

SUMMIT AT PLANTSVILLE CENTER FOR HEALTH & REHABILI

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§ 1 Facility Identity

Facility	SUMMIT AT PLANTSVILLE CENTER FOR HEALTH & REHABILI
CCN	075420
Location	261 SUMMIT STREET, PLANTSVILLE, CT, 06479
Ownership type	For profit - Limited Liability company
Certified beds	150

§ 2 CMS Federal Record

Civil money penalties on file	\$3,588
Deficiency citations — current cycle	15 (400% vs prior 24 months (3))
Deficiency citations — prior 24 months	3
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	Not listed
Abuse icon	Yes — CMS abuse icon currently listed

§ 3 Federal Penalties in Context

This facility — penalties on file	\$3,588
CT state average	\$18,685 (this facility is 0.2× the CT average)
National average	\$31,239 (this facility is 0.1× 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 15 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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	G	Complaint
F880	Provide and implement an infection prevention and control program.	F	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
F883	Develop and implement policies and procedures for flu and pneumonia vaccinations.	E	Standard survey
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	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
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
F697	Provide safe, appropriate pain management for a resident who requires such services.	D	Complaint
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.	D	Complaint
F578	Honor the resident's right to request, refuse, and/or discontinue treatment, to participate in or refuse to participate in experimental research, and to formulate an advance directive.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	D	Standard survey

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	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
F887	Educate residents and staff on COVID-19 vaccination, offer the COVID-19 vaccine to eligible residents and staff after education, and properly document each resident and staff member's vaccination status.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: NATIONAL HEALTH CARE ASSOCIATES (43 facilities); Owner on file: BG II OPCO ML LLC (organization)
Ownership chain	NATIONAL HEALTH CARE ASSOCIATES (43 facilities)
Penalties vs chain average	\$3,588 vs \$13,894 (0.3× the chain average)
Current deficiencies vs chain average	15 vs 11.0 (1.4× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3 · US avg 3)
Health inspection	2 / 5 (state avg 2.7 · US avg 2.8)
Staffing	3 / 5 (state avg 3.3 · US avg 2.9)
Quality measures (QM)	4 / 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/075420
Snapshot SHA-256	42c31c35fa8e4832083ff9e6f86779c10c4ebb3bff5a9e16026ec94438692962
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 075420.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 42c31c35fa8e.
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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