

Hillcrest Health Care Center

Report ID: CCN 165245
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§ 1 Facility Identity

Facility	Hillcrest Health Care Center
CCN	165245
Location	2121 Avenue L, Hawarden, IA, 51023
Ownership type	For profit - Limited Liability company
Certified beds	64

§ 2 CMS Federal Record

Civil money penalties on file	\$25,450
Deficiency citations — current cycle	24 (14% vs prior 24 months (21))
Deficiency citations — prior 24 months	21
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	Not listed
Abuse icon	Yes — CMS abuse icon currently listed

§ 3 Federal Penalties in Context

This facility — penalties on file	\$25,450
IA state average	\$18,747 (this facility is 1.4× the IA average)
National average	\$31,239 (this facility is 0.8× 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 24 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.	G	Complaint
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	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
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	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	Complaint
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	Complaint
F567	Honor the resident's right to manage his or her financial affairs.	D	Standard survey
F582	Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered.	D	Standard survey
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	D	Standard survey
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	D	Standard survey
F644	Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.	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
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
F744	Provide the appropriate treatment and services to a resident who displays or is diagnosed with dementia.	D	Standard survey
F760	Ensure that residents are free from significant medication errors.	D	Standard survey
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Standard survey
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	D	Standard survey
F868	Have the Quality Assessment and Assurance group have the required members and meet at least quarterly	D	Standard survey
F558	Reasonably accommodate the needs and preferences of each resident.	D	Complaint
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Complaint
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: THE ENSIGN GROUP (342 facilities); Owner on file: BURNAM, SOON (individual)
Ownership chain	THE ENSIGN GROUP (342 facilities)
Penalties vs chain average	\$25,450 vs \$20,923 (1.2× the chain average)
Current deficiencies vs chain average	24 vs 10.1 (2.4× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3.1 · US avg 3)
Health inspection	1 / 5 (state avg 2.9 · US avg 2.8)
Staffing	1 / 5 (state avg 3.6 · US avg 2.9)
Quality measures (QM)	4 / 5 (state avg 3.4 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/165245
Snapshot SHA-256	638122b2d7efe0fe300fbe9bf6353b3981a63454eb247f2c64383d7295164396
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 165245.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 638122b2d7ef.
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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