

Lutheran Home

Report ID: CCN 525545
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§ 1 Facility Identity

Facility	Lutheran Home
CCN	525545
Location	7500 W NORTH AVE, WAUWATOSA, WI, 53213
Ownership type	Non profit - Corporation
Certified beds	160

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	10 (900% 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 10 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
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	E	Standard survey
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	E	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey
F761	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.	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
F697	Provide safe, appropriate pain management for a resident who requires such services.	D	Complaint
F641	Ensure each resident receives an accurate assessment.	B	Standard survey

§ 5 Ownership

Ownership record	Owner on file: DENOR, JIM (individual)
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§ 6 CMS Care Compare Star Ratings

Overall	4 / 5 (state avg 3 · US avg 3)
Health inspection	3 / 5 (state avg 2.8 · US avg 2.8)
Staffing	5 / 5 (state avg 3.7 · US avg 2.9)
Quality measures (QM)	4 / 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/525545
Snapshot SHA-256	52ea2b12c8b0f3ab93b85075bf3674dd27565c04f92ea4d11d7b75d8fc17245b
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 525545.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 52ea2b12c8b0.
 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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