

PALEMON GASKINS MEM NSG HOME

Report ID: CCN 115713
Generated: 2026-07-23T14:54:06.948Z

§ 1 Facility Identity

Facility	PALEMON GASKINS MEM NSG HOME
CCN	115713
Location	710 NORTH IRWIN AVENUE, OCILLA, GA, 31774
Ownership type	Government - County
Certified beds	30

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	7 (unchanged vs prior 24 months (7))
Deficiency citations — prior 24 months	7
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	\$0
GA state average	\$14,035 (this facility is 0.0× the GA average)
National average	\$31,239 (this facility is 0.0× 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 7 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
F644	Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.	E	Complaint
F583	Keep residents' personal and medical records private and confidential.	D	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.	D	Complaint
F645	PASARR screening for Mental disorders or Intellectual Disabilities	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
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	D	Complaint
F880	Provide and implement an infection prevention and control program.	D	Complaint

§ 5 Ownership

Ownership record	Owner on file: GRIFFIN, SHARON (individual)
------------------	---

§ 6 CMS Care Compare Star Ratings

Overall	4 / 5 (state avg 2.7 · US avg 3)
Health inspection	3 / 5 (state avg 2.8 · US avg 2.8)
Staffing	5 / 5 (state avg 2.3 · US avg 2.9)
Quality measures (QM)	2 / 5 (state avg 3 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/115713
Snapshot SHA-256	943135c2942a71fd7f0cb642e5111a065e8c0a84bf7fcd6d6807707868cd465c
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 115713.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 943135c2942a.
 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.