

Greendale Park Nursing and Rehab

Report ID: CCN 525549
Generated: 2026-07-23T11:32:31.584Z

§ 1 Facility Identity

Facility	Greendale Park Nursing and Rehab
CCN	525549
Location	5404 W LOOMIS RD, Greendale, WI, 53129
Ownership type	For profit - Limited Liability company
Certified beds	105

§ 2 CMS Federal Record

Civil money penalties on file	\$263,110
Deficiency citations — current cycle	23 (64% vs prior 24 months (14))
Deficiency citations — prior 24 months	14
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	\$263,110
WI state average	\$39,833 (this facility is 6.6× the WI average)
National average	\$31,239 (this facility is 8.4× 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 23 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
F851	Electronically submit to CMS complete and accurate direct care staffing information, based on payroll and other verifiable and auditable data.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	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.	E	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
F640	Encode each resident's assessment data and transmit these data to the State within 7 days of assessment.	D	Complaint
F693	Ensure that feeding tubes are not used unless there is a medical reason and the resident agrees; and provide appropriate care for a resident with a feeding tube.	D	Complaint
F554	Allow residents to self-administer drugs if determined clinically appropriate.	D	Complaint
F627	Ensure the transfer/discharge meets the resident's needs/preferences and that the resident is prepared for a safe transfer/discharge.	D	Complaint
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	D	Complaint
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

F759	Ensure medication error rates are not 5 percent or greater.	D	Complaint
F760	Ensure that residents are free from significant medication errors.	D	Complaint
F554	Allow residents to self-administer drugs if determined clinically appropriate.	D	Standard survey
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.	D	Standard survey
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	D	Standard survey
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Standard survey
F698	Provide safe, appropriate dialysis care/services for a resident who requires such services.	D	Standard survey
F740	Ensure each resident must receive and the facility must provide necessary behavioral health care and services.	D	Standard survey
F883	Develop and implement policies and procedures for flu and pneumonia vaccinations.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: BEDROCK HEALTHCARE (9 facilities); Owner on file: BEDROCK HCS AT GREENDALE LLC (organization)
Ownership chain	BEDROCK HEALTHCARE (9 facilities)
Penalties vs chain average	\$263,110 vs \$102,839 (2.6× the chain average)
Current deficiencies vs chain average	23 vs 24.1 (1.0× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	2 / 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/525549
Snapshot SHA-256	caf3370f6a121ba7eed7f5b22c1c0e87eb95b1e2d984a175f7b2057932859904
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 525549.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash caf3370f6a12.
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.