

WILSON HEALTH CARE CENTER

Report ID: CCN 215099
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§ 1 Facility Identity

Facility	WILSON HEALTH CARE CENTER
CCN	215099
Location	301 RUSSELL AVENUE, GAITHERSBURG, MD, 20877
Ownership type	Non profit - Corporation
Certified beds	285

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	8 (60% vs prior 24 months (5))
Deficiency citations — prior 24 months	5
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
MD state average	\$22,972 (this facility is 0.0× the MD 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 8 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.	E	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
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Standard survey
F622	Not transfer or discharge a resident without an adequate reason; and must provide documentation and convey specific information when a resident is transferred or discharged.	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	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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Standard survey
F919	Make sure that a working call system is available in each resident's bathroom and bathing area.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: ASBURY COMMUNITIES (7 facilities); Owner on file: ASBURY COMMUNITIES INC (organization)
Ownership chain	ASBURY COMMUNITIES (7 facilities)
Penalties vs chain average	\$0 vs \$3,372 (0.0× the chain average)
Current deficiencies vs chain average	8 vs 4.0 (2.0× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	5 / 5 (state avg 3.1 · US avg 3)
Health inspection	4 / 5 (state avg 2.8 · US avg 2.8)
Staffing	5 / 5 (state avg 3.2 · US avg 2.9)
Quality measures (QM)	5 / 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/215099
Snapshot SHA-256	7335160fa72dec1c2de6b1bd4ddacabb53eeb57200a75f871c9497aea2bbd707
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 215099.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 7335160fa72d.
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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