SCOTT LAKE HEALTH AND REHABILITATION CENTER

Report ID: CCN 106120
Generated: 2026-07-23T19:21:57.073Z

§ 1 Facility Identity

Facility	SCOTT LAKE HEALTH AND REHABILITATION CENTER
CCN	106120
Location	800 E COUNTY RD 540A, LAKELAND, FL, 33813
Ownership type	For profit - Corporation
Certified beds	120

§ 2 CMS Federal Record

Civil money penalties on file	$80,408
Deficiency citations — current cycle	12 (500% vs prior 24 months (2))
Deficiency citations — prior 24 months	2
Immediate Jeopardy — current cycle	**3**
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$80,408
FL state average	$26,765 (this facility is 3.0× the FL average)
National average	$31,239 (this facility is 2.6× 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 12 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
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	**J · Immediate Jeopardy**	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.	**J · Immediate Jeopardy**	Complaint
F760	Ensure that residents are free from significant medication errors.	**J · Immediate Jeopardy**	Complaint
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
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
F759	Ensure medication error rates are not 5 percent or greater.	E	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
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	D	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Standard survey

F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: SUMMIT CARE (22 facilities); Owner on file: SCOTT LAKE SNF OPERATIONS LLC (organization)
Ownership chain	SUMMIT CARE (22 facilities)
Penalties vs chain average	$80,408 vs $24,111 (3.3× the chain average)
Current deficiencies vs chain average	12 vs 7.0 (1.7× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 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)	5 / 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/106120
Snapshot SHA-256	4e538a76b5f72b3133b9cf4ac780835133f1834d8204260772355f1c48b68de0
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 106120.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 4e538a76b5f7.
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.