

## Provider Inspection Summary

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

Rock

### Notes

**This report includes Provider Inspection Summaries (Facility Profiles) for Residential Care Apartment Complexes in Rock County.**

**The report is a PDF (Adobe Acrobat) document and includes a total of 23.00 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  
Residential Care Apartment Complex (REGISTERED)

### Facility Information

**Facility Name:** BELOIT CARE SUITES (0019223)  
**Address:** 2102 FREEMAN PARKWAY, BELOIT, WI 53511  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 01/22/2024 12:00:00AM  
**Regional Office:** SOUTHERN REGION (MADISON), (608) 264-9888

### Survey History

**Survey ID:** 0145340    **End Date:** 01/22/2024    **Type:** INITIAL    **Purpose:** SURVEY  
**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:** BELOIT SENIOR LIVING (0016888)  
**Address:** 2250 W HART RD, BELOIT, WI 53511  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 11/10/2017 12:00:00AM  
**Regional Office:** SOUTHERN REGION (MADISON), (608) 264-9888

### Survey History

**Survey ID:** 0145782    **End Date:** 02/28/2024    **Type:** OTHER    **Purpose:** COMPLAINT  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0143535    **End Date:** 06/21/2023    **Type:** ABBREVIATED    **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

### Complaint History (BELOIT SENIOR LIVING--0016888)

**Date Complaint Received:** 02/16/2024    **Date Investigation Completed:** 02/28/2024  
Subject Area(s)    Result    SOD #  
RESIDENT RIGHTS    NOT SUBSTANTIATED

**Date Complaint Received:** 05/15/2023    **Date Investigation Completed:** 06/21/2023  
Subject Area(s)    Result    SOD #  
RESIDENT RIGHTS    NOT SUBSTANTIATED

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## Provider Inspection Summary

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

### Facility Information

**Facility Name:** RIVERSIDE TERRACE (0010295)  
**Address:** 3055 S RIVERSIDE DRIVE, BELOIT, WI 53511  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 06/01/2001 12:00:00AM  
**Regional Office:** SOUTHERN REGION (MADISON), (608) 264-9888

### Survey History

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

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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:** WILLOWICK SENIOR LIVING BELOIT (0018181)  
**Address:** 3024 SOUTH BARTELLS DRIVE, BELOIT, WI 53511  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 09/02/2020 12:00:00AM  
**Regional Office:** SOUTHERN REGION (MADISON), (608) 264-9888

### Survey History

**Survey ID:** 0142553    **End Date:** 03/16/2023    **Type:** STANDARD    **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  
Residential Care Apartment Complex (CERTIFIED)

#### Facility Information

**Facility Name:** SWIFTHAVEN COMMUNITY (0013881)  
**Address:** 124 HENRY ST, EDGERTON, WI 53534  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 10/01/2011 12:00:00AM  
**Regional Office:** SOUTHERN REGION (MADISON), (608) 264-9888

#### Survey History

**Survey ID:** 0148131    **End Date:** 09/04/2024    **Type:** OTHER    **Purpose:** COMPLAINT/VV

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #YZ4N12    Served 11/19/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.23(4)(d)2.c	SERVICES	2/14/25	Yes

**Survey ID:** 0146821    **End Date:** 05/28/2024    **Type:** STANDARD    **Purpose:** SURVEY/COMPLAINT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #YZ4N11    Served 06/28/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.23(4)(a)2	SERVICES	9/4/24	Yes

**Survey ID:** 0145037    **End Date:** 11/22/2023    **Type:** OTHER    **Purpose:** 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)

**Survey ID:** 0143531    **End Date:** 06/21/2023    **Type:** OTHER    **Purpose:** COMPLAINT/VV

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Survey ID:** 0142928    **End Date:** 02/08/2023    **Type:** OTHER    **Purpose:** COMPLAINT/VV

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #O9EV12    Served 05/04/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.28(2)(a)1	RISK AGREEMENT	6/21/23	Yes
89.28(2)(a)5	RISK AGREEMENT	6/21/23	Yes

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**Survey ID:** 0141487    **End Date:** 09/22/2022    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #O9EV11    Served 12/07/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.23(3)(f)	SERVICES	2/8/23	Yes
89.26(3)(b)	PARTICIPATION IN THE ASSESSMENT	2/8/23	Yes

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### Provider Inspection Summary

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

#### Enforcement History (SWIFTHAVEN COMMUNITY--0013881)

**Date:** 11/19/2024      **SOD #**YZ4N12      **Appealed:**

Sanctions  
ORDER TO COMPLY  
FORFEITURE---89.23 (4)(d)2.c

**Date:** 06/28/2024      **SOD #**YZ4N11      **Appealed:**

Sanctions  
ORDER TO COMPLY  
FORFEITURE---89.23 (4)(a)2.

**Date:** 05/04/2023      **SOD #**O9EV12      **Appealed:**

Sanctions  
ORDER TO COMPLY  
FORFEITURE---89.28 (2)(a)5

**Date:** 12/07/2022      **SOD #**O9EV11      **Appealed:** No

Sanctions  
ORDER TO COMPLY

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## Provider Inspection Summary

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

### Complaint History (SWIFHAVEN COMMUNITY--0013881)

**Date Complaint Received: 07/29/2024**

**Date Investigation Completed: 08/26/2024**

Subject Area(s)  
PROGRAM SERVICES

Result  
SUBSTANTIATED

SOD #  
YZ4N12

**Date Complaint Received: 04/30/2024**

**Date Investigation Completed: 05/28/2024**

Subject Area(s)  
RESIDENT RIGHTS

Result  
SUBSTANTIATED

SOD #  
YZ4N11

**Date Complaint Received: 11/21/2023**

**Date Investigation Completed: 11/22/2023**

Subject Area(s)  
RESIDENT RIGHTS

Result  
NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 05/08/2023**

**Date Investigation Completed: 06/19/2023**

Subject Area(s)  
RESIDENT RIGHTS  
RESIDENT RIGHTS

Result  
NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 01/30/2023**

**Date Investigation Completed: 02/08/2023**

Subject Area(s)  
RESIDENT RIGHTS

Result  
NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 12/08/2022**

**Date Investigation Completed: 02/01/2023**

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  
Residential Care Apartment Complex (CERTIFIED)

### Facility Information

**Facility Name:** HEIGHTS OF EVANSVILLE (0017660)  
**Address:** 201 N 4TH ST, EVANSVILLE, WI 53536  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 07/12/2019 12:00:00AM  
**Regional Office:** SOUTHERN REGION (MADISON), (608) 264-9888

### Survey History

**Survey ID:** 0147121    **End Date:** 06/19/2024    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #P46Y11    Served 07/26/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.34(17)	TENANT RIGHTS	6/19/24	Yes

**Survey ID:** 0143366    **End Date:** 06/05/2023    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0142677    **End Date:** 01/11/2023    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #B6QC11    Served 04/05/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.26(4)	ANNUAL REVIEW	6/5/23	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: 0141239**    **End Date: 10/20/2022**    **Type: OTHER**    **Purpose: COMPLAINT/VV**

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID: 0140424**    **End Date: 05/02/2022**    **Type: OTHER**    **Purpose: COMPLAINT**

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #3T6511    Served 08/12/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	
		<u>Verified</u>	<u>Corrected</u>
89.23(2)(a)2.c	SERVICES	10/20/22	Yes
89.34(16)	TENANT RIGHTS	10/20/22	Yes
89.54	REPORTING OF CHANGES	10/20/22	Yes

**Enforcement History (HEIGHTS OF EVANSVILLE--0017660)**

**Date: 07/26/2024**    **SOD #P46Y11**    **Appealed: No**

Sanctions  
 ORDER TO COMPLY

**Date: 04/05/2023**    **SOD #B6QC11**    **Appealed:**

Sanctions  
 ORDER TO COMPLY  
 FORFEITURE---89.26(4)

**Date: 02/10/2022**    **SOD #OLGP11**    **Appealed: No**

Sanctions  
 ORDER TO COMPLY

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### Provider Inspection Summary

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

#### Complaint History (HEIGHTS OF EVANSVILLE--0017660)

**Date Complaint Received: 10/13/2022**

**Date Investigation Completed: 10/20/2022**

Subject Area(s)

Result

SOD #

PHYSICAL ENVIRONMENT/SAFETY

NOT SUBSTANTIATED

**Date Complaint Received: 04/14/2022**

**Date Investigation Completed: 05/02/2022**

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

SUBSTANTIATED

3T6511

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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:** KELLY HOUSE ASSISTED LIVING APARTMENTS (0010246)

**Address:** 121 SOUTH FIFTH ST, EVANSVILLE, WI 53536

**License Status:** REGULAR

**Licensed/Certified/Registered** 07/01/1997 12:00:00AM

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

### Survey History

**Survey ID:** 0140891    **End Date:** 09/22/2022    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

### Enforcement History (KELLY HOUSE ASSISTED LIVING APARTMENTS--0010246)

**Date:** 03/07/2022    **SOD #**KG2T11    **Appealed:** No

Sanctions

ORDER TO COMPLY

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## Provider Inspection Summary

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

### Facility Information

**Facility Name:** CEDAR CREST WATERFORD PLACE APARTMENTS (0010302)

**Address:** 1700 SOUTH RIVER RD, JANESVILLE, WI 53546

**License Status:** REGULAR

**Licensed/Certified/Registered** 07/01/2002 12:00:00AM

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

### Survey History

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

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## Provider Inspection Summary

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

Residential Care Apartment Complex (REGISTERED)

### Facility Information

**Facility Name:** HUNTINGTON (THE) (0014099)

**Address:** 3801 N WRIGHT RD, JANESVILLE, WI 53546

**License Status:** REGULAR

**Licensed/Certified/Registered** 04/13/2012 12:00:00AM

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

### Survey History

**Survey ID:** 0147892    **End Date:** 08/22/2024    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0146296    **End Date:** 04/16/2024    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0145330    **End Date:** 01/10/2024    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0141513    **End Date:** 11/16/2022    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0139550    **End Date:** 04/14/2022    **Type:** OTHER    **Purpose:** 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 (REGISTERED)

### Complaint History (HUNTINGTON (THE)--0014099)

**Date Complaint Received: 06/04/2024**

**Date Investigation Completed: 08/22/2024**

Subject Area(s)  
RESIDENT RIGHTS

Result  
NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 03/26/2024**

**Date Investigation Completed: 04/15/2024**

Subject Area(s)  
PROGRAM SERVICES  
RESIDENT RIGHTS

Result  
NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 12/13/2023**

**Date Investigation Completed: 01/10/2024**

Subject Area(s)  
RESIDENT RIGHTS

Result  
NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 03/29/2022**

**Date Investigation Completed: 04/14/2022**

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  
Residential Care Apartment Complex (CERTIFIED)

#### Facility Information

**Facility Name:** OAK PARK PLACE OF JANESVILLE RCAC (0017018)

**Address:** 700 MYRTLE WAY, JANESVILLE, WI 53545

**License Status:** REGULAR

**Licensed/Certified/Registered** 06/15/2018 12:00:00AM

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

#### Survey History

**Survey ID:** 0146664    **End Date:** 06/04/2024    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0144107    **End Date:** 08/29/2023    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0143003    **End Date:** 03/21/2023    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #ZTTI11    Served 05/09/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.34(16)	TENANT RIGHTS	8/29/23	Yes

#### Enforcement History (OAK PARK PLACE OF JANESVILLE RCAC--0017018)

**Date:** 05/09/2023    **SOD #**ZTTI11    **Appealed:**

Sanctions

ORDER TO COMPLY  
FORFEITURE---89.34(16)

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### Provider Inspection Summary

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

#### Complaint History (OAK PARK PLACE OF JANESVILLE RCAC--0017018)

**Date Complaint Received: 02/28/2024**

**Date Investigation Completed: 05/14/2024**

Subject Area(s)

Result

SOD #

RESIDENT RIGHTS

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:** WILLOWICK (0016711)  
**Address:** 2860 LIBERTY LANE, JANESVILLE, WI 53545  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 08/31/2017 12:00:00AM  
**Regional Office:** SOUTHERN REGION (MADISON), (608) 264-9888

### Survey History

**Survey ID:** 0148442    **End Date:** 12/16/2024    **Type:** OTHER    **Purpose:** SURVEY/COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0147078    **End Date:** 04/04/2024    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #BXVC12    Served 07/24/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
89.23(2)(a)2.c	SERVICES	12/11/24	Yes

**Survey ID:** 0143978    **End Date:** 08/11/2023    **Type:** OTHER    **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0142206    **End Date:** 01/31/2023    **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)

**Survey ID: 0141621**    **End Date: 08/20/2022**    **Type: OTHER**    **Purpose: COMPLAINT**

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #2K7211    Served 12/15/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	
		<u>Verified</u>	<u>Corrected</u>
89.23(2)(a)2.b	SERVICES	4/1/24	Yes
89.24(3)(a)	HOURS OF SERVICE	4/1/24	No
89.29(3)(b)	ADMISSION & RETENTION OF TENANTS	4/1/24	No

**Survey ID: 0140908**    **End Date: 05/29/2022**    **Type: OTHER**    **Purpose: COMPLAINT**

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #BXVC11    Served 10/03/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	
		<u>Verified</u>	<u>Corrected</u>
89.23(1)	SERVICES	4/4/24	No
89.23(2)(a)2.a	SERVICES	4/4/24	No
89.23(2)(a)2.b	SERVICES	4/4/24	No
89.23(2)(a)2.c	SERVICES	4/4/24	Yes
89.26(1)	COMPREHENSIVE ASSESSMENT	4/4/24	Yes
89.34(1)	TENANT RIGHTS	4/4/24	Yes
89.34(18)	TENANT RIGHTS	4/4/24	Yes

**Survey ID: 0139566**    **End Date: 04/29/2022**    **Type: OTHER**    **Purpose: DESK REVIEW**

**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 (WILLOWICK--0016711)

**Date:** 07/24/2024      **SOD #**BXVC12      **Appealed:** No

Sanctions

ORDER TO COMPLY  
FORFEITURE---83.23(2)(a)2.c

**Date:** 12/15/2022      **SOD #**2K7211      **Appealed:** Yes      **Decision:** STIPULATION

Sanctions

ORDER TO COMPLY  
FORFEITURE---89.23(2)(a)2.b.  
FORFEITURE---89.24 (3)(a)  
FORFEITURE---89.29(3)(b)

**Date:** 10/03/2022      **SOD #**BXVC11      **Appealed:** Yes      **Decision:** STIPULATION

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION  
ORDER TO COMPLY  
FORFEITURE---89.23(1)  
FORFEITURE---89.23(2)(a)2.a  
FORFEITURE---89.23(2)(a)2.c  
FORFEITURE---89.26(1)  
FORFEITURE---89.34(18)

**Date:** 02/07/2022      **SOD #**WSF511      **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION  
ORDER TO COMPLY

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## Provider Inspection Summary

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

### Complaint History (WILLOWICK--0016711)

**Date Complaint Received: 07/27/2023**

**Date Investigation Completed: 08/10/2023**

Subject Area(s)  
RESIDENT RIGHTS

Result  
NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 12/28/2022**

**Date Investigation Completed: 02/01/2023**

Subject Area(s)  
ADMINISTRATION

Result  
NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 06/24/2022**

**Date Investigation Completed: 08/20/2022**

Subject Area(s)  
RESIDENT RIGHTS

Result  
SUBSTANTIATED

SOD #  
2K7211

**Date Complaint Received: 04/06/2022**

**Date Investigation Completed: 05/27/2022**

Subject Area(s)  
RESIDENT RIGHTS  
STAFF TRAINING AND PROFICIENCY

Result  
SUBSTANTIATED  
SUBSTANTIATED

SOD #  
BXVC11  
BXVC11

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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:** MILTON SENIOR LIVING LLC (0013981)  
**Address:** 600 W SUNSET DR, MILTON, WI 53563  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 02/01/2012 12:00:00AM  
**Regional Office:** SOUTHERN REGION (MADISON), (608) 264-9888

### Survey History

**Survey ID:** 0148280    **End Date:** 12/03/2024    **Type:** ABBREVIATED    **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Survey ID:** 0140493    **End Date:** 07/21/2022    **Type:** ABBREVIATED    **Purpose:** SURVEY  
**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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