

Provider Inspection Summary

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

Kenosha

Notes

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

The report is a PDF (Adobe Acrobat) document and includes a total of 47.00 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: COMMUNITY OF LIFE ADULT FAMILY HOME INC (0016561)

Address: 7645 128TH AVE, BRISTOL, WI 53104

License Status: REGULAR

Licensed/Certified/Registered 05/02/2017 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0140561 **End Date:** 08/02/2022 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Enforcement History (COMMUNITY OF LIFE ADULT FAMILY HOME INC--0016561)

Date: 04/02/2022 **SOD #**TVX911 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
COMPLY WITH REQUIREMENT
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: A GOLDEN STAR AFH IV (0017295)

Address: 4817 39TH AVE, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 09/20/2018 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0148148 **End Date:** 10/19/2024 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #3ZVF11 Served 11/22/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(4)(b)1	FIRE SAFETY-SMOKE DETECTORS		
88.06(3)(d)5	SIGNED STATEMENT OF AGREEMENT		
88.07(3)(a)	PRESCRIPTION MEDICATIONS		
88.09(1)(d)	RESIDENT RECORDS REQUIREMENTS		
88.09(1)(d)11	RESIDENT FUNDS		

Survey ID: 0141089 **End Date:** 10/18/2022 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Enforcement History (A GOLDEN STAR AFH IV--0017295)

Date: 11/22/2024 **SOD #**3ZVF11 **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 (A GOLDEN STAR AFH IV--0017295)

Date Complaint Received: 09/11/2024

Date Investigation Completed: 10/19/2024

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

NOT SUBSTANTIATED

Date Complaint Received: 08/20/2024

Date Investigation Completed: 10/19/2024

Subject Area(s)

Result

SOD #

PHYSICAL ENVIRONMENT/SAFETY
PROGRAM SERVICES
PHYSICAL ENVIRONMENT/SAFETY
RESIDENT RIGHTS

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED
SUBSTANTIATED

3ZVF11

Date Complaint Received: 08/05/2024

Date Investigation Completed: 10/19/2024

Subject Area(s)

Result

SOD #

PHYSICAL ENVIRONMENT/SAFETY
PROGRAM SERVICES
RESIDENT RIGHTS

NOT SUBSTANTIATED
NOT SUBSTANTIATED
SUBSTANTIATED

3ZVF11

Date Complaint Received: 06/20/2024

Date Investigation Completed: 10/19/2024

Subject Area(s)

Result

SOD #

PHYSICAL ENVIRONMENT/SAFETY

NOT SUBSTANTIATED

Date Complaint Received: 09/20/2022

Date Investigation Completed: 10/18/2022

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: ALDER HOME (0011510)

Address: 8212 61ST ST, KENOSHA, WI 53142

License Status: REGULAR

Licensed/Certified/Registered 07/05/2006 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: ALEPH SOUTHERN HOPE HOMES LLC (0015728)

Address: 3511 59TH ST, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 08/28/2015 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0147196 **End Date:** 07/12/2024 **Type:** ABBREVIATED **Purpose:** SURVEY/COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0145584 **End Date:** 02/08/2024 **Type:** OTHER **Purpose:** DESK REVIEW

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0145376 **End Date:** 01/22/2024 **Type:** OTHER **Purpose:** DESK REVIEW

Results: ENFORCEMENT ACTION

Statement of Deficiency: #VIBG11 Served 01/25/2024

Deficiencies Cited
88.03(4)(b)

Subject Area
RENEWAL REQUIREMENTS

Compliance
Verified
2/8/24

Corrected
Yes

Survey ID: 0140553 **End Date:** 07/27/2022 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

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

Adult Family Home

Enforcement History (ALEPH SOUTHERN HOPE HOMES LLC--0015728)

Date: 01/25/2024 **SOD #**VIBG11 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
COMPLY WITH REQUIREMENT
NO NEW ADMISSIONS
ORDER TO COMPLY

Complaint History (ALEPH SOUTHERN HOPE HOMES LLC--0015728)

Date Complaint Received: 04/09/2024

Date Investigation Completed: 07/12/2024

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

NOT SUBSTANTIATED

Date Complaint Received: 04/27/2022

Date Investigation Completed: 07/27/2022

Subject Area(s)

Result

SOD #

PHYSICAL ENVIRONMENT/SAFETY

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: ALPHA HOMES OF WISCONSIN IX (390122)

Address: 5603 49TH AVE, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 07/01/1996 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: ALPHA HOMES OF WISCONSIN X (390125)

Address: 1822 12TH PL, KENOSHA, WI 53140

License Status: REGULAR

Licensed/Certified/Registered 09/01/1995 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0147589 **End Date:** 09/10/2024 **Type:** ABBREVIATED **Purpose:** SURVEY/COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0140844 **End Date:** 09/20/2022 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Complaint History (ALPHA HOMES OF WISCONSIN X--390125)

Date Complaint Received: 09/06/2024

Date Investigation Completed: 09/10/2024

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

NOT SUBSTANTIATED

Date Complaint Received: 08/26/2024

Date Investigation Completed: 09/10/2024

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

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: ALPHA HOMES OF WISCONSIN XI (390126)

Address: 2922 22ND ST, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 11/01/1995 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: ALPHA HOMES OF WISCONSIN XII (390127)

Address: 8114 60TH AVE, KENOSHA, WI 53140

License Status: REGULAR

Licensed/Certified/Registered 06/01/1996 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0140319 **End Date:** 07/20/2022 **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: ALPHA HOMES OF WISCONSIN XIII (390170)
Address: 1481 39TH AVE, KENOSHA, WI 53140
License Status: REGULAR
Licensed/Certified/Registered 11/17/1997 12:00:00AM
Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0138825 **End Date:** 02/16/2022 **Type:** STANDARD **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey History

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

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: ALPHA HOMES OF WISCONSIN XIV (390210)
Address: 3506 85TH PL, KENOSHA, WI 53142
License Status: REGULAR
Licensed/Certified/Registered 10/14/1998 12:00:00AM
Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0139132 **End Date:** 03/24/2022 **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: ALPHA HOMES OF WISCONSIN XVI (0010519)

Address: 3820 29TH ST, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 02/03/2005 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: CALVINS HOUSE OF NO MORE PAYNE RESIDENTIAL (0016195)

Address: 3207 45TH STREET LOWER, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 11/29/2016 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: Community of Life Adult Family Home (0020789)

Address: 4510 37th Ave, Kenosha, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 01/09/2025 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0148490 **End Date:** 01/09/2025 **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: DANOSKI ADULT FAMILY HOME (0017580)

Address: 5615 46TH AVE, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 03/22/2019 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: DEE MONIS PLACE (0015669)

Address: 3203 45TH STREET, KENOSHA, WI 53140

License Status: REGULAR

Licensed/Certified/Registered 05/26/2015 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: GIMMEL SOUTHERN HOPE HOMES (0017062)

Address: 7727 35TH ST, KENOSHA, WI 53141

License Status: REGULAR

Licensed/Certified/Registered 04/20/2018 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0142305 **End Date:** 11/11/2022 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #YH3011 Served 02/28/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.07(2)(a)	SERVICES		
88.07(4)(b)	3 NUTRITIOUS MEALS AND SNACKS		

Survey ID: 0141447 **End Date:** 06/23/2022 **Type:** STANDARD **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #04HF11 Served 11/29/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.07(2)(a)	SERVICES	1/19/23	Yes
88.07(4)(b)	3 NUTRITIOUS MEALS AND SNACKS	1/19/23	Yes

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Provider Inspection Summary

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

Adult Family Home

Enforcement History (GIMMEL SOUTHERN HOPE HOMES--0017062)

Date: 02/28/2023 **SOD #** YH3011 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
ORDER TO COMPLY

Complaint History (GIMMEL SOUTHERN HOPE HOMES--0017062)

Date Complaint Received: 08/29/2022

Date Investigation Completed: 11/11/2022

Subject Area(s)
PROGRAM SERVICES

Result
SUBSTANTIATED

SOD #
YH3011

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: HAWTHORNE HOME (0010868)

Address: 6244 95TH AVE, KENOSHA, WI 53142

License Status: REGULAR

Licensed/Certified/Registered 05/11/2005 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: HICKORY HOME (0009032)

Address: 5915 67TH ST, KENOSHA, WI 53142

License Status: REGULAR

Licensed/Certified/Registered 06/01/2000 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: JAMES ALAN HOME 1 (0016270)

Address: 604 46TH STREET, KENOSHA, WI 53140

License Status: REGULAR

Licensed/Certified/Registered 01/05/2017 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0142041 **End Date:** 01/26/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Enforcement History (JAMES ALAN HOME 1--0016270)

Date: 04/01/2022 **SOD #**ER8Z11 **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: JUNIPER HOME (0015377)

Address: 3513 29TH STREET, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 01/13/2015 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: Lee Andrews Home of Love and Gifted Hands Inc (0019382)

Address: 4910 63rd Avenue, Kenosha, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 08/13/2024 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0147382 **End Date:** 08/13/2024 **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: LILLIANS HOUSE (0015668)

Address: 3205 45TH STREET UPPER, KENOSHA, WI 53140

License Status: REGULAR

Licensed/Certified/Registered 05/26/2015 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0146485 **End Date:** 04/19/2024 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT/VV

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0144334 **End Date:** 08/17/2023 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0143073 **End Date:** 03/17/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #TPEL13 Served 11/30/2023

<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	4/19/24	Yes

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Provider Inspection Summary

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

Adult Family Home

Survey ID: 0141507 **End Date:** 06/08/2022 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #TPEL12 Served 12/06/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u> <u>Verified</u>	<u>Corrected</u>
88.05(4)(c)1	EXITING FROM THE FIRST FLOOR	3/17/23	Yes

Enforcement History (LILLIANS HOUSE--0015668)

Date: 11/29/2023 **SOD #**TPEL13 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
ORDER TO COMPLY

Date: 12/06/2022 **SOD #**TPEL12 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
COMPLY WITH REQUIREMENT
NO NEW ADMISSIONS
ORDER TO COMPLY

Complaint History (LILLIANS HOUSE--0015668)

Date Complaint Received: 11/22/2023 **Date Investigation Completed:** 04/19/2024

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

Date Complaint Received: 05/16/2023 **Date Investigation Completed:** 08/17/2023

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
PHYSICAL ENVIRONMENT/SAFETY	NOT SUBSTANTIATED	
PROGRAM SERVICES	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: OUR CARING HANDS LLC (0017529)

Address: 934 43RD ST, KENOSHA, WI 53140

License Status: REGULAR

Licensed/Certified/Registered 07/03/2019 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: PHOENIX HOME (0016108)

Address: 6434 21ST AVENUE, KENOSHA, WI 53143

License Status: REGULAR

Licensed/Certified/Registered 04/14/2016 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: Priceless Time Adult Family Home III (0020494)

Address: 5509 58TH AVE, Kenosha, WI 53144

License Status: REGULAR

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

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0148299 **End Date:** 12/11/2024 **Type:** INITIAL **Purpose:** SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: RAYMOND JOHN AND STEPHEN LLOYD LLC (0014867)

Address: 5500 41ST STREET, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 01/08/2014 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: ROYALE TRANSITIONAL LIVING HOMES (0016623)
Address: 4047 32ND AVE, KENOSHA, WI 53142
License Status: REGULAR
Licensed/Certified/Registered 05/05/2017 12:00:00AM
Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0144703 **End Date:** 11/01/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT
Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0143644 **End Date:** 03/08/2023 **Type:** OTHER **Purpose:** VERIFICATION VISIT
Results: ENFORCEMENT ACTION

Statement of Deficiency: #X8R314 Served 07/17/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	
		<u>Verified</u>	<u>Corrected</u>
88.04(2)(a)	RESPONSIBILITIES	11/1/23	Yes
88.05(2)(a)	DIFFICULTY WALKING	11/1/23	Yes
88.05(4)(c)1	EXITING FROM THE FIRST FLOOR	11/1/23	Yes

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Provider Inspection Summary

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

Adult Family Home

Survey ID: 0141339 **End Date:** 05/24/2022 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #X8R313 Served 11/11/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(2)(a)	RESPONSIBILITIES		
88.05(2)(a)	DIFFICULTY WALKING		
88.05(4)(c)1	EXITING FROM THE FIRST FLOOR		

Enforcement History (ROYALE TRANSITIONAL LIVING HOMES--0016623)

Date: 07/17/2023 **SOD #**X8R314 **Appealed:** Yes **Decision:** STIPULATION

Sanctions

REVOKE LICENSE
NNAO EXTENDED
ORDER TO COMPLY

Date: 11/11/2022 **SOD #**X8R313 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
COMPLY WITH REQUIREMENT
NNAO EXTENDED
ORDER TO COMPLY

Date: 04/06/2022 **SOD #**X8R312 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
NO NEW ADMISSIONS
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: SAFE AND SOUND GROUP LIVING LLC (0016981)

Address: 3406 55TH AVE, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 12/07/2017 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0140142 **End Date:** 02/09/2022 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey History

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

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: Serenity Care AFH LLC (0019768)

Address: 4814 34th Ave, Kenosha, WI 531446715

License Status: REGULAR

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

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0144864 **End Date:** 11/01/2023 **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: SOUTHERN HOPE HOMES LLC-BET HOME (0016229)

Address: 1506 74TH ST, KENOSHA, WI 53143

License Status: REGULAR

Licensed/Certified/Registered 10/20/2016 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0143184 **End Date:** 02/21/2023 **Type:** OTHER **Purpose:** SURVEY

Results: 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: Unlimited Home Care Services LLC (0020048)

Address: 8220 25th Ct, Kenosha, WI 53143

License Status: REGULAR

Licensed/Certified/Registered 09/30/2024 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0147727 **End Date:** 09/30/2024 **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: WILLIES RESIDENTIAL (0016190)

Address: 3209 45TH STREET UPPER, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 11/22/2016 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0139421 **End Date:** 01/22/2022 **Type:** STANDARD **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey History

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

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: WILLOW HOME (0013842)

Address: 3102 15TH ST, KENOSHA, WI 53144

License Status: REGULAR

Licensed/Certified/Registered 09/06/2011 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0139034 **End Date:** 03/04/2022 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: AN INNOVATIVE CARE II (0017816)

Address: 12124 43RD AVE, PLEASANT PRAIRIE, WI 53158

License Status: REGULAR

Licensed/Certified/Registered 09/18/2019 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: AN INNOVATIVE CARE (0016008)

Address: 4297 123RD STREET, PLEASANT PRAIRIE, WI 53158

License Status: REGULAR

Licensed/Certified/Registered 06/07/2016 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

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: Matthias Academy Athena House (0019629)

Address: 9617 84th Place, Pleasant Prairie, WI 53158

License Status: REGULAR

Licensed/Certified/Registered 07/19/2023 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0147235 **End Date:** 07/10/2024 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #7NJ511 Served 08/06/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(2)(g)1	HEALTH SCREENING FOR STAFF		
88.05(4)(d)2.a	FIRE SAFETY EVACUATION PLAN REVIEW		
88.06(2)(a)	ADMISSION-HEALTH EXAM		
88.06(3)(a)	INDIVIDUAL SERVICE PLAN & ASSESSMENT		
88.07(3)(d)	MEDICATION- WRITTEN ORDER		
88.09(1)(d)11	RESIDENT FUNDS		

Survey ID: 0143722 **End Date:** 07/19/2023 **Type:** INITIAL **Purpose:** SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

Enforcement History (Matthias Academy Athena House--0019629)

Date: 08/06/2024 **SOD #**7NJ511 **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 (Matthias Academy Athena House--0019629)

Date Complaint Received: 06/13/2024

Date Investigation Completed: 07/10/2024

Subject Area(s)
PROGRAM SERVICES
RESIDENT RIGHTS

Result
SUBSTANTIATED
NOT SUBSTANTIATED

SOD #
7NJ511

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: Matthias Academy Rensch House (0020236)

Address: 12210 Antioch Rd, Trevor, WI 53179

License Status: REGULAR

Licensed/Certified/Registered 08/29/2024 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0147530 **End Date:** 08/29/2024 **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: HEART TO HEART AFH TWIN LAKES (0017375)

Address: 1222 WINGEDFOOT DR, TWIN LAKES, WI 53181

License Status: REGULAR

Licensed/Certified/Registered 08/21/2019 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0146786 **End Date:** 05/20/2024 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #CSX811 Served 06/26/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.03(3)(b)	CRIMINAL RECORDS CHECK		
88.06(2)(b)	SERVICE AGREEMENT EXCEPT RESPITE		
88.06(2)(c)6	PERSONAL FUNDS		
88.06(3)(a)	INDIVIDUAL SERVICE PLAN & ASSESSMENT		
88.07(3)(d)	MEDICATION- WRITTEN ORDER		

Enforcement History (HEART TO HEART AFH TWIN LAKES--0017375)

Date: 06/26/2024 **SOD #**CSX811 **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 (HEART TO HEART AFH TWIN LAKES--0017375)

Date Complaint Received: 12/12/2023

Date Investigation Completed: 05/20/2024

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

SUBSTANTIATED

CSX811

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Provider Inspection Summary

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

Adult Family Home

Facility Information

Facility Name: Matthias Academy Atlas House (0019821)

Address: 2119 Laurie Court, Twin Lakes, WI 53181

License Status: REGULAR

Licensed/Certified/Registered 02/22/2024 12:00:00AM

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0145714 **End Date:** 02/22/2024 **Type:** INITIAL **Purpose:** SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

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