

Tony Evers
Governor



Kristen L. Johnson
Secretary

**State of Wisconsin
Department of Health Services**

DIVISION OF QUALITY ASSURANCE

BUREAU OF ASSISTED LIVING
NORTHWESTERN REGIONAL OFFICE
610 GIBSON ST SUITE 1
EAU CLAIRE WI 54701-3687

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October 23, 2024

ELECTRONIC MAIL
SOD #OF7111

NOTICE and ORDER

NOTICE OF VIOLATION

ORDER TO COMPLY WITH REQUIREMENTS

Christine Elmquist
501 280th St
Osceola, WI 54020

C/O Licensee: Community Homestead INC

**Re: Community Homestead Moring Glory, 0009682
515A 280th Street
Osceola, WI 54020**

Dear Christine Elmquist:

This letter is a statutory NOTICE of VIOLATION and imposed ORDER on the licensee of Community Homestead Morning Glory, located at 515A 280th Street, 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 October 16, 2024, an abbreviated survey was concluded for Community Homestead Morning Glory 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) #OF7111 for violations of Wis. Stat. ch. 50 or Wis. Admin. Code ch. DHS 88, which establish the grounds for this action. SOD #OF7111 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

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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 William R. Gardner, Assisted Living Regional Director, at (715) 836-4029.

Sincerely,

A handwritten signature in black ink, appearing to read "Kenneth Brotheridge". The signature is stylized with a large, looped initial "K" and a cursive "B".

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

Enclosure

KB/JAJ