# TARPON BAYOU CENTER

Report ID: CCN 105280
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## § 1 Facility Identity

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|---|---|
| Facility | TARPON BAYOU CENTER |
| CCN | 105280 |
| Location | 515 CHESAPEAKE DR, TARPON SPRINGS, FL, 34689 |
| Ownership type | Non profit - Corporation |
| Certified beds | 114 |

## § 2 CMS Federal Record

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|---|---|
| Civil money penalties on file | $10,170 |
| Deficiency citations — current cycle | 17 (up from 0 in the prior 24 months) |
| Deficiency citations — prior 24 months | 0 |
| 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

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|---|---|
| This facility — penalties on file | $10,170 |
| FL state average | $26,765 (this facility is 0.4× the FL average) |
| National average | $31,239 (this facility is 0.3× 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 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 |
|---|---|---|---|
| F867 | Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action. | F | Standard survey |
| F880 | Provide and implement an infection prevention and control program. | F | Standard survey |
| F908 | Keep all essential equipment working safely. | F | Standard survey |
| F584 | Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. | E | Standard survey |
| F645 | PASARR screening for Mental disorders or Intellectual Disabilities | E | Standard survey |
| F677 | Provide care and assistance to perform activities of daily living for any resident who is unable. | E | Standard survey |
| F679 | Provide activities to meet all resident's needs. | E | Standard survey |
| F550 | Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights. | D | Standard survey |
| F554 | Allow residents to self-administer drugs if determined clinically appropriate. | D | Standard survey |
| F637 | Assess the resident when there is a significant change in condition | 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 |
| F690 | Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections. | 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 |
| F759 | Ensure medication error rates are not 5 percent or greater. | D | Standard survey |
| F842 | Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards. | D | Standard survey |
| F881 | Implement a program that monitors antibiotic use. | D | Standard survey |

## § 5 Ownership & Chain Context

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| Ownership record | Chain: HEARTHSTONE SENIOR COMMUNITIES (8 facilities); Owner on file: TARPON REHABILITATION CENTER, LLC (organization) |
| Ownership chain | HEARTHSTONE SENIOR COMMUNITIES (8 facilities) |
| Penalties vs chain average | $10,170 vs $68,501 (0.1× the chain average) |
| Current deficiencies vs chain average | 17 vs 11.9 (1.4× the chain average) |

## § 6 CMS Care Compare Star Ratings

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| Overall | 1 / 5 (state avg 3.3 · US avg 3) |
| Health inspection | 1 / 5 (state avg 2.8 · US avg 2.8) |
| Staffing | 3 / 5 (state avg 3.3 · US avg 2.9) |
| Quality measures (QM) | 3 / 5 (state avg 4.2 · US avg 3.7) |

## § 7 Record Provenance

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| CMS data as of | Jun 2026 |
| Independent verification | https://www.medicare.gov/care-compare/details/nursing-home/105280 |
| Snapshot SHA-256 | 917f1c0a8a3d3781b9c676f5b2677ba375aef33820e52572afb8d08a210fb111 |
| 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 105280.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 917f1c0a8a3d.
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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