Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016898	A. BUILDING: _____ B. WING _____	R-C 03/05/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SUITES AT GREENFIELD (THE)	5790 S 27TH ST MILWAUKEE, WI 53221

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{N 000}	Initial Comments On 03/05/2026, Surveyor completed a complaint survey and verification visit at Suites at Greenfield (The). As a result, 5 of the 6 deficiencies were corrected. One deficiency was a repeat violation (see SOD SLOX11, dated 03/06/2025). One of 1 complaint was unsubstantiated. Under statutory provisions of Wis. Stat. C. 50, a $200 revisit fee is being assessed. Census: 39	{N 000}		
{N 526}	83.47(2)(e) Other evacuation drills. Other evacuation drills. Tornado, flooding, or other emergency or disaster evacuation drills shall be conducted at least semi-annually. This Rule is not met as evidenced by: Based on record review and interview, the provider did not conduct 1 of 2 required other evacuation drills at least semi-annually for calendar year 2025. This is a repeat deficiency. See Statement of Deficiency SLOX11, date 03/06/2025. Findings include: On 03/05/2025 at approximately 9:00 AM, Surveyor requested to review other evacuation drills for calendar year 2025 to current. There was no evidence of other evacuation drills being completed after April 2025.	{N 526}		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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{N 526}	Continued From page 1 On 03/05/2025 at approximately 10:00 AM, Surveyor interviewed Administrator B. Administrator B was not aware other evacuation drills were to be conducted on a semi-annual basis. Administrator B disclosed an individual from the department comes to the facility once a year to conduct a disaster drill. Administrator B believed the disaster drill conducted by the department was all that was needed to be in compliance with state regulations. Surveyor reviewed 83.47(2)(e) with Administrator B. Administrator B disclosed he/she will work with the maintenance director to ensure 2 disaster drills are being conducted on an annual basis.	{N 526}		