

Holly Hill Healthcare Center

Report ID: CCN 215204
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§ 1 Facility Identity

Facility	Holly Hill Healthcare Center
CCN	215204
Location	531 STEVENSON LANE, TOWSON, MD, 21286
Ownership type	For profit - Corporation
Certified beds	75

§ 2 CMS Federal Record

Civil money penalties on file	\$8,278
Deficiency citations — current cycle	33 (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	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	\$8,278
MD state average	\$22,972 (this facility is 0.4× the MD average)
National average	\$31,239 (this facility is 0.3× 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 33 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
F801	Employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, including a qualified dietician.	F	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F558	Reasonably accommodate the needs and preferences of each resident.	E	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.	E	Standard survey
F625	Notify the resident or the resident's representative in writing how long the nursing home will hold the resident's bed in cases of transfer to a hospital or therapeutic leave.	E	Standard survey
F636	Assess the resident completely in a timely manner when first admitted, and then periodically, at least every 12 months.	E	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.	E	Standard survey
F679	Provide activities to meet all resident's needs.	E	Complaint
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	E	Complaint

F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F582	Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered.	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
F624	Prepare residents for a safe transfer or discharge from the nursing home.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	D	Standard survey
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	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
F691	Provide appropriate colostomy, urostomy, or ileostomy care/services for a resident who requires such services.	D	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F697	Provide safe, appropriate pain management for a resident who requires such services.	D	Standard survey
F700	Try different approaches before using a bed rail. If a bed rail is needed, the facility must (1) assess a resident for safety risk; (2) review these risks and benefits with the resident/representative; (3) get informed consent; and (4) Correctly install and maintain the bed rail.	D	Standard survey

F744	Provide the appropriate treatment and services to a resident who displays or is diagnosed with dementia.	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
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	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
F914	Provide bedrooms that don't allow residents to see each other when privacy is needed.	D	Standard survey
F610	Respond appropriately to all alleged violations.	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: COMMUNICARE HEALTH (121 facilities); Owner on file: GROVES, DONNA (individual)
Ownership chain	COMMUNICARE HEALTH (121 facilities)
Penalties vs chain average	\$8,278 vs \$38,458 (0.2× the chain average)
Current deficiencies vs chain average	33 vs 12.8 (2.6× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 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)	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/215204
Snapshot SHA-256	77d168e922d38936e8e19e4ac99f802dd2b977e29bd0ac8940ce9cb39819528a
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 215204.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 77d168e922d3.
 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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