Clairidge House

Report ID: CCN 525431
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§ 1 Facility Identity

Facility	Clairidge House
CCN	525431
Location	1519 60TH ST, KENOSHA, WI, 53140
Ownership type	For profit - Corporation
Certified beds	87

§ 2 CMS Federal Record

Civil money penalties on file	$0
Deficiency citations — current cycle	18 (100% vs prior 24 months (9))
Deficiency citations — prior 24 months	9
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	$0
WI state average	$39,833 (this facility is 0.0× the WI average)
National average	$31,239 (this facility is 0.0× the national average)

Averages are CMS-published per-facility fine amounts for the same snapshot. Figures and multiples are stated as published; no inference is drawn here.

§ 4 Current-Cycle Deficiencies

The current survey cycle records the following 18 federal deficiency citations (CMS F-tags). Scope/severity is CMS's own A–L grade; "Immediate Jeopardy" is CMS's most serious classification.

F-TAG	FINDING (CMS)	SCOPE/SEV.	SOURCE
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Standard survey
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	E	Standard survey
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	E	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	E	Complaint
F636	Assess the resident completely in a timely manner when first admitted, and then periodically, at least every 12 months.	D	Standard survey
F646	Notify the appropriate authorities when residents with MD or ID services has a significant change in condition.	D	Standard survey
F676	Ensure residents do not lose the ability to perform activities of daily living unless there is a medical reason.	D	Standard survey
F692	Provide enough food/fluids to maintain a resident's health.	D	Standard survey
F740	Ensure each resident must receive and the facility must provide necessary behavioral health care and services.	D	Standard survey
F744	Provide the appropriate treatment and services to a resident who displays or is diagnosed with dementia.	D	Standard survey
F745	Provide medically-related social services to help each resident achieve the highest possible quality of life.	D	Standard survey
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Standard survey
F757	Ensure each resident’s drug regimen must be free from unnecessary drugs.	D	Standard survey

F880	Provide and implement an infection prevention and control program.	D	Standard survey
F883	Develop and implement policies and procedures for flu and pneumonia vaccinations.	D	Standard survey
F887	Educate residents and staff on COVID-19 vaccination, offer the COVID-19 vaccine to eligible residents and staff after education, and properly document each resident and staff member's vaccination status.	D	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F610	Respond appropriately to all alleged violations.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: REAL PROPERTY HEALTH FACILITIES (9 facilities); Owner on file: CHRISTINA JAYNE PENN MANAGEMENT TRUST (organization)
Ownership chain	REAL PROPERTY HEALTH FACILITIES (9 facilities)
Penalties vs chain average	$0 vs $0
Current deficiencies vs chain average	18 vs 8.4 (2.1× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	4 / 5 (state avg 3.7 · US avg 2.9)
Quality measures (QM)	2 / 5 (state avg 3.2 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/525431
Snapshot SHA-256	a37f22e59db6ae9645c04f4891e0fa751434ed93c3d793bb1f5536a236638150
Methodology & version	v1.0 — https://www.caregiverhelpnow.com/methodology

§ 8 For Your Attorney

1. The full survey file (Form 2567) for each inspection cited above is available from the state survey agency or by FOIA request.
2. Quarterly staffing data: CMS Payroll-Based Journal (PBJ) public use files, CCN 525431.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash a37f22e59db6.
4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).

This snapshot is a frozen record of CMS Care Compare data as of Jun 2026. Independently verifiable at the URL above. Generated by CareSentinel under Nodal Logics LLC. Compiled under CareSentinel methodology v1.0, documented at https://www.caregiverhelpnow.com/methodology; the Snapshot SHA-256 above pins this record to that methodology version.

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