

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0020464	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 07/28/2025
NAME OF PROVIDER OR SUPPLIER ADAVA CARE OF ST FRANCIS II		STREET ADDRESS, CITY, STATE, ZIP CODE 3620 E DENTON AVE BAYVIEW, WI 53235		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
N 000	Initial Comments On 07/28/2025, Surveyor conducted a complaint investigation at Adava Care of St Frances II, a CBRF located in St Frances, WI. As a result of the investigation, 1 violation of Chapter DHS 83 was issued. The complaint was unsubstantiated.	N 000		
N 481	83.43(1) Environment safe, clean, and comfortable Environment. The CBRF shall provide a living environment that is safe, clean, comfortable, and homelike. All common dining and living areas shall contain furnishings appropriate to the intended use of the room. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure a safe, clean, comfortable and homelike environment. The outside door frame was deteriorating, a glass pane on fire extinguisher cabinet was broken. Findings include: On 07/28/2025 at 9:00 AM, Surveyor observed the physical environment. OBSERVATIONS: The door frame on the outside entry door was deteriorating. The bottom of the door frame on each side of the door was rusted all the way through the panel, which allowed for a gap to the outside elements.	N 481		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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N 481	Continued From page 1 There were 2 holes in the window screen in the dining area. Each hole measured approximately 2 inches by 2 inches. The glass pane on the fire extinguisher cabinet immediately inside the facility main door was broken and had exposed sharp glass edges. On 07/28/2025 at 4:00 PM, Surveyor interviewed Licensee A via phone. Licensee A acknowledged that there were some improvements to be made in the environment and they would be fixed as soon as possible.	N 481			