SAINT JOHN PAUL II CENTER

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§ 1 Facility Identity

Facility	SAINT JOHN PAUL II CENTER
CCN	075354
Location	33 LINCOLN AVENUE, DANBURY, CT, 06810
Ownership type	For profit - Corporation
Certified beds	141

§ 2 CMS Federal Record

Civil money penalties on file	$0
Deficiency citations — current cycle	17 (240% vs prior 24 months (5))
Deficiency citations — prior 24 months	5
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 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 17 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
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	E	Standard survey
F761	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.	E	Standard survey
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	E	Standard survey
F551	Give the resident's representative the ability to exercise the resident's rights.	D	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
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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Complaint
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Complaint
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	D	Complaint
F644	Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.	D	Standard survey

F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	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
F692	Provide enough food/fluids to maintain a resident's health.	D	Standard survey
F726	Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.	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: HIGHBRIDGE HEALTHCARE (6 facilities); Owner on file: EGERT, USHER (individual)
Ownership chain	HIGHBRIDGE HEALTHCARE (6 facilities)
Penalties vs chain average	$0 vs $51,312 (0.0× the chain average)
Current deficiencies vs chain average	17 vs 15.5 (1.1× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	2 / 5 (state avg 2.7 · US avg 2.8)
Staffing	1 / 5 (state avg 3.3 · US avg 2.9)
Quality measures (QM)	3 / 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/075354
Snapshot SHA-256	1db073ba709a1dcf339ee3a5f8e630f3cd7edf03e8beb5de23e8fbcb04524098
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 075354.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 1db073ba709a.
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.

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