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 12.00 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 2/8/2017 to 2/8/2020

Residential Care Apartment Complex (CERTIFIED)

### Facility Information

<table>
<thead>
<tr>
<th>Facility Name:</th>
<th>BELOIT SENIOR LIVING (0016888)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>2250 W HART RD, BELOIT, WI 53511</td>
</tr>
<tr>
<td>License Status:</td>
<td>REGULAR</td>
</tr>
<tr>
<td>Licensed/Certified/Registered:</td>
<td>11/10/2017 12:00:00AM</td>
</tr>
<tr>
<td>Regional Office:</td>
<td>SOUTHERN REGION (MADISON), (608) 264-9888</td>
</tr>
</tbody>
</table>

### Survey History

<table>
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<tr>
<th>Survey ID:</th>
<th>0125067</th>
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<th>Type:</th>
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<th>Purpose:</th>
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Provider Inspection Summary
For the period 2/8/2017 to 2/8/2020
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 6/1/2001 12:00:00AM
Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

No survey activity during the period 2/8/17 to 2/8/20
Facility Information

Facility Name: SWIFTHAVEN COMMUNITY (0013881)
Address: 124 HENRY ST, EDGERTON, WI 53534
License Status: REGULAR
Licensed/Certified/Registered 10/1/2011 12:00:00AM
Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0126452  End Date: 2/6/2018  Type: STANDARD  Purpose: SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

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## Facility Information

<table>
<thead>
<tr>
<th>Facility Name:</th>
<th>HEIGHTS OF EVANSVILLE (0017660)</th>
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<tr>
<td>Address:</td>
<td>201 N 4TH ST, EVANSVILLE, WI 53536</td>
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<tr>
<td>License Status:</td>
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<td>Licensed/Certified/Registered:</td>
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## Survey History

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<th>Type:</th>
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<th>Purpose:</th>
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<td></td>
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</tr>
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</table>

*This is Page 5 of 12 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: KELLY HOUSE ASSISTED LIVING APARTMENTS (0010246)
Address: 121 SOUTH FIFTH ST, EVANSVILLE, WI 53536
License Status: REGULAR
Licensed/Certified/Registered 7/1/1997 12:00:00AM
Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0130188 End Date: 4/16/2019 Type: STANDARD Purpose: SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED
Provider Inspection Summary

For the period 2/8/2017 to 2/8/2020

Residential Care Apartment Complex (REGISTERED)

Facility Information

Facility Name: CEDAR CREST WATERFORD PLACE APARTMENTS (0010302)
Address: 1702 SOUTH RIVER RD, JANESVILLE, WI 53546
License Status: REGULAR
Licensed/Certified/Registered 7/1/2002 12:00:00AM
Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

No survey activity during the period 2/8/17 to 2/8/20

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Facility Information

Facility Name: HUNTINGTON (THE) (0014099)
Address: 3801 N WRIGHT RD, JANESVILLE, WI 53546
License Status: REGULAR
Licensed/Certified/Registered 4/13/2012 12:00:00AM
Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0129930 End Date: 1/7/2019 Type: OTHER Purpose: COMPLAINT
Results: ENFORCEMENT ACTION

Survey ID: 0128953 End Date: 11/28/2018 Type: ABBREVIATED Purpose: SURVEY/COMPLAINT
Results: STATEMENT OF DEFICIENCY ISSUED

Enforcement History (HUNTINGTON (THE)--0014099)

Date: 4/18/2019 SOD #SNX811 Appealed: No
Sanctions
REVOKE LICENSE

Complaint History (HUNTINGTON (THE)--0014099)

Date Complaint Received: 10/29/2018 Date Investigation Completed: 11/28/2018
Subject Area(s) Result SOD #
PROGRAM SERVICES SUBSTANTIATED JI4Y11

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Provider Inspection Summary
For the period 2/8/2017 to 2/8/2020
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 6/15/2018 12:00:00AM
Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

Survey History

Survey ID: 0127129  End Date: 6/15/2018  Type: INITIAL  Purpose: SURVEY
Results: LICENSE/CERT/REGISTRATION ISSUED
**Facility Information**

Facility Name: WILLOWICK (0016711)
Address: 2860 LIBERTY LANE, JANESVILLE, WI 53545
License Status: REGULAR
Licensed/Certified/Registered 8/31/2017 12:00:00AM
Regional Office: SOUTHERN REGION (MADISON), (608) 264-9888

<table>
<thead>
<tr>
<th>Survey ID</th>
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<th>Results</th>
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<td>0129291</td>
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<td>0128851</td>
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<td>ENFORCEMENT ACTION</td>
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**Statement of Deficiency:** #RW1611 Served 10/9/2018

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<tr>
<th>Subject Area</th>
<th>Compliance Verified</th>
<th>Corrected</th>
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<tr>
<td>SERVICES</td>
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### Provider Inspection Summary

For the period 2/8/2017 to 2/8/2020

Residential Care Apartment Complex (CERTIFIED)

<table>
<thead>
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<th>Survey ID</th>
<th>End Date</th>
<th>Type</th>
<th>Purpose</th>
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<td>SURVEY/COMPLAINT</td>
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### Enforcement History (WILLOWICK--0016711)

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<th>Decision</th>
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Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

FORFEITURE---89.23(2)(a)2c

### Complaint History (WILLOWICK--0016711)

<table>
<thead>
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<th>Date Complaint Received</th>
<th>Date Investigation Completed</th>
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<th>Result</th>
<th>SOD #</th>
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<tr>
<td>1/11/2019</td>
<td>1/31/2019</td>
<td>PROGRAM SERVICES</td>
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<td>7/13/2018</td>
<td>7/18/2018</td>
<td>RESIDENT RIGHTS</td>
<td>SUBSTANTIATED</td>
<td>RW1611</td>
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<tr>
<td>4/2/2018</td>
<td>4/6/2018</td>
<td>RESIDENT RIGHTS</td>
<td>NOT SUBSTANTIATED</td>
<td></td>
</tr>
</tbody>
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Provider Inspection Summary
For the period 2/8/2017 to 2/8/2020
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:** 2/1/2012 12:00:00AM
- **Regional Office:** SOUTHERN REGION (MADISON), (608) 264-9888

## Survey History

- **Survey ID:** 0126454  
  **End Date:** 2/6/2018  
  **Type:** STANDARD  
  **Purpose:** SURVEY  

- **Results:** NO STATEMENT OF DEFICIENCY ISSUED

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