

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0015950	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 01/31/2025
NAME OF PROVIDER OR SUPPLIER ANCHOR COMMUNITIES LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 209 FOREST ST FOX LAKE, WI 53933		
(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 01/30/2025, Surveyor conducted a complaint investigation at Anchor Communities, a CBRF located in Fox Lake, WI. As a result of the investigation, 1 violation of Chapter DHS 83 was issued. The complaint was substantiated. Census: 9	N 000		
N 205	83.14(2)(j) Not permit a condition of substantial risk. The licensee may not permit the existence or continuation of any condition which is or may create a substantial risk to the health, safety or welfare of any resident. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure the prevention of a condition of risk for the 10 residents that reside at the facility when the facility was foreclosed upon on 03/01/2024 and entered into a Sheriff's sale. The facility is scheduled to be sold by Dodge County as of 02/11/2025. The licensee had knowledge of the foreclosure on 03/01/2024 and did not take steps to ensure the prevention of risk to the residents. Findings include: On 01/24/2025, the Department received a complaint that the facility was in foreclosure and would be sold by Dodge County as of 02/11/2025.	N 205		

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

TITLE

(X6) DATE

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N 205	Continued From page 1 On 01/29/2025, Surveyor reviewed a document from Adult Protective Services-C (APS-C). The document was from State of Wisconsin, Circuit Court, Dodge County dated 01/20/2025 and indicated the facility and other lands owned by Licensee A was judged to be in foreclosure as of 03/01/2024 in the amount of \$2,723,482.74. The property was placed for sale "as is" by Dodge County Sheriff's Office as of 02/11/2025. The property address was listed as 209 Forest Street, Fox Lake, WI 53933, which is the address of the facility. Surveyor confirmed that as of 01/30/2025, 10 residents still lived at the facility with no plan for relocation initiated by the licensee or communication to the department regarding the foreclosure or sale. On 01/30/2025 at 10:00 AM, Surveyor interviewed House Manager B who denied being aware of any foreclosure or sale of the property. House Manager B stated that representatives of MyChoice (Managed Care Organization) were at the facility to speak with residents on 01/29/2025 about possible relocation. House Manager B reviewed the notice of foreclosure that listed the property would be sold as of a Sheriff's Sale by Dodge County as of 02/11/2025. House Manager B stated, "This is the first time I am seeing this, I had no idea this was going on." On 01/30/2025 at 10:30 AM, Surveyor spoke with Licensee A via phone. Licensee A confirmed knowledge of the foreclosure and sale but stated there was an issue with their previous lender and the monthly payments for the property had tripled. Licensee A stated s/he had contracted with a new lender and was currently in the process of refinancing to lower the payments. Surveyor asked Licensee A if the refinancing of the property would close prior to sale date of	N 205		

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N 205	Continued From page 2 02/12/2025. Licensee A stated, "Yes, the facility is absolutely not for sale. This will be taken care of." Surveyor requested all documentation regarding the foreclosure, new lender and date of closure for the reported refinance by end of day 01/30/2025. On 01/30/2025 at 10:45 AM, Surveyor interviewed Resident 1 who stated, "I have lived at the facility for almost 2 months and yesterday a representative from MyChoice was at the facility and told me that the facility would be closing." Resident 1 added, "I will need to find a new place to live by 02/11/2025. I am really afraid that I will be homeless, I have lived at many assisted living facilities, and I am not sure where I am going to go, and I only have 2 weeks to do it." On 01/30/2025 at 11:00 AM, Surveyor interviewed Resident 2 who confirmed s/he talked to a representative of MyChoice on 01/29/2025 and, "They told me the place is closing and I have to find a new place to live by 02/11/2025. I am scared that I will be homeless now." On 01/30/2025 at 11:15 AM, Surveyor interviewed Resident 3 who stated s/he, "had a conversation with MyChoice. There are rumors that this place will be closing, and we all have to find a new place to live within the next 2 weeks. That really sucks, that is not enough time to find a new place to live." On 01/30/2025 at 5:00 PM, Surveyor received an email from Licensee A with a document attached regarding the new lender. The document was dated 01/16/2024 and did not include any financial dollar amount or closure date. The document did indicate that the commitment from the new lender would be valid until 05/16/2024.	N 205		

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N 205	Continued From page 3 Licensee A did not provide the facility plan on how they would ensure residents were protected from the condition of risk brought forth by the impending sale of the facility. On 01/31/2025 at 11:08 AM, Surveyor received an email from Licensee A with a document attached regarding the new lender. The document was now dated 01/16/2025, was identical to the letter sent on 01/30/2025 and did not include any financial dollar amount or closure date. The document still indicated that the commitment from the new lender would be valid only until 05/16/2024. Licensee A did not provide the facility plan on how they would ensure residents were protected from the condition of risk brought forth by the impending sale of the facility.	N 205		