

Provider Inspection Summary

For the period 08/25/2018 to 08/24/2021

Notes

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

The report is a PDF (Adobe Acrobat) document and includes a total of 11.00 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 08/25/2018 to 08/24/2021
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: BIRCHWOOD APARTMENTS (0010248)
Address: 1600 BIRCHWOOD DRIVE, BALDWIN, WI 54002
License Status: REGULAR
Licensed/Certified/Registered 09/01/1998 12:00:00AM
Regional Office: NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

Survey History

Survey ID: 0128537 **End Date:** 11/07/2018 **Type:** ABBREVIATED **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

For the period 08/25/2018 to 08/24/2021
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: HAVENWOOD LLC (0012494)
Address: 614 E OAK ST, GLENWOOD CITY, WI 54013
License Status: REGULAR
Licensed/Certified/Registered 09/16/2008 12:00:00AM
Regional Office: NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

Survey History

Survey ID: 0131424 **End Date:** 09/10/2019 **Type:** ABBREVIATED **Purpose:** SURVEY/COMPLAINT
Results: NO STATEMENT OF DEFICIENCY ISSUED

Complaint History (HAVENWOOD LLC-0012494)

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
Date Complaint Received: 09/03/2019	Date Investigation Completed: 09/10/2019	
PHYSICAL ENVIRONMENT/SAFETY	NOT SUBSTANTIATED	
PROGRAM SERVICES	NOT SUBSTANTIATED	

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Provider Inspection Summary

For the period 08/25/2018 to 08/24/2021
Residential Care Apartment Complex (REGISTERED)

Facility Information

Facility Name: HERITAGE COURT (0016879)
Address: 425 DAVIS ST, HAMMOND, WI 54015
License Status: REGULAR
Licensed/Certified/Registered 10/01/2017 12:00:00AM
Regional Office: NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

Survey History

No survey activity during the period 8/25/18 to 8/24/21

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Provider Inspection Summary

For the period 08/25/2018 to 08/24/2021
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: RED CEDAR CANYON ASSISTED LIVING LLC (0014783)
Address: 3001 HANLEY ROAD, HUDSON, WI 54016
License Status: REGULAR
Licensed/Certified/Registered 04/01/2014 12:00:00AM
Regional Office: NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

Survey History

Survey ID: 0135630 **End Date:** 02/10/2021 **Type:** OTHER **Purpose:** COMPLAINT
Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0129779 **End Date:** 04/01/2019 **Type:** ABBREVIATED **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

Complaint History (RED CEDAR CANYON ASSISTED LIVING LLC--0014783)

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

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Provider Inspection Summary

For the period 08/25/2018 to 08/24/2021
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: WINTERGREEN (0012819)
Address: 1312 WISCONSIN STREET, HUDSON, WI 54016
License Status: REGULAR
Licensed/Certified/Registered 07/01/2009 12:00:00AM
Regional Office: NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

Survey History

Survey ID: 0131560 **End Date:** 09/19/2019 **Type:** ABBREVIATED **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

For the period 08/25/2018 to 08/24/2021

Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: DEERFIELD (THE) RCAC (0010249)

Address: 1127 WEST EIGHTH STREET, NEW RICHMOND, WI 54017

License Status: REGULAR

Licensed/Certified/Registered 09/01/1999 12:00:00AM

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

Survey History

Survey ID: 0131557 **End Date:** 09/19/2019 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0131126 **End Date:** 08/06/2019 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Complaint History (DEERFIELD (THE) RCAC--0010249)

Date Complaint Received: 08/02/2019

Date Investigation Completed: 08/06/2019

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

NOT SUBSTANTIATED

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Provider Inspection Summary

For the period 08/25/2018 to 08/24/2021
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: DEERFIELD TERRACE (THE) (0013394)

Address: 1127 W 8TH ST, NEW RICHMOND, WI 54017

License Status: REGULAR

Licensed/Certified/Registered 08/16/2010 12:00:00AM

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

Survey History

No survey activity during the period 8/25/18 to 8/24/21

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Provider Inspection Summary

For the period 08/25/2018 to 08/24/2021
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: WELLHAVEN SENIOR APARTMENTS LLC (0013453)
Address: 119 UNION ST, RIVER FALLS, WI 54022
License Status: REGULAR
Licensed/Certified/Registered 01/01/2011 12:00:00AM
Regional Office: NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

Survey History

Survey ID: 0134472 **End Date:** 08/06/2020 **Type:** OTHER **Purpose:** COMPLAINT
Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0129462 **End Date:** 03/04/2019 **Type:** ABBREVIATED **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

Complaint History (WELLHAVEN SENIOR APARTMENTS LLC--0013453)

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
Date Complaint Received: 07/22/2020	Date Investigation Completed: 08/06/2020	
STAFF TRAINING AND PROFICIENCY	NOT SUBSTANTIATED	

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Provider Inspection Summary

For the period 08/25/2018 to 08/24/2021
Residential Care Apartment Complex (CERTIFIED)

Facility Information

Facility Name: PARK PLACE APARTMENTS NORTH (0012429)
Address: 220 LOCKWOOD ST, WOODVILLE, WI 54028
License Status: REGULAR
Licensed/Certified/Registered 08/04/2008 12:00:00AM
Regional Office: NORTHWESTERN REGION (EAU CLAIRE), (715) 836-4790

Survey History

Survey ID: 0129854 **End Date:** 04/09/2019 **Type:** ABBREVIATED **Purpose:** SURVEY
Results: NO STATEMENT OF DEFICIENCY ISSUED

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Provider Inspection Summary

For the period 08/25/2018 to 08/24/2021
Residential Care Apartment Complex (REGISTERED)

Facility Information

Facility Name: PARK PLACE APARTMENTS (0012432)

Address: 210 LOCKWOOD ST, WOODVILLE, WI 54028

License Status: REGULAR

Licensed/Certified/Registered 06/13/2008 12:00:00AM

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

Survey History

No survey activity during the period 8/25/18 to 8/24/21

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