

Tony Evers
Governor



DIVISION OF QUALITY ASSURANCE
NORTHEASTERN REGIONAL OFFICE
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GREEN BAY WI 54301

Kirsten L. Johnson
Secretary

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June 13, 2025

ELECTRONIC MAIL
SOD #0MRM11

NOTICE and ORDER
NOTICE OF VIOLATION
ORDER TO COMPLY WITH REQUIREMENTS

Ryan Calmes
3701 E. Evergreen Dr. Ste. 280
Appleton, WI 54913

C/O Licensee: Helens House LLC

Re: Helens House Grand Chute (0018319)
4236 N. Shady Wood Ct.
Appleton, WI 54913

Dear Ryan Calmes:

This letter is a statutory NOTICE of VIOLATION and imposed ORDER on the licensee of Helens House Grand Chute, located at 4236 N. Shady Wood Ct., Appleton, WI 54913, and sets forth appeal rights, if any. This regulatory action is taken by the Department of Health Services (Department) pursuant to Wis. Stat § 50.033(2), and Wis. Admin. Code § DHS 88.

NOTICE OF VIOLATION

On June 9, 2025, a standard survey was concluded for Helens House Grand Chute by the Division of Quality Assurance, Bureau of Assisted Living, to determine if the above-referenced facility was in substantial compliance with Wis. Stat. ch. 50 or Wis. Admin. Code ch. DHS 88, or both, which set forth requirements for the administration and operation of an adult family home (AFH). The Department is issuing Statement of Deficiency (SOD) #0MRM11 for violations of Wis. Stat. ch. 50 or Wis. Admin. Code ch. DHS 88, which establish the grounds for this action. SOD #0MRM11 is enclosed.

ORDER TO COMPLY WITH REQUIREMENTS

1. Pursuant to Wis. Admin. Code § DHS 88.03(6)(g)2.b., effective immediately, the licensee shall comply with the requirements specified by Wis. Admin. Code ch. DHS 88 that establishes the standards for the operation of the Adult Family Home in order to protect and promote the health, safety and welfare of the residents.

AS SOON AS PRACTICABLE AND WITHOUT DELAY, within 45 days of receipt of this notice, the licensee shall achieve and maintain substantial compliance with all requirements.

* * *

If you have questions about this letter, please contact Kathleen D. Teske, Assisted Living Deputy Bureau Director, at (608) 266-0371.

Sincerely,

A handwritten signature in black ink, appearing to read "Kenneth Brotheridge". The signature is fluid and cursive, with a long horizontal line extending from the end of the name.

Kenneth Brotheridge, Assisted Living Director
Bureau of Assisted Living
Division of Quality Assurance

Enclosure
KB/clr