023 **Type:** STANDARD **Purpose:** SURVEY/SELF REPORT/VV

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

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

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

Survey ID: 0142187 End Date: 01/03/2023 Type: OTHER Purpose: COMPLAINT/VV

Results: ENFORCEMENT ACTION

Statement of Deficiency: #5S2P14 Served 02/16/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	<u>Corrected</u>
		<u>Verified</u>	
50.09(1)(e)	TREATMENT	4/26/23	Yes
83.12(2)(a)	CAREGIVER: INVESTIGATING ABUSE AND NEGLECT	4/26/23	Yes
83.19	ORIENTATION	4/26/23	Yes
83.32(3)(d)	RIGHTS OF RESIDENTS: FREE OF MISTREATMENT	4/26/23	Yes
83.32(3)(i)	RIGHTS OF RESIDENTS: PROMPT AND ADEQUATE TREATMENT	4/26/23	Yes
83.35(3)(d)	SERVICE PLANS UPDATED ANNUALLY OR ON CHANGES	4/26/23	Yes
83.37(2)(d)	DOCUMENTATION OF MEDICATION ADMINISTRATION	4/26/23	Yes
83.38(1)(b)	SUPERVISION	4/26/23	Yes

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Provider Inspection Summary

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

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

Enforcement History (PATRIOT PLACE CBRF--0016752)

Date: 05/21/2024 **SOD #**L6KP12 **Appealed:** No

Sanctions

ORDER TO COMPLY
FORFEITURE---N 389 83.35(3)(d)

Date: 12/15/2023 **SOD #**L6KP11 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
NO NEW ADMISSIONS
ORDER TO COMPLY
FORFEITURE---N 214 83.15(3)(a)
FORFEITURE---N 353 83.32(3)(i)
FORFEITURE---N 489 83.44(2)(a)

Date: 02/16/2023 **SOD #**5S2P14 **Appealed:**

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
NO NEW ADMISSIONS
ORDER TO COMPLY
FORFEITURE---50.09 1e
FORFEITURE---83.12 2a
FORFEITURE---83.19
FORFEITURE---83.32 3d
FORFEITURE---83.32 3i
FORFEITURE---83.35 3a
FORFEITURE---83.37 2d
FORFEITURE---83.38 1b

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Provider Inspection Summary

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

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

Complaint History (PATRIOT PLACE CBRF--0016752)

Date Complaint Received: 09/11/2024

Date Investigation Completed: 10/11/2024

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

NOT SUBSTANTIATED

Date Complaint Received: 08/06/2024

Date Investigation Completed: 10/11/2024

Subject Area(s)

Result

SOD #

PHYSICAL ENVIRONMENT/SAFETY
PROGRAM SERVICES
STAFF TRAINING AND PROFICIENCY

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

Date Complaint Received: 08/22/2023

Date Investigation Completed: 09/15/2023

Subject Area(s)

Result

SOD #

ADMINISTRATION
PROGRAM SERVICES
STAFF TRAINING AND PROFICIENCY

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

Date Complaint Received: 06/07/2023

Date Investigation Completed: 07/31/2023

Subject Area(s)

Result

SOD #

PROGRAM SERVICES
RESIDENT RIGHTS

NOT SUBSTANTIATED
NOT SUBSTANTIATED

Date Complaint Received: 12/06/2022

Date Investigation Completed: 01/03/2023

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

SUBSTANTIATED 5S2P14

Date Complaint Received: 11/30/2022

Date Investigation Completed: 01/03/2023

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

SUBSTANTIATED 5S2P14

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Provider Inspection Summary

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

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

Date Complaint Received: 11/06/2022

Date Investigation Completed: 01/03/2023

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

SUBSTANTIATED

5S2P14

Date Complaint Received: 10/10/2022

Date Investigation Completed: 01/03/2023

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

SUBSTANTIATED

5S2P14

RESIDENT RIGHTS

SUBSTANTIATED

5S2P14

Date Complaint Received: 07/07/2022

Date Investigation Completed: 01/03/2023

Subject Area(s)

Result

SOD #

ADMINISTRATION

NOT SUBSTANTIATED

Date Complaint Received: 06/27/2022

Date Investigation Completed: 01/03/2023

Subject Area(s)

Result

SOD #

ADMINISTRATION

SUBSTANTIATED

5S2P14

PHYSICAL ENVIRONMENT/SAFETY

SUBSTANTIATED

5S2P14

PROGRAM SERVICES

SUBSTANTIATED

5S2P14

STAFF TRAINING AND PROFICIENCY

SUBSTANTIATED

5S2P14

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Provider Inspection Summary

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

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: Barrett House of Green Lake (0019951)

Address: 860 Sunnyside Rd, Green Lake, WI 54941

License Status: REGULAR

Licensed/Certified/Registered 02/29/2024 12:00:00AM

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

Survey History

Survey ID: 0148367 **End Date:** 12/17/2024 **Type:** OTHER **Purpose:** OTHER

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0145773 **End Date:** 02/29/2024 **Type:** INITIAL **Purpose:** CHOW--DESK REVIEW

Results: LICENSE/CERT/REGISTRATION ISSUED

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Provider Inspection Summary

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

Community Based Residential Facility--CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: BARRETT HOUSE OF MARKESAN (0016788)

Address: 185 E JOHN STREET, MARKESAN, WI 53946

License Status: REGULAR

Licensed/Certified/Registered 09/01/2018 12:00:00AM

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

Survey History

Survey ID: 0148374 **End Date:** 12/17/2024 **Type:** OTHER **Purpose:** OTHER

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0142333 **End Date:** 02/28/2023 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0138865 **End Date:** 03/01/2022 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Complaint History (BARRETT HOUSE OF MARKESAN--0016788)

Date Complaint Received: 01/12/2023

Date Investigation Completed: 02/28/2023

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)

Facility Information

Facility Name: Marthas II CBRF (0018908)

Address: 404 W Water St, Princeton, WI 54968

License Status: REGULAR

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

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

Survey History

Survey ID: 0140699 **End Date:** 09/09/2022 **Type:** INITIAL **Purpose:** CHOW--DESK REVIEW

Results: LICENSE/CERT/REGISTRATION ISSUED

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: HEARTSONG (0017743)
Address: 123 S PEARL ST, BERLIN, WI 54923
License Status: REGULAR
Licensed/Certified/Registered 06/17/2019 12:00:00AM
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5252

Survey History

Survey ID: 0148556 **End Date:** 01/09/2025 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #F4ZI11 Served 01/23/2025

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.23(2)(a)2.c	SERVICES		
89.26(4)	ANNUAL REVIEW		
89.34(16)	TENANT RIGHTS		
89.34(17)	TENANT RIGHTS		

Survey ID: 0148208 **End Date:** 09/13/2024 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #CHYJ11 Served 12/04/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.23(3)(c)	SERVICES		
89.28(1)	RISK AGREEMENT		

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Survey ID: 0146539 **End Date:** 05/28/2024 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0145819 **End Date:** 02/21/2024 **Type:** OTHER **Purpose:** COMPLAINT/VV

Results: ENFORCEMENT ACTION

Statement of Deficiency: #54FH12 Served 03/07/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	<u>Corrected</u>
		<u>Verified</u>	
89.23(2)(c)	SERVICES	5/28/24	Yes
89.23(4)(b)1	SERVICES	5/28/24	Yes
89.26(4)	ANNUAL REVIEW	5/28/24	Yes
89.34(16)	TENANT RIGHTS	5/28/24	Yes
89.34(17)	TENANT RIGHTS	5/28/24	Yes
89.34(18)	TENANT RIGHTS	5/28/24	Yes
89.34(3)	TENANT RIGHTS	5/28/24	Yes

Survey ID: 0142523 **End Date:** 03/16/2023 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT/SELF REPORT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0143020 **End Date:** 02/14/2023 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #54FH11 Served 05/11/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	<u>Corrected</u>
		<u>Verified</u>	
50.065(6)(am)	FOUR YEAR CAREGIVER BACKGROUND REQUIREMENT	1/9/24	Yes
89.23(2)(a)2.c	SERVICES	12/18/23	Yes
89.34(16)	TENANT RIGHTS	2/21/24	No
89.34(18)	TENANT RIGHTS	2/21/24	No

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Enforcement History (HEARTSONG--0017743)

Date: 01/23/2025 **SOD #**F4ZI11 **Appealed:** **Decision:** PENDING

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
ORDER TO COMPLY
FORFEITURE---U 0118 89.23(2)(a)2.c
FORFEITURE---U 0267 89.34(16)
FORFEITURE---U 0268 89.34(17)

Date: 12/04/2024 **SOD #**CHYJ11 **Appealed:** No

Sanctions

ORDER TO COMPLY
FORFEITURE---U0124 89.23(3)(c) Services
FORFEITURE---U0189 89.28(1) Risk Agreement

Date: 03/07/2024 **SOD #**54FH12 **Appealed:**

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
NO NEW ADMISSIONS
ORDER TO COMPLY
FORFEITURE---89.23 2c
FORFEITURE---89.23 4b1
FORFEITURE---89.26 4
FORFEITURE---89.34 16
FORFEITURE---89.34 17
FORFEITURE---89.34 18
FORFEITURE---89.34 3

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Date: 05/11/2023 **SOD #**54FH11 **Appealed:**

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
ORDER TO COMPLY

FORFEITURE---89.23 2a2c

FORFEITURE---89.34 16

FORFEITURE---89.34 18

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Complaint History (HEARTSONG--0017743)

Date Complaint Received: 01/21/2025

Date Investigation Completed: 01/30/2025

Subject Area(s)

Result

SOD #

PHYSICAL ENVIRONMENT/SAFETY
PROGRAM SERVICES

SUBSTANTIATED
SUBSTANTIATED

KYF111
KYF111

Date Complaint Received: 12/10/2024

Date Investigation Completed: 01/09/2025

Subject Area(s)

Result

SOD #

PROGRAM SERVICES
RESIDENT RIGHTS

SUBSTANTIATED
SUBSTANTIATED

F4ZI11
F4ZI11

Date Complaint Received: 12/02/2024

Date Investigation Completed: 01/09/2025

Subject Area(s)

Result

SOD #

ADMINISTRATION
PROGRAM SERVICES
RESIDENT RIGHTS
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RESIDENT RIGHTS
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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Date Complaint Received: 11/15/2024

Date Investigation Completed: 01/09/2025

Subject Area(s)

Result

SOD #

PROGRAM SERVICES
RESIDENT RIGHTS

SUBSTANTIATED
SUBSTANTIATED

F4ZI11
F4ZI11

Date Complaint Received: 10/28/2024

Date Investigation Completed: 01/09/2025

Subject Area(s)

Result

SOD #

PROGRAM SERVICES
RESIDENT RIGHTS

SUBSTANTIATED
SUBSTANTIATED

F4ZI11
F4ZI11

Date Complaint Received: 09/03/2024

Date Investigation Completed: 09/13/2024

Subject Area(s)

Result

SOD #

ADMINISTRATION
PROGRAM SERVICES
PHYSICAL ENVIRONMENT/SAFETY
PROGRAM SERVICES

SUBSTANTIATED
SUBSTANTIATED
NOT SUBSTANTIATED
SUBSTANTIATED

CHYJ11
CHYJ11

CHYJ11

Date Complaint Received: 08/30/2024

Date Investigation Completed: 09/13/2024

Subject Area(s)

Result

SOD #

PHYSICAL ENVIRONMENT/SAFETY
PROGRAM SERVICES
STAFF TRAINING AND PROFICIENCY

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

Date Complaint Received: 06/04/2024

Date Investigation Completed: 09/13/2024

Subject Area(s)

Result

SOD #

PROGRAM SERVICES
STAFF TRAINING AND PROFICIENCY

SUBSTANTIATED
SUBSTANTIATED

CHYJ11
CHYJ11

Date Complaint Received: 01/03/2024

Date Investigation Completed: 02/21/2024

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
Residential Care Apartment Complex (CERTIFIED)

Date Complaint Received: 12/21/2023

Date Investigation Completed: 02/21/2024

Subject Area(s)
PROGRAM SERVICES

<u>Result</u>	<u>SOD #</u>
NOT SUBSTANTIATED	

Date Complaint Received: 12/11/2023

Date Investigation Completed: 02/21/2024

Subject Area(s)
ADMINISTRATION
RESIDENT RIGHTS

<u>Result</u>	<u>SOD #</u>
SUBSTANTIATED	54FH12
SUBSTANTIATED	54FH12

Date Complaint Received: 11/01/2023

Date Investigation Completed: 02/21/2024

Subject Area(s)
ADMINISTRATION
PROGRAM SERVICES
RESIDENT RIGHTS

<u>Result</u>	<u>SOD #</u>
SUBSTANTIATED	54FH12
SUBSTANTIATED	54FH12
SUBSTANTIATED	54FH12

Date Complaint Received: 10/17/2023

Date Investigation Completed: 02/21/2024

Subject Area(s)
STAFF TRAINING AND PROFICIENCY

<u>Result</u>	<u>SOD #</u>
SUBSTANTIATED	54FH12

Date Complaint Received: 09/14/2023

Date Investigation Completed: 02/21/2024

Subject Area(s)
ADMINISTRATION
RESIDENT RIGHTS

<u>Result</u>	<u>SOD #</u>
SUBSTANTIATED	54FH12
SUBSTANTIATED	54FH12

Date Complaint Received: 08/07/2023

Date Investigation Completed: 02/21/2024

Subject Area(s)
PROGRAM SERVICES
RESIDENT RIGHTS

<u>Result</u>	<u>SOD #</u>
SUBSTANTIATED	54FH12
SUBSTANTIATED	54FH12

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Date Complaint Received: 03/13/2023

Subject Area(s)

PROGRAM SERVICES
RESIDENT RIGHTS
STAFF TRAINING AND PROFICIENCY

Date Investigation Completed: 03/16/2023

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

Date Complaint Received: 01/24/2023

Subject Area(s)

ADMINISTRATION
RESIDENT RIGHTS
ADMINISTRATION
PROGRAM SERVICES

Date Investigation Completed: 02/14/2023

Result

SUBSTANTIATED
SUBSTANTIATED
SUBSTANTIATED
SUBSTANTIATED

SOD #

54FH11
54FH11
54FH11
54FH11

Date Complaint Received: 01/11/2023

Subject Area(s)

ADMINISTRATION
RESIDENT RIGHTS

Date Investigation Completed: 02/14/2023

Result

SUBSTANTIATED
SUBSTANTIATED

SOD #

54FH11
54FH11

Date Complaint Received: 10/24/2022

Subject Area(s)

PROGRAM SERVICES
RESIDENT RIGHTS

Date Investigation Completed: 02/14/2023

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

Date Complaint Received: 10/19/2022

Subject Area(s)

PROGRAM SERVICES

Date Investigation Completed: 02/14/2023

Result

NOT SUBSTANTIATED

SOD #

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: PATRIOT PLACE RCAC (0016746)
Address: 609 BROADWAY STREET, BERLIN, WI 54923
License Status: REGULAR
Licensed/Certified/Registered 01/05/2018 12:00:00AM
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5252

Survey History

Survey ID: 0147821 **End Date:** 10/11/2024 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0145640 **End Date:** 02/14/2024 **Type:** STANDARD **Purpose:** SURVEY/SELF REPORT/COMPLAINT/VV

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0145074 **End Date:** 12/13/2023 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #TJJR11 Served 12/15/2023

Deficiencies Cited
89.28(6)

Subject Area
RISK AGREEMENT

Compliance
Verified
2/14/24

Corrected
Yes

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Survey ID: 0145027 **End Date:** 09/15/2023 **Type:** OTHER **Purpose:** COMPLAINT/SELF REPORT/VV

Results: ENFORCEMENT ACTION

Statement of Deficiency: #WJ7112 Served 12/11/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	<u>Corrected</u>
		<u>Verified</u>	
89.23(2)(a)2.b	SERVICES	2/14/24	Yes
89.23(2)(a)2.c	SERVICES	2/14/24	Yes
89.23(4)(b)1	SERVICES	2/14/24	Yes
89.29(3)(a)2	ADMISSION & RETENTION OF TENANTS	2/14/24	Yes
89.34(1)	TENANT RIGHTS	2/14/24	Yes

Survey ID: 0142979 **End Date:** 04/26/2023 **Type:** OTHER **Purpose:** COMPLAINT/SELF REPORT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0142667 **End Date:** 12/14/2022 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #WJ7111 Served 04/05/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	<u>Corrected</u>
		<u>Verified</u>	
89.23(2)(a)2.b	SERVICES	9/15/23	No
89.23(2)(a)2.c	SERVICES	9/15/23	No
89.23(4)(b)1	SERVICES	9/15/23	No
89.34(18)	TENANT RIGHTS	9/15/23	Yes

Survey ID: 0138658 **End Date:** 02/07/2022 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Enforcement History (PATRIOT PLACE RCAC--0016746)

Date: 12/11/2023 **SOD #**WJ7112 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
NO NEW ADMISSIONS
ORDER TO COMPLY
FORFEITURE---U 117 89.23(2)(a)2b
FORFEITURE---U 118 89.23(2)(a)2c
FORFEITURE---U 131 89.23(4)(b)1
FORFEITURE---U 229 89.29(3)(a)2
FORFEITURE---U 252 89.34(1)

Date: 04/05/2023 **SOD #**WJ7111 **Appealed:**

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
ORDER TO COMPLY
FORFEITURE---83.34 18
FORFEITURE---89.23 2a2.b
FORFEITURE---89.23 2a2.c
FORFEITURE---89.23 4b1

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Complaint History (PATRIOT PLACE RCAC--0016746)

Date Complaint Received: 08/06/2024

Date Investigation Completed: 10/11/2024

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

NOT SUBSTANTIATED

RESIDENT RIGHTS

NOT SUBSTANTIATED

STAFF TRAINING AND PROFICIENCY

NOT SUBSTANTIATED

Date Complaint Received: 02/07/2024

Date Investigation Completed: 02/14/2024

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

NOT SUBSTANTIATED

Date Complaint Received: 11/22/2023

Date Investigation Completed: 12/13/2023

Subject Area(s)

Result

SOD #

ADMINISTRATION

SUBSTANTIATED

TJJR11

PROGRAM SERVICES

SUBSTANTIATED

TJJR11

RESIDENT RIGHTS

SUBSTANTIATED

TJJR11

STAFF TRAINING AND PROFICIENCY

SUBSTANTIATED

TJJR11

Date Complaint Received: 10/03/2023

Date Investigation Completed: 12/13/2023

Subject Area(s)

Result

SOD #

ADMINISTRATION

SUBSTANTIATED

TJJR11

PROGRAM SERVICES

SUBSTANTIATED

TJJR11

STAFF TRAINING AND PROFICIENCY

SUBSTANTIATED

TJJR11

Date Complaint Received: 07/12/2023

Date Investigation Completed: 09/15/2023

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

SUBSTANTIATED

WJ7112

RESIDENT RIGHTS

SUBSTANTIATED

WJ7112

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Date Complaint Received: 04/10/2023

Date Investigation Completed: 04/06/2023

Subject Area(s)

Result

SOD #

STAFF TRAINING AND PROFICIENCY

NOT SUBSTANTIATED

Date Complaint Received: 12/06/2022

Date Investigation Completed: 12/14/2022

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

SUBSTANTIATED

WJ7111

Date Complaint Received: 11/02/2022

Date Investigation Completed: 12/14/2022

Subject Area(s)

Result

SOD #

ADMINISTRATION

SUBSTANTIATED

WJ7111

PROGRAM SERVICES

SUBSTANTIATED

WJ7111

STAFF TRAINING AND PROFICIENCY

SUBSTANTIATED

WJ7111

Date Complaint Received: 10/19/2022

Date Investigation Completed: 12/14/2022

Subject Area(s)

Result

SOD #

ADMINISTRATION

NOT SUBSTANTIATED

RESIDENT RIGHTS

NOT SUBSTANTIATED

Date Complaint Received: 10/10/2022

Date Investigation Completed: 12/14/2022

Subject Area(s)

Result

SOD #

ADMINISTRATION

SUBSTANTIATED

WJ7111

PROGRAM SERVICES

SUBSTANTIATED

WJ7111

RESIDENT RIGHTS

SUBSTANTIATED

WJ7111

STAFF TRAINING AND PROFICIENCY

SUBSTANTIATED

WJ7111

Date Complaint Received: 10/05/2022

Date Investigation Completed: 12/14/2022

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

SUBSTANTIATED

WJ7111

RESIDENT RIGHTS

SUBSTANTIATED

WJ7111

STAFF TRAINING AND PROFICIENCY

SUBSTANTIATED

WJ7111

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Date Complaint Received: 09/26/2022

Subject Area(s)
PROGRAM SERVICES

Date Investigation Completed: 12/14/2022

<u>Result</u>	<u>SOD #</u>
SUBSTANTIATED	WJ7111

Date Complaint Received: 07/11/2022

Subject Area(s)
ADMINISTRATION

Date Investigation Completed: 12/14/2022

<u>Result</u>	<u>SOD #</u>
NOT SUBSTANTIATED	

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: Barrett House of Green Lake RCAC (0019952)
Address: 850 Sunnyside Rd., Green Lake, WI 54941
License Status: REGULAR
Licensed/Certified/Registered 02/29/2024 12:00:00AM
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5252

Survey History

Survey ID: 0148370 **End Date:** 12/17/2024 **Type:** OTHER **Purpose:** OTHER

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0147450 **End Date:** 08/28/2024 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0145772 **End Date:** 02/29/2024 **Type:** INITIAL **Purpose:** CHOW--DESK REVIEW

Results: LICENSE/CERT/REGISTRATION ISSUED

Complaint History (Barrett House of Green Lake RCAC--0019952)

Date Complaint Received: 06/19/2024

Date Investigation Completed: 08/28/2024

Subject Area(s)

Result

SOD #

ADMINISTRATION

NOT SUBSTANTIATED

PROGRAM SERVICES

NOT SUBSTANTIATED

STAFF TRAINING AND PROFICIENCY

NOT SUBSTANTIATED

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Provider Inspection Summary

For the period 01/30/2022 to 01/29/2025
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: NORTH TERRACE ASSISTED LIVING (0012685)

Address: 1130 N MARGARET ST, MARKESAN, WI 539468516

License Status: REGULAR

Licensed/Certified/Registered 01/26/2009 12:00:00AM

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

Survey History

Survey ID: 0147269 **End Date:** 08/06/2024 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

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