

Tony Evers  
Governor



Kirsten L. Johnson  
Secretary

**State of Wisconsin**  
**Department of Health Services**

**DIVISION OF QUALITY ASSURANCE**

BUREAU OF ASSISTED LIVING  
MADISON/SOUTHERN REGIONAL OFFICE  
Room E300  
201 E Washington Ave  
MADISON WI 53703

Telephone: 608-264-9888  
Fax: 608-264-9889  
TTY: 711 or 800-947-3529

October 17, 2025

**ELECTRONIC MAIL**

SOD #3PQU11

**AMENDED NOTICE AND ORDER**

**NOTICE OF VIOLATION**

**ORDER TO COMPLY WITH REQUIREMENTS**

Matt Teresinski  
2448 S. 102<sup>nd</sup> Street Suite 305  
West Allis, WI 53227

C/O Licensee: OSL SEM Operating LLC

**Re:** Prairie View Manor (0020088) CBRF, Rock County  
111 Commercial Dr.  
Footville, WI 53537

Dear Matt Teresinski:

This letter is a statutory NOTICE of VIOLATION and imposed ORDER on the licensee of Prairie View Manor, located at 111 Commercial Dr., Footville, WI 53537, and sets forth appeal rights, if any. This regulatory action is taken by the Department of Health Services (Department) pursuant to Wis. Stat. § 50.03(5g), and Wis. Admin. Code ch. DHS 83.

**NOTICE OF VIOLATION**

On 09/05/2025, multiple complaint investigations were concluded for Prairie View Manor 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 83, or both, which set forth requirements for the administration and operation of a community-based residential facility (CBRF). The Department is issuing Statement of Deficiency (SOD) #3PQU11 for violations of Wis. Stat. ch. 50 or Wis. Admin. Code ch. DHS 83, which establish the grounds for this action. SOD #3PQU11 is enclosed.

**ORDER TO COMPLY WITH REQUIREMENTS**

1. Pursuant to Wis. Stat. § 50.03(5g)(b)3., effective immediately, the licensee shall comply with the requirements specified by Wis. Stat. ch. 50 and Wis. Admin. Code ch. DHS 83 that establish the standards for the operation of the Community Based Residential Facility 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. All operational and resident records required as evidence of compliance with applicable rules will be available to department representatives upon request.

The Department may, without notice, conduct an inspection to verify the licensee's corrective action at any time after the date of compliance. Pursuant to Wis. Stat. § 50.03(5g)(cm), the department may impose a \$200 inspection fee for an on-site inspection to review compliance of violations resulting in enforcement action.

ADDITIONALLY:

WITHIN 10 DAYS of receipt of this notice, the licensee may request an extension for the date of compliance. The request for an extension must be submitted to the Assisted Living Regional Director, Southern Regional Office, at [DHSDQABALSRO@dhs.wisconsin.gov](mailto:DHSDQABALSRO@dhs.wisconsin.gov). The Regional Director will communicate to the licensee a decision on the date of compliance extension.

**POSTING OF NOTICES**

According to Wis. Admin. Code DHS §§ 83.13(3)(a) and 83.14(2)(h), each facility shall immediately upon receipt post next to its CBRF license, and in a public area that is visually and physically available, any citation/statement of deficiency, notice of revocation, notice of non-renewal, and any other notice of enforcement action. Citations and statements of deficiency shall remain posted for ninety (90) days following receipt. Notices of revocation, non-renewal, and other notices of enforcement action shall remain posted until a final determination is made.

Therefore, the license shall immediately post this Notice and Order letter, and it shall remain posted until a final determination is made

\* \* \*

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Prairie View Manor (0020088)  
CBRF, Rock County  
October 17, 2025

If you have questions about this letter, please contact Hillary Holman, Assisted Living Regional Director, at (608) 266-8339.

Sincerely,

A handwritten signature in black ink, appearing to read "Kenneth Brotheridge". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

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

Enclosure  
KB/SS