

See our website for
further information:

www.carepartners-countryterrace.com

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Care Partners & Country Terrace Assisted Living Bloomer, WI



406/406B Priddy Street, Bloomer, WI 54724

“The Right Choice, Close to Home.”

Call to meet with our director today!

FACILITY NAME: Care Partners-Country Terrace Bloomer

Address: 406 Priddy Street
Bloomer, WI 54724

Telephone: (715) 568-4009

FAX: (715) 568-4209

Website: website

Email: ctbloomer@cpalct.com

Directions: Take exit 110 off of Hwy 53, head east on Hwy 40/which is Main Street into town. Then take a left on Oak Street and head north, then take a left on 9th Avenue. Take your first right on Priddy Street and we are located on the right.

Facility Type: *(check all that apply)*

- CBRF (Community Based Residential Facility)**
- RCAC (Residential Care Apartment Complex)**
- Adult Family Home**
 - Developmentally Disabled
 - Mental Health
 - Other: _____
- Memory Care (dementia-specific service)**

Number of Units: 33

Unit Types: *(check all that apply)*

- private studio
- private 2-bedroom
- private 1-bedroom
- private bathrooms
- semi-private rooms
- shared bathrooms

Can residents with an activated Power of Attorney for Healthcare be admitted?

- Yes
- No: _____

BASE Rate Ranges From: \$4,200.00 / month to \$5,200.00 / month

Notes:

BASE Rate Includes: *(check all that apply)*

- Assistance with activities of daily living (i.e. bathing, grooming etc...)
 ___ hour(s) per day or ___ hours(s) per week
- Activity or Life Enrichment Director
 ___ hours per week
- Nursing service (i.e. blood draws, ostomy care etc...)
 RN LPN _____ hours per week
- Medication assistance
- Housekeeping service
- Laundry service
- Personal wireless page system
- Cable TV service
- Regular activity programming
- Scheduled facility transportation to appointments
- Facility-coordinated transportation to appointments
- Meals plus snacks daily
- Use of onsite laundry facilities
- Call system in room
- Alarmed exit doors
- Telephone service in room
- 24/7 awake staff

Optional Services for Fee: *(check all that apply)*

- Laundry service
- Guest meals
- Cable service in room
- Short term respite care
- On-site ancillary medical services
 - Audiologist
 - Optometrist
 - Dental
 - Physician
 - Nurse Practitioner
 - Podiatry
- On-site beauty and barber
- Telephone service in room
- Medication assistance
- Advanced care levels, with a maximum of
 ___ hours per day or _____ hours per week

Special Assistance Needs: *(check all that apply)*

- Occasional staff assistance with mobility provided
- Complete staff assistance with mobility provided
- Residents must transfer independently
- Staff may assist with one-person transfers
- Staff two-person transfer assistance provided
- Mechanical lift transfers accepted
- Staff may provide catheter care (empty and change bags)
- Staff may provide ostomy care, (empty and change appliances)
- Special diets accommodated
- Staff may provide oxygen assistance
- Staff may provide updraft or nebulizer assistance

Special Accommodations: *(check all that apply)*

- | | |
|---|---|
| <input type="checkbox"/> Pets allowed | <input type="checkbox"/> On-site chapel |
| <input type="checkbox"/> On-site library | <input type="checkbox"/> On-site exercise equipment |
| <input type="checkbox"/> On-site resident computer access | |
| <input checked="" type="checkbox"/> Furnishings provided: twin bed and nightstand | |

Diabetes Management: *(check all that apply)*

- | | |
|---|---|
| <input checked="" type="checkbox"/> Assistance with blood sugar checks | <input checked="" type="checkbox"/> Assistance with scheduled insulin |
| <input checked="" type="checkbox"/> Assistance with sliding scale insulin | <input checked="" type="checkbox"/> Assistance with oral medications |

Community Contracts and/or Service Provisions: *(check all that apply)*

- | | |
|--|--|
| <input type="checkbox"/> Adjacent skilled nursing facility | <input type="checkbox"/> County Human Service funding |
| <input type="checkbox"/> IRIS | <input checked="" type="checkbox"/> Long Term Care Insurance |
| <input checked="" type="checkbox"/> Home Care | <input checked="" type="checkbox"/> Hospice |
| <input checked="" type="checkbox"/> FamilyCare | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ |

Description of Specialized Services:

Our pledge is to serve each resident with kindness, respect, compassion and professionalism. While we encourage our resident's independence, we will be nurturing their spirit, preserving their dignity and involving their families. The foundation of our program is based on our theory that the quality of life for a person can be significantly improved by creating an environment that allows individuals daily life choices. We believe that proper training, ongoing education, and specialty enhancement programming are the key ingredients to ensure excellence in care. Our main goal is to ensure our residents and their loved ones can see the difference in the care received. We operate with the same philosophy throughout all of our facilities, namely the provision of quality care with a "Family" touch.