ABBEY REHABILITATION AND NURSING CENTER

Report ID: CCN 105749
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§ 1 Facility Identity

Facility	ABBEY REHABILITATION AND NURSING CENTER
CCN	105749
Location	7101 DR MARTIN LUTHER KING JR ST N, SAINT PETERSBURG, FL, 33702
Ownership type	Non profit - Corporation
Certified beds	132

§ 2 CMS Federal Record

Civil money penalties on file	$139,355
Deficiency citations — current cycle	16 (700% vs prior 24 months (2))
Deficiency citations — prior 24 months	2
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	$139,355
FL state average	$26,765 (this facility is 5.2× the FL average)
National average	$31,239 (this facility is 4.5× 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 16 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
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	E	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
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	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	Complaint
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	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
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
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

F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F741	Ensure that the facility has sufficient staff members who possess the competencies and skills to meet the behavioral health needs of residents.	D	Standard survey
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	D	Standard survey
F840	Employ or obtain outside professional resources to provide services in the nursing home when the facility does not employ a qualified professional to furnish a required service.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: FLORIDA INSTITUTE FOR LONG-TERM CARE (18 facilities); Owner on file: FI-THE ABBEY, LLC (organization)
Ownership chain	FLORIDA INSTITUTE FOR LONG-TERM CARE (18 facilities)
Penalties vs chain average	$139,355 vs $64,341 (2.2× the chain average)
Current deficiencies vs chain average	16 vs 10.9 (1.5× 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	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

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/105749
Snapshot SHA-256	a7e602ba09395cdf125e400256e0d5b87559adb7036c57f3098999d7c26747f0
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 105749.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash a7e602ba0939.
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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