Consumer Information Report for Nursing Homes
Summary 2018

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AUTUMN LAKE HEALTHCARE AT GREENFIELD
5790 S 27TH ST
MILWAUKEE, WI 53221
(414) 282-1300

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License Number:	**2230**	**Medicare Certified?**	**Yes**
Number of Licensed Beds:	**112**	**Medicaid Certified?**	**Yes**
Ownership Type:	**LLC Profit**		
Owner:	**CAMEO NURSING HOME, LLC**		

This facility failed to return the staffing survey required under Wisconsin Statutes 50.096(2), which authorizes the Department of Health Services to collect information needed to prepare the annual Consumer Information Report. As a result staff to resident ratios and staff turnover and retention rates could not be calculated for this facility.

Staff: Residents

Nursing Home Staff	Staff:Residents, by shift, in a two-week time period (Average number of residents)		
	Day Shift	Evening Shift	Night Shift
Nurses (RNs & LPNs)	NA	NA	NA
Nurse Aides	NA	NA	NA

If the number of residents is a "" in one of the categories above, there was an average of <**1** nurse or NA on the shift. There may have been a combination of part-time RNs, LPNs or NAs on the shift on one or more days during the two-week time period, which could make the average <1. Per Wisconsin Administrative Code, Chapter HFS 132, there must be at least one RN or LPN on duty at all times.

Staff Retention Rates

Nursing Home Staff	Staff Retention Rates (Percent of staff employed for at least one year)		
	This Home (NS=no staff)	MILWAUKEE County Average (34 homes reporting)	State of Wisconsin Average (364 homes reporting)
Full-time Nurses (RNs)	NA	60%	71%
Part-time Nurses (RNs)	NA	55%	70%
Full-time Nurses (LPNs)	NA	70%	75%
Part-time Nurses (LPNs)	NA	62%	65%
Full-time Nurse Aides	NA	66%	69%
Part-time Nurse Aides	NA	53%	59%

This two-page summary was prepared by the Division of Quality Assurance, Wisconsin Department of Health Services. For questions about this report, call (608) 264-9898. See the full report on the internet (after 5/1/2019) at **https://www.dhs.wisconsin.gov/guide/cir.htm** or request a copy (after 5/1/2019) at (608) 266-8368. The report should also be available in the facility.

Federal Violations Cited in State "Inspection" Surveys for

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AUTUMN LAKE HEALTHCARE AT GREENFIELD

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This summary table provides a count of federal violations cited for this nursing home in 2018, by category of violation. County and state averages are shown for comparison. Surveys are conducted by the Division of Quality Assurance at least every 9-15 months, and may be conducted more often. This home was cited with Substandard Quality of Care during the year 2018. See the full Consumer Information Report 2018 for details.

Federal Regulation Categories* * Each category consists of many specific regulations. See detail in report.	Federal Violations in 2018		
	Total # Citations for this Home (NS = Facility not surveyed in 2018)	Average # Citations for MILWAUKEE County (37 homes)	Average # Citations for Wisconsin (367 homes surveyed in 2018)
Quality of Care: Provide care that promotes resident's highest level of well-being. Example: Prevent/treat pressure sores.	11	4.2	2.6
Resident Services: Provide services that meet state standards. Example: Develop a comprehensive care plan for each resident.	6	1.8	1.1
Quality of Life: Provide a pleasant, homelike atmosphere. Example: Provide an activities program that meets needs and interests.	0	0.4	0.3
Resident Rights: Assure individual rights. Example: Assure right to personal privacy.	12	1.7	0.9
Freedom from Restraints/Abuse: Assure freedom from abuse, neglect, or restraints. Example: Assure the right to be free from abuse.	3	0.7	0.5
Staffing/Staff Training: Provide adequate and qualified staff. Provide traing to staff on policies and procedures. Example: Provide sufficient and competent nursing staff.	3	0.5	0.3
Pharmacy/Lab Services: Provide or obtain medications and lab services. Example: Residents are free of significant medication errors.	1	1.2	0.8
Administration: Use resources to promote resident's highest level of well-being. Example: Must have governing body to ensure safe and efficient management of the facility.	1	0.0	0.1
Total Violations	37	10.5	6.5

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INTRODUCTION

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AUTUMN LAKE HEALTHCARE AT GREENFIELD
5790 S 27TH ST
MILWAUKEE, WI 53221
(414) 282-1300

License Number:	2230
DQA Regional Office:	Southeastern
Ownership Type:	LLC Profit
Owner (Licensee):	CAMEO NURSING HOME, LLC
Federal Certification Level:	Medicare (Title 18) Skilled Nursing Facility (SNF) Medicaid (Title 19) Nursing Facility (NF)

SECTION 1 - FEDERAL REGULATION DEFICIENCIES

Section 1 of this report describes the numbers and types of **Federal regulation deficiencies** found during surveys conducted in 2018. "Deficiencies" are cited for noncompliance with Federal regulations. This section also compares these numbers to averages for all nursing homes of similar size.

SECTION 2 - NURSING STAFF TURNOVER AND RETENTION RATES

Section 2 provides information about **nursing staff turnover and retention** rates at this nursing home in 2018. It compares these rates to the averages for all nursing homes of similar size.

APPENDICES (on the internet after 5/1/2019) include:

Appendix A - a list of **resource agencies** for consumers;

Appendix B - information about how nursing staff turnover & retention rates are calculated; and

Appendix C - **statewide averages.**

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SECTION 1 - SURVEY RESULTS FOR THIS FACILITY

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Nursing homes in Wisconsin operate under rules enacted by the Federal government (for the Medicare and/or Medicaid programs) and by the State of Wisconsin. Surveyors from the Wisconsin Division of Quality Assurance conduct unannounced inspections at each nursing home at least once every 9 to 15 months to determine if the nursing home complies with all State and Federal rules. State surveyors also conduct follow-up visits to ensure that violations have been corrected, investigate complaints, and conduct other surveys as necessary.

When state surveyors determine that a nursing home is not in compliance with a Federal regulation, the nursing home is cited with a violation or "deficiency". The number and type of violations for surveys conducted in 2018 are described in this report.
The number of federal regulation deficiencies cited in Wisconsin nursing homes during 2018 surveys ranged from **0 to 72, with an average of 6.5 citations.**

In 2018 survey(s), AUTUMN LAKE HEALTHCARE AT GREENFIELD, MILWAUKEE, which has 112 licensed beds, was cited with:

37 Federal regulation deficiency(ies)

Statewide, the average number of deficiencies for a nursing home with

In addition, this home was cited with **25** federal building safety violations. The number of federal building safety violations statewide in 2018 ranged from **0 to 25**, **with an average of 3.9 citations.**

Finally, when there is no comparable requirement under federal regulations, nursing facilities may be cited for deficient practices under state regulations. The number of state regulation deficiencies cited in Wisconsin nursing homes during 2018 surveys ranged from **0 to 1, with an average of 0.01 citations**. This home was cited with **0** state regulation deficiency(ies).

Federal Regulation Deficiencies:

To determine Federal regulation deficiencies, surveyors use a resident-centered, outcome-based process. Equal emphasis is placed on the quality of care the resident receives and on the quality of the resident's life in the nursing home, and on whether or nor the resident's rights, dignity and privacy are respected. These factors are evaluated by observing residents' care; interviewing residents, families and staff; and reviewing medical records.

If it is determined that a Federal regulation deficiency exists, the deficiency is placed on a grid. Grid placement is based on two measures:

- *Severity/Harm,* the degree of impact that a deficient practice has on residents at the facility; and
- *Scope/Frequency,* the prevalence of a deficient practice within a facility, or the proportion of residents who were or could have been affected.

All Federal deficiencies fit into one of the following four grid levels, from most to least serious: Immediate Jeopardy, Significant Correction, Correction and Substantial Compliance. If this home had deficiencies at any of the four grid levels in the last survey, those deficiencies are listed below. Each deficiency listed is followed by the abbreviation of its federal regulation category: Quality of Care (QC), Resident Services (RS), Quality of Life (QL), Resident Rights (RR), Freedom from Restraints/Abuse (FA), Staffing/Staff Training (ST), Pharmacy/Lab Services (PL), and Administration (AD). **A deficiency may be listed more than once if it was cited more than once during the year. Also, some citations share the same title, so you may see separate citations listed with the same title on the same date.**

Certain Federal regulation deficiencies at the Immediate Jeopardy, Significant Correction and Correction grid levels cause a nursing home to be designated as having "Substandard Quality of Care (SQC)". **This home was designated with SQC during the year 2018. 36 Wisconsin nursing homes received the SQC designation in 2018**. SQC deficiencies constitute: immediate jeopardy to resident health or safety; a pattern of or widespread actual harm that is not immediate jeopardy; or widespread potential for more

Immediate Jeopardy. This deficiency exists when a situation caused (or is likely to cause) serious injury, serious harm, impairment or death to a resident receiving care in the facility AND facility practice makes it probable that similar actions, situations, practices, or incidents will occur again. Immediate corrective action is needed. The nursing home received **3 Immediate Jeopardy deficiencies** in 2018.

DEFICIENCY	CATEGORY	SURVEY DATE
Notify Of Changes (Injury/Decline/Room, Etc.)	QC	06/20/2018
Quality Of Care	QC	06/20/2018
Bowel/Bladder Incontinence, Catheter, Uti	QC	12/07/2018

Significant Correction. This deficiency exists when a situation resulted in a negative.outcome that compromised a resident's ability to maintain or reach his/her highest practicable physical, mental, or psychosocial well-being. This nursing home received **1 Significant Correction deficiencies** in 2018.

DEFICIENCY	CATEGORY	SURVEY DATE
Respiratory/Tracheostomy Care And Suctioning	QC	12/07/2018

Correction. This deficiency exists when a situation resulted in minimal physical, mental, or psychosocial discomfort to a resident and/or has the potential (not yet realized) to compromise a resident's ability to maintain or reach his/her highest practicable physical, mental, or psychosocial well-being. This nursing home received **30 Correction deficiencies** in 2018.

DEFICIENCY	CATEGORY	SURVEY DATE
Nurse Aide Peform Review-12 Hr/Yr In-Service	ST	06/20/2018
Care Plan Timing And Revision	RS	10/31/2018
Dialysis	QC	10/31/2018
Discharge Summary	RS	10/31/2018
Food Procurement,Store/Prepare/Serve-Sanitary	RS	10/31/2018
Hospice Services	RS	10/31/2018
Infection Prevention & Control	QC	10/31/2018
Investigate/Prevent/Correct Alleged Violation	FA	10/31/2018
Label/Store Drugs And Biologicals	PL	10/31/2018
Notice Of Bed Hold Policy Before/Upon Trnsfr	RR	10/31/2018
Notice Requirements Before Transfer/Discharge	RR	10/31/2018
Permitting Residents To Return To Facility	RR	10/31/2018
Reporting Of Alleged Violations	FA	10/31/2018
Right To Forms Of Communication W/ Privacy	RR	10/31/2018
Treatment/Svcs To Prevent/Heal Pressure Ulcer	QC	10/31/2018
Abuse, Neglect, And Exploitation Training	ST	12/07/2018
Antibiotic Stewardship Program	QC	12/07/2018
Competent Nursing Staff	ST	12/07/2018
Dialysis	QC	12/07/2018
Food Procurement,Store/Prepare/Serve-Sanitary	RS	12/07/2018
Free Of Accident Hazards/Supervision/Devices	QC	12/07/2018
Infection Prevention & Control	QC	12/07/2018
Notice Of Bed Hold Policy Before/Upon Trnsfr	RR	12/07/2018
Notice Requirements Before Transfer/Discharge	RR	12/07/2018
Permitting Residents To Return To Facility	RR	12/07/2018

Qapi Prgm/Plan, Disclosure/Good Faith Attmpt	AD	12/07/2018
Reporting Of Alleged Violations	FA	12/07/2018
Resident Records - Identifiable Information	RR	12/07/2018
Resident Self-Admin Meds-Clinically Approp	RR	12/07/2018
Right To Participate In Planning Care	RR	12/07/2018

Substantial Compliance. This deficiency exists when a situation has the potential for causing only minor negative impact on residents. This nursing home received **3 Substantial Compliance deficiencies** in 2018.

DEFICIENCY	CATEGORY	SURVEY DATE
Resident Records - Identifiable Information	RR	06/20/2018
Admissions Policy	RR	12/07/2018
Discharge Summary	RS	12/07/2018

For questions about this report, call (608) 264-9898. For further information about specific violations or more recent surveys, contact the administrator of this facility or the Division of Quality Assurance at (608) 266-8368.