

Turtle Creek Rehabilitation and Wellness Center

Report ID: CCN 215043
Generated: 2026-07-23T13:43:28.991Z

§ 1 Facility Identity

Facility	Turtle Creek Rehabilitation and Wellness Center
CCN	215043
Location	3000 MCCOMAS AVENUE, KENSINGTON, MD, 20895
Ownership type	For profit - Corporation
Certified beds	140

§ 2 CMS Federal Record

Civil money penalties on file	\$95,975
Deficiency citations — current cycle	25 (67% vs prior 24 months (15))
Deficiency citations — prior 24 months	15
Immediate Jeopardy — current cycle	1
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	\$95,975
MD state average	\$22,972 (this facility is 4.2× the MD average)
National average	\$31,239 (this facility is 3.1× 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 25 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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	L • Immediate Jeopardy	Complaint
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	E	Standard survey
F910	Ensure resident rooms meet each resident's needs.	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
F679	Provide activities to meet all resident's needs.	D	Complaint
F944	Conduct mandatory training, for all staff, on the facility's Quality Assurance and Performance Improvement Program.	D	Complaint
F946	Provide training in compliance and ethics.	D	Complaint
F947	Ensure nurse aides have the skills they need to care for residents, and give nurse aides education in dementia care and abuse prevention.	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
F561	Honor the resident's right to and the facility must promote and facilitate resident self-determination through support of resident choice.	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

F604	Ensure that each resident is free from the use of physical restraints, unless needed for medical treatment.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	D	Standard survey
F660	Plan the resident's discharge to meet the resident's goals and needs.	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	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.	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
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	D	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	D	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.	D	Standard survey
F814	Dispose of garbage and refuse properly.	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
F921	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.	D	Standard survey

F623	Provide timely notification to the resident, and if applicable to the resident representative and ombudsman, before transfer or discharge, including appeal rights.	D	Complaint
------	---	---	-----------

§ 5 Ownership & Chain Context

Ownership record	Chain: COMMUNICARE HEALTH (121 facilities); Owner on file: GROVES, DONNA (individual)
Ownership chain	COMMUNICARE HEALTH (121 facilities)
Penalties vs chain average	\$95,975 vs \$38,458 (2.5× the chain average)
Current deficiencies vs chain average	25 vs 12.8 (1.9× 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 2.8 · US avg 2.8)
Staffing	3 / 5 (state avg 3.2 · US avg 2.9)
Quality measures (QM)	4 / 5 (state avg 3.9 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/215043
Snapshot SHA-256	9bfc8b0c3c685c93450690a2770f0aa77b36b28fd6012010e165916e6db47d6e
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 215043.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 9bfc8b0c3c68.
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/m>

ethodology; 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.