Complete Care at Glendale West

Report ID: CCN 525547
Generated: 2026-07-25T19:39:10.190Z

§ 1 Facility Identity

Facility	Complete Care at Glendale West
CCN	525547
Location	6263 N GREEN BAY AVE, GLENDALE, WI, 53209
Ownership type	For profit - Limited Liability company
Certified beds	94

§ 2 CMS Federal Record

Civil money penalties on file	$11,180
Deficiency citations — current cycle	17 (467% vs prior 24 months (3))
Deficiency citations — prior 24 months	3
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	$11,180
WI state average	$39,833 (this facility is 0.3× the WI average)
National average	$31,239 (this facility is 0.4× 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
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	E	Complaint
F572	Give residents a notice of rights, rules, services and charges.	E	Complaint
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted	E	Complaint
F554	Allow residents to self-administer drugs if determined clinically appropriate.	D	Complaint
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Complaint
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	D	Complaint
F880	Provide and implement an infection prevention and control program.	D	Complaint
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	D	Standard survey
F636	Assess the resident completely in a timely manner when first admitted, and then periodically, at least every 12 months.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	D	Standard survey
F685	Assist a resident in gaining access to vision and hearing services.	D	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	D	Standard survey

F880	Provide and implement an infection prevention and control program.	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
F760	Ensure that residents are free from significant medication errors.	D	Complaint
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: COMPLETE CARE (85 facilities); Owner on file: PC GLENDALE HOLDCO LLC (organization)
Ownership chain	COMPLETE CARE (85 facilities)
Penalties vs chain average	$11,180 vs $26,818 (0.4× the chain average)
Current deficiencies vs chain average	17 vs 11.1 (1.5× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	3 / 5 (state avg 3 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	3 / 5 (state avg 3.7 · US avg 2.9)
Quality measures (QM)	5 / 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/525547
Snapshot SHA-256	b397406bfd7c2e414d48469e60c300a3dd2bff3dbe92378d32b88d75b0792238
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 525547.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash b397406bfd7c.
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.

CareSentinel operates as an independent legal-advertising service, not a law firm, and does not recommend, endorse, or vouch for any attorney (ABA Model Rule 5.4). This document restates the public federal record only; it is not legal advice and forms no attorney-client relationship. Inspection findings are point-in-time CMS survey results, not a determination that any specific resident was harmed.