INGLESIDE AT ROCK CREEK

Report ID: CCN 095028
Generated: 2026-07-24T18:46:05.591Z

§ 1 Facility Identity

Facility	INGLESIDE AT ROCK CREEK
CCN	095028
Location	3050 MILITARY ROAD NW, WASHINGTON, DC, 20015
Ownership type	Non profit - Corporation
Certified beds	34

§ 2 CMS Federal Record

Civil money penalties on file	$39,419
Deficiency citations — current cycle	15 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
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	$39,419
DC state average	$70,333 (this facility is 0.6× the DC average)
National average	$31,239 (this facility is 1.3× 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.	**J · Immediate Jeopardy**	Complaint
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	E	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.	E	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.	E	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
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F610	Respond appropriately to all alleged violations.	D	Complaint
F645	PASARR screening for Mental disorders or Intellectual Disabilities	D	Complaint
F711	Ensure the resident's doctor reviews the resident's care, writes, signs and dates progress notes and orders, at each required visit.	D	Complaint
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	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

F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	D	Complaint
F836	Ensure the facility is licensed under applicable State and local law and operates and provides services in compliance with all applicable Federal, State, and local laws, regulations, and codes, and with accepted professional standards.	D	Complaint
F908	Keep all essential equipment working safely.	D	Complaint
F925	Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: INGLESIDE ENGAGED LIVING (3 facilities); Owner on file: BARTELS, BRUCE (individual)
Ownership chain	INGLESIDE ENGAGED LIVING (3 facilities)
Penalties vs chain average	$39,419 vs $15,900 (2.5× the chain average)
Current deficiencies vs chain average	15 vs 7.3 (2.0× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	5 / 5 (state avg 3.5 · US avg 3)
Health inspection	3 / 5 (state avg 2.8 · US avg 2.8)
Staffing	5 / 5 (state avg 3.9 · US avg 2.9)
Quality measures (QM)	5 / 5 (state avg 4.6 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/095028
Snapshot SHA-256	a93132e4c2064e6f32b3fdcc54fdfc4195eae2cf4748676edc37e230957d11c0
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 095028.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash a93132e4c206.
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.

CareSentinel operates as an independent legal-advertising service, not a law firm, and does not recommend, endorse, or vouch for any attorney (ABA Model Rule 5.4). This document restates the public federal record only; it is not legal advice and forms no attorney-client relationship. Inspection findings are point-in-time CMS survey results, not a determination that any specific resident was harmed.