

GRAND COVE NURSING & REHABILITATION CENTER

Report ID: CCN 195376
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§ 1 Facility Identity

Facility	GRAND COVE NURSING & REHABILITATION CENTER
CCN	195376
Location	1525 W MCNEESE ST., LAKE CHARLES, LA, 70605
Ownership type	For profit - Corporation
Certified beds	109

§ 2 CMS Federal Record

Civil money penalties on file	\$29,042
Deficiency citations — current cycle	10 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
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	\$29,042
LA state average	\$49,913 (this facility is 0.6× the LA average)
National average	\$31,239 (this facility is 0.9× 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 10 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
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Complaint
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	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
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
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Complaint
F638	Assure that each resident's assessment is updated at least once every 3 months.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	D	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	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
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	D	Standard survey

§ 5 Ownership

Ownership record

Owner on file: BEEBE, TRACY (individual)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 2.5 · US avg 3)
Health inspection	3 / 5 (state avg 2.9 · US avg 2.8)
Staffing	2 / 5 (state avg 2.4 · US avg 2.9)
Quality measures (QM)	1 / 5 (state avg 2.2 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/195376
Snapshot SHA-256	6fbe765598320896b22e3a89c1bb7ea465547c2d2c715dd58c55856ec23d1ca3
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 195376.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 6fbe76559832.
 4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).
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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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