

COMPLETE CARE AT HARRINGTON COURT

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§ 1 Facility Identity

Facility	COMPLETE CARE AT HARRINGTON COURT
CCN	075253
Location	59 HARRINGTON CT, COLCHESTER, CT, 06415
Ownership type	For profit - Limited Liability company
Certified beds	130

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	20 (186% vs prior 24 months (7))
Deficiency citations — prior 24 months	7
Immediate Jeopardy — current cycle	1
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
CT state average	\$18,685 (this facility is 0.0× the CT 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 20 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
F760	Ensure that residents are free from significant medication errors.	J • Immediate Jeopardy	Complaint
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Complaint
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Complaint
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	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
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	D	Complaint
F692	Provide enough food/fluids to maintain a resident's health.	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
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Standard survey
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper	D	Standard survey

authorities.

F610	Respond appropriately to all alleged violations.	D	Standard survey
F644	Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.	D	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F742	Provide the appropriate treatment and services to a resident who displays or is diagnosed with mental disorder or psychosocial adjustment difficulty, or who has a history of trauma and/or post-traumatic stress disorder.	D	Standard survey
F758	Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: COMPLETE CARE (85 facilities); Owner on file: PC CT OPCOS LLC (organization)
Ownership chain	COMPLETE CARE (85 facilities)
Penalties vs chain average	\$0 vs \$26,818 (0.0× the chain average)
Current deficiencies vs chain average	20 vs 11.1 (1.8× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	3 / 5 (state avg 3 · US avg 3)
Health inspection	2 / 5 (state avg 2.7 · US avg 2.8)
Staffing	2 / 5 (state avg 3.3 · US avg 2.9)
Quality measures (QM)	5 / 5 (state avg 3.7 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/075253
Snapshot SHA-256	cb2db158a41b3a659705575e68cea6a608cb4f9fd39f7f2d6961eb24dd1261c0
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 075253.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash cb2db158a41b.
 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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