

SMITH CROSSING

Report ID: CCN 146110
Generated: 2026-07-23T19:22:18.384Z

§ 1 Facility Identity

Facility	SMITH CROSSING
CCN	146110
Location	10501 EMILIE LANE, ORLAND PARK, IL, 60467
Ownership type	Non profit - Corporation
Certified beds	92

§ 2 CMS Federal Record

Civil money penalties on file	\$125,906
Deficiency citations — current cycle	11 (175% vs prior 24 months (4))
Deficiency citations — prior 24 months	4
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$125,906
IL state average	\$105,530 (this facility is 1.2× the IL average)
National average	\$31,239 (this facility is 4.0× 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 11 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
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Standard survey
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F694	Provide for the safe, appropriate administration of IV fluids for a resident when needed.	D	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F578	Honor the resident's right to request, refuse, and/or discontinue treatment, to participate in or refuse to participate in experimental research, and to formulate an advance directive.	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	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	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
F693	Ensure that feeding tubes are not used unless there is a medical reason and the resident agrees; and provide appropriate care for a resident with a feeding tube.	D	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	D	Standard survey

§ 5 Ownership

Ownership record	Owner on file: ANELLO, ANDREW (individual)
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§ 6 CMS Care Compare Star Ratings

Overall	4 / 5 (state avg 2.6 · US avg 3)
Health inspection	3 / 5 (state avg 2.8 · US avg 2.8)
Staffing	5 / 5 (state avg 2.1 · 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/146110
Snapshot SHA-256	da71b083c3ec94c1c946058e84763ff078c8e6674fa292adbfa1e71f73ce7a7c
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 146110.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash da71b083c3ec.
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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