

AVIATA AT OLDSMAR

Report ID: CCN 105419
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§ 1 Facility Identity

Facility	AVIATA AT OLDSMAR
CCN	105419
Location	3865 TAMPA RD, OLDSMAR, FL, 34677
Ownership type	For profit - Individual
Certified beds	120

§ 2 CMS Federal Record

Civil money penalties on file	\$36,659
Deficiency citations — current cycle	18 (1700% vs prior 24 months (1))
Deficiency citations — prior 24 months	1
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	\$36,659
FL state average	\$26,765 (this facility is 1.4× the FL average)
National average	\$31,239 (this facility is 1.2× 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 18 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
F814	Dispose of garbage and refuse properly.	F	Standard survey
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
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	E	Standard survey
F849	Arrange for the provision of hospice services or assist the resident in transferring to a facility that will arrange for the provision of hospice services.	E	Standard survey
F582	Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered.	D	Standard survey
F620	Not require residents to give up Medicare or Medicaid benefits, or pay privately as a condition of admission; and must tell residents what care they do not provide.	D	Standard survey
F644	Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	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
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
F685	Assist a resident in gaining access to vision and hearing services.	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
F806	Ensure each resident receives and the facility provides food that accommodates resident allergies, intolerances, and preferences, as well as appealing options.	D	Standard survey
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	D	Standard survey
F585	Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.	D	Complaint
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	D	Complaint
F759	Ensure medication error rates are not 5 percent or greater.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: AVIATA HEALTH GROUP (52 facilities)
Ownership chain	AVIATA HEALTH GROUP (52 facilities)
Penalties vs chain average	\$36,659 vs \$39,070 (0.9× the chain average)
Current deficiencies vs chain average	18 vs 10.4 (1.7× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3.3 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	0 / 5 (state avg 3.3 · US avg 2.9)
Quality measures (QM)	0 / 5 (state avg 4.2 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/105419
Snapshot SHA-256	698dac8b52b536477a854c42da1d10ab8931bf6d66e93dfb508894fd39d1255e
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 105419.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 698dac8b52b5.
 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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