

GRIMES CENTER

Report ID: CCN 075275
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§ 1 Facility Identity

Facility	GRIMES CENTER
CCN	075275
Location	1354 CHAPEL ST, NEW HAVEN, CT, 06511
Ownership type	Non profit - Corporation
Certified beds	114

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	9 (350% vs prior 24 months (2))
Deficiency citations — prior 24 months	2
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	\$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 9 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
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 authorities.	D	Standard survey
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
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	D	Standard survey
F678	Provide basic life support, including CPR, prior to the arrival of emergency medical personnel , subject to physician orders and the resident's advance directives.	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	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
F880	Provide and implement an infection prevention and control program.	D	Standard survey

§ 5 Ownership

Ownership record	Owner on file: YALE NEW HAVEN HOSPITAL (organization)
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§ 6 CMS Care Compare Star Ratings

Overall	5 / 5 (state avg 3 · US avg 3)
Health inspection	4 / 5 (state avg 2.7 · US avg 2.8)
Staffing	5 / 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/075275
Snapshot SHA-256	e1fd479c1295c49a6ae6b4226f9784b1ca2e8913f07585fe0d628a8618ffe1b4
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 075275.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash e1fd479c1295.
 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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