

## Provider Inspection Summary

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

St Croix

### Notes

**This report includes Provider Inspection Summaries (Facility Profiles) for Adult Family Homes in St Croix 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:** Keela House (0018939)

**Address:** 480 Tracey Lane Unit A, Hudson, WI 54016

**License Status:** REGULAR

**Licensed/Certified/Registered** 09/22/2022 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0140993      **End Date:** 09/22/2022      **Type:** INITIAL      **Purpose:** SURVEY

**Results:** LICENSE/CERT/REGISTRATION ISSUED

**This is Page 2 of 31 total pages. If printing this report ensure that your printer is set to print only the desired pages.**

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## Provider Inspection Summary

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

Adult Family Home

### Facility Information

**Facility Name:** REM NAMEKAGON LOOP (0009105)

**Address:** 1222 NAMEKAGON LOOP, HUDSON, WI 54016

**License Status:** REGULAR

**Licensed/Certified/Registered** 09/01/2000 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0145545    **End Date:** 12/21/2023    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #JZC611    Served 02/08/2024

Deficiencies Cited

88.04(5)(b)

88.05(3)(e)2.b

Subject Area

TRAINING-8 HOURS ANNUALLY

INSPECTIONS-GAS FURNACE

Compliance

Verified

Corrected

### Enforcement History (REM NAMEKAGON LOOP--0009105)

**Date:** 02/08/2024

**SOD #**JZC611

**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

Adult Family Home

### Facility Information

**Facility Name:** Venture Health (0020099)

**Address:** 494 Prairie Ln Apt A, Hudson, WI 540164527

**License Status:** REGULAR

**Licensed/Certified/Registered** 02/03/2025 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

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## Provider Inspection Summary

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

Adult Family Home

### Facility Information

**Facility Name:** AURORA RESIDENTIAL ALTERNATIVES INC 037 (0010825)

**Address:** 973 & 975 JOHNSON DRIVE, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 01/11/2005 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### 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

Adult Family Home

### Facility Information

**Facility Name:** BEAR CREEK HOUSE (0016578)

**Address:** 1720 DUCKTAIL COURT, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 03/07/2017 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0146498    **End Date:** 05/20/2024    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0144776    **End Date:** 09/26/2023    **Type:** ABBREVIATED    **Purpose:** SURVEY/SELF REPORT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #UYDK11    Served 11/08/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(2)(b)	AWAKE STAFF FOR CONTINUOUS CARE	5/20/24	Yes

### Enforcement History (BEAR CREEK HOUSE--0016578)

**Date:** 11/08/2023    **SOD #**UYDK11    **Appealed:** No

Sanctions

ORDER TO COMPLY

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## Provider Inspection Summary

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

Adult Family Home

### Facility Information

**Facility Name:** CHRIS HOMES LLC (0018125)

**Address:** 1416 138TH AVENUE, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 06/25/2020 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### 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

Adult Family Home

### Facility Information

**Facility Name:** COMFORT CARE HOMES AND SERVICES LLC ALPINE RIDGE (0017244)

**Address:** 1728 DUCKTAIL COURT, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 11/01/2018 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0146499      **End Date:** 05/20/2024      **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

Adult Family Home

### Facility Information

**Facility Name:** MEADOW VIEW (0010211)

**Address:** 601 HAGEN AVE, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 09/16/2003 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0146550    **End Date:** 05/15/2024    **Type:** ABBREVIATED    **Purpose:** SURVEY/COMPLAINT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #HW7Q11    Served 05/29/2024

Deficiencies Cited

88.07(3)(a)

88.07(3)(e)1

Subject Area

PRESCRIPTION MEDICATIONS

MEDICATION- RECORD KEEPING

Compliance

Verified

Corrected

### Enforcement History (MEADOW VIEW--0010211)

**Date:** 05/29/2024    **SOD #**HW7Q11    **Appealed:** No

Sanctions

ORDER TO COMPLY

### Complaint History (MEADOW VIEW--0010211)

**Date Complaint Received:** 03/15/2024

**Date Investigation Completed:** 05/15/2024

Subject Area(s)

PROGRAM SERVICES

Result

SUBSTANTIATED

SOD #

HW7Q11

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## Provider Inspection Summary

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

Adult Family Home

### Facility Information

**Facility Name:** NORTHGATE (0011948)

**Address:** 1314 - 214TH AVE, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 04/27/2007 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0143517    **End Date:** 06/21/2023    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0142621    **End Date:** 01/26/2023    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #PCOC12    Served 03/31/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(3)(a)	HOME ENVIRONMENT	6/21/23	Yes

**Survey ID:** 0139796    **End Date:** 05/26/2022    **Type:** STANDARD    **Purpose:** SURVEY/SELF REPORT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #PCOC11    Served 06/09/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(3)(a)	HOME ENVIRONMENT	1/26/23	No
88.06(3)(f)	REVIEW OF ISP	1/26/23	Yes

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## Provider Inspection Summary

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

Adult Family Home

### Enforcement History (NORTHGATE--0011948)

**Date:** 03/31/2023      **SOD #**PCOC12      **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION  
ORDER TO COMPLY

**Date:** 06/08/2022      **SOD #**PCOC11      **Appealed:** No

Sanctions

ORDER TO COMPLY

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## Provider Inspection Summary

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

Adult Family Home

### Facility Information

**Facility Name:** NORTHSIDE (0010811)

**Address:** 900 N FOURTH ST, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 01/03/2005 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### 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

Adult Family Home

### Facility Information

**Facility Name:** NORTHWEST TRANSITIONS (0013948)

**Address:** 847 HIGHVIEW DRIVE UNIT A, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 12/19/2011 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0142749    **End Date:** 04/10/2023    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #PBDG11    Served 04/12/2023

Deficiencies Cited  
88.05(4)(a)

Subject Area  
FIRE SAFETY-FIRE EXTINGUISHERS

Compliance  
Verified  
5/27/23

Corrected

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## Provider Inspection Summary

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

Adult Family Home

### Facility Information

**Facility Name:** OAKSIDE (0017003)

**Address:** 330 OAK AVE, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 01/25/2018 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0147508    **End Date:** 08/12/2024    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #3CV212    Served 09/05/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.03(5)(e)1	SIGNIFICANT CHANGE TO THE RESIDENT		
88.06(3)(f)	REVIEW OF ISP		
88.07(3)(e)1	MEDICATION- RECORD KEEPING		

**Survey ID:** 0143543    **End Date:** 06/27/2023    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #3CV211    Served 06/30/2023

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(3)(a)	HOME ENVIRONMENT	8/12/24	Yes
88.06(2)(c)8	RESIDENT RIGHTS AND GRIEVANCE	8/12/24	Yes
88.07(3)(e)1	MEDICATION- RECORD KEEPING	8/12/24	No
88.07(4)(c)	FOOD PREPARED AND STORED SANITARY WAY	8/12/24	Yes

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## Provider Inspection Summary

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

Adult Family Home

### Enforcement History (OAKSIDE--0017003)

**Date:** 09/05/2024      **SOD #**3CV212      **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION  
ORDER TO COMPLY

**Date:** 06/30/2023      **SOD #**3CV211      **Appealed:** No

Sanctions

ORDER TO COMPLY

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## Provider Inspection Summary

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

Adult Family Home

### Facility Information

**Facility Name:** PINE VIEW (0010213)

**Address:** 727 E SIXTH STREET, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 09/16/2003 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0144756      **End Date:** 11/03/2023      **Type:** OTHER      **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0142054      **End Date:** 01/26/2023      **Type:** OTHER      **Purpose:** COMPLAINT/VV

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0140942      **End Date:** 06/29/2022      **Type:** STANDARD      **Purpose:** SURVEY/COMPLAINT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #ZE6Q11      Served 10/06/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	
		<u>Verified</u>	<u>Corrected</u>
88.04(2)(g)1	HEALTH SCREENING FOR STAFF	1/26/23	Yes
88.06(3)(f)	REVIEW OF ISP	1/26/23	Yes
88.09(1)(a)	RESIDENT RECORDS	1/26/23	Yes
88.10(3)(a)	FAIR TREATMENT	1/26/23	Yes
88.10(3)(n)1	FREEDOM FROM SECLUSION AND RESTRAINTS	1/26/23	Yes

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## Provider Inspection Summary

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

Adult Family Home

### Enforcement History (PINE VIEW--0010213)

**Date:** 10/06/2022      **SOD #** ZE6Q11      **Appealed:** No

Sanctions

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

### Complaint History (PINE VIEW--0010213)

**Date Complaint Received:** 08/08/2023      **Date Investigation Completed:** 11/03/2023

Subject Area(s)  
PROGRAM SERVICES

Result      SOD #  
NOT SUBSTANTIATED

**Date Complaint Received:** 01/09/2023

**Date Investigation Completed:** 01/26/2023

Subject Area(s)  
ADMINISTRATION

Result      SOD #  
NOT SUBSTANTIATED

**Date Complaint Received:** 05/04/2022

**Date Investigation Completed:** 06/29/2022

Subject Area(s)  
RESIDENT RIGHTS

Result      SOD #  
SUBSTANTIATED      ZE6Q11

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## Provider Inspection Summary

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

Adult Family Home

### Facility Information

**Facility Name:** REM DOMAN (0018286)

**Address:** 1366 DOMAN DR, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/12/2020 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0144443    **End Date:** 09/27/2023    **Type:** OTHER    **Purpose:** VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0140760    **End Date:** 06/29/2022    **Type:** STANDARD    **Purpose:** SURVEY/SELF REPORT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #1MIT11    Served 09/15/2022

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance</u>	
		<u>Verified</u>	<u>Corrected</u>
88.04(2)(g)1	HEALTH SCREENING FOR STAFF	9/27/23	Yes
88.04(5)(a)	TRAINING-15 HOURS WITHIN 6 MONTHS	9/27/23	Yes
88.05(3)(a)	HOME ENVIRONMENT	9/27/23	Yes
88.07(3)(a)	PRESCRIPTION MEDICATIONS	9/27/23	Yes
88.10(3)(b)	PRIVACY	9/27/23	Yes
88.10(3)(l)	SAFE PHYSICAL ENVIRONMENT	9/27/23	Yes
88.10(3)(m)	FREEDOM FROM ABUSE	9/27/23	Yes

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## Provider Inspection Summary

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

Adult Family Home

### Enforcement History (REM DOMAN--0018286)

**Date:** 09/15/2022      **SOD #**1MIT11      **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

Adult Family Home

### Facility Information

**Facility Name:** REM WISCONSIN INC PHEASANT RUN (0015659)

**Address:** 1260 PHEASANT RUN, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 05/11/2015 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### 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

Adult Family Home

### Facility Information

**Facility Name:** THUNDERWILLOW RESIDENTIAL 001 (0017534)

**Address:** 1246 CREEKWOOD DRIVE, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 06/15/2019 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0147820      **End Date:** 10/04/2024      **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

Adult Family Home

### Facility Information

**Facility Name:** THUNDERWILLOW RESIDENTIAL 002 (0017535)

**Address:** 1382 CREEKWOOD DRIVE, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 05/01/2019 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0147819      **End Date:** 10/04/2024      **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

Adult Family Home

### Facility Information

**Facility Name:** THUNDERWILLOW RESIDENTIAL 003 (0017536)  
**Address:** 1234 CREEKWOOD DRIVE, NEW RICHMOND, WI 54017  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 06/15/2019 12:00:00AM  
**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0147810    **End Date:** 10/04/2024    **Type:** STANDARD    **Purpose:** SURVEY

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #PCL911    Served 10/14/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(4)(b)1	FIRE SAFETY-SMOKE DETECTORS		
88.10(3)(l)	SAFE PHYSICAL ENVIRONMENT		

### Enforcement History (THUNDERWILLOW RESIDENTIAL 003--0017536)

**Date:** 10/14/2024    **SOD #**PCL911    **Appealed:** No

Sanctions  
ORDER TO COMPLY

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## Provider Inspection Summary

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

Adult Family Home

### Facility Information

**Facility Name:** WINDSOR POND HOUSE (0016579)

**Address:** 1722 DUCKTAIL COURT, NEW RICHMOND, WI 54017

**License Status:** REGULAR

**Licensed/Certified/Registered** 05/08/2017 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0147339    **End Date:** 08/07/2024    **Type:** OTHER    **Purpose:** COMPLAINT/VV

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0146529    **End Date:** 05/20/2024    **Type:** ABBREVIATED    **Purpose:** SURVEY

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #099111    Served 05/24/2024

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(2)(b)	AWAKE STAFF FOR CONTINUOUS CARE	8/7/24	Yes

### Enforcement History (WINDSOR POND HOUSE--0016579)

**Date:** 05/24/2024    **SOD #**099111    **Appealed:** No

Sanctions

ORDER TO COMPLY

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## Provider Inspection Summary

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

Adult Family Home

### Complaint History (WINDSOR POND HOUSE--0016579)

**Date Complaint Received: 06/10/2024**

**Date Investigation Completed: 08/07/2024**

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

Adult Family Home

### Facility Information

**Facility Name:** GROWING WINGS LLC UNIT 101 (0020440)

**Address:** 745 PARENT STREET UNIT 101, SOMERSET, WI 54025

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/01/2024 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0147739      **End Date:** 10/01/2024      **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

Adult Family Home

### Facility Information

**Facility Name:** GROWING WINGS LLC UNIT 102 (0020435)

**Address:** 745 PARENT STREET, UNIT 102, SOMERSET, WI 54025

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/01/2024 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0147742      **End Date:** 10/01/2024      **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

Adult Family Home

### Facility Information

**Facility Name:** GROWING WINGS LLC UNIT 103 (0020438)

**Address:** 745 PARENT STREET UNIT 103, SOMERSET, WI 54025

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/01/2024 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0147744      **End Date:** 10/01/2024      **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

Adult Family Home

### Facility Information

**Facility Name:** GROWING WINGS LLC UNIT 104 (0020436)

**Address:** 745 PARENT STREET UNIT 104, SOMERSET, WI 54025

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/01/2024 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0147747      **End Date:** 10/01/2024      **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

Adult Family Home

### Facility Information

**Facility Name:** GROWING WINGS LLC UNIT 105 (0020439)

**Address:** 745 PARENT STREET UNIT 105, SOMERSET, WI 54025

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/01/2024 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0147749      **End Date:** 10/01/2024      **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

Adult Family Home

### Facility Information

**Facility Name:** GROWING WINGS LLC UNIT 106 (0020437)

**Address:** 745 PARENT STREET UNIT 106, SOMERSET, WI 54025

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/01/2024 12:00:00AM

**Regional Office:** NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

### Survey History

**Survey ID:** 0147750      **End Date:** 10/01/2024      **Type:** INITIAL      **Purpose:** SURVEY

**Results:** LICENSE/CERT/REGISTRATION ISSUED

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