

GOLDEN AGE MANOR

Report ID: CCN 525507
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§ 1 Facility Identity

Facility	GOLDEN AGE MANOR
CCN	525507
Location	220 SCHOLL CT, AMERY, WI, 54001
Ownership type	Government - County
Certified beds	85

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	17 (1600% vs prior 24 months (1))
Deficiency citations — prior 24 months	1
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	0
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 17 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
F801	Employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, including a qualified dietician.	F	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F881	Implement a program that monitors antibiotic use.	F	Standard survey
F585	Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.	E	Standard survey
F697	Provide safe, appropriate pain management for a resident who requires such services.	E	Standard survey
F646	Notify the appropriate authorities when residents with MD or ID services has a significant change in condition.	D	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Complaint
F583	Keep residents' personal and medical records private and confidential.	D	Standard survey
F688	Provide appropriate care for a resident to maintain and/or improve range of motion (ROM), limited ROM and/or mobility, unless a decline is for a medical reason.	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
F758	Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.	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
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	D	Complaint
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	D	Complaint
F912	Provide rooms that are at least 80 square feet per resident in multiple rooms and 100 square feet for single resident rooms.	B	Standard survey

§ 5 Ownership

Ownership record	Owner on file: POLK COUNTY-DEPT OF ADMINISTRATION (organization)
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§ 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)	3 / 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/525507
Snapshot SHA-256	f07ee61eab981e4d0ee443b75a943e11fd7d9b2a21923db435d5586b3b768d6c
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 525507.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash f07ee61eab98.
 4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).
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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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