Brandon Woods of New Bedford

Report ID: CCN 225264
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§ 1 Facility Identity

Facility	Brandon Woods of New Bedford
CCN	225264
Location	397 COUNTY STREET, NEW BEDFORD, MA, 02740
Ownership type	For profit - Individual
Certified beds	135

§ 2 CMS Federal Record

Civil money penalties on file	$464,490
Deficiency citations — current cycle	46 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
Immediate Jeopardy — current cycle	**3**
Actual-harm (G+) citations — current cycle	5
Special Focus Facility status	SFF candidate
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$464,490
MA state average	$36,630 (this facility is 12.7× the MA average)
National average	$31,239 (this facility is 14.9× 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 46 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.	**K · Immediate Jeopardy**	Standard survey
F740	Ensure each resident must receive and the facility must provide necessary behavioral health care and services.	**K · Immediate Jeopardy**	Standard survey
F741	Ensure that the facility has sufficient staff members who possess the competencies and skills to meet the behavioral health needs of residents.	**K · Immediate Jeopardy**	Standard survey
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	H	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	H	Standard survey
F610	Respond appropriately to all alleged violations.	H	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.	H	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Standard survey
F944	Conduct mandatory training, for all staff, on the facility's Quality Assurance and Performance Improvement Program.	F	Standard survey
F943	Give their staff education on dementia care, and what abuse, neglect, and exploitation are; and how to report abuse, neglect, and exploitation.	F	Standard survey
F835	Administer the facility in a manner that enables it to use its resources effectively and efficiently.	F	Standard survey
F941	Develop, implement, and/or maintain an effective training program that includes effective communications for direct care staff members.	F	Standard survey

F942	Ensure that staff members are educated on resident rights and facility responsibilities to properly care for its residents.	F	Standard survey
F838	Conduct and document a facility-wide assessment to determine what resources are necessary to care for residents competently during both day-to-day operations (including nights and weekends) and emergencies.	F	Standard survey
F945	Include as part of its infection prevention and control program, mandatory training that includes written standards, policies, and procedures for the program.	F	Standard survey
F946	Provide training in compliance and ethics.	F	Standard survey
F947	Ensure nurse aides have the skills they need to care for residents, and give nurse aides education in dementia care and abuse prevention.	F	Standard survey
F949	Provide behavior health training consistent with the requirements and as determined by a facility assessment.	F	Standard survey
F847	Inform resident or representatives choice to enter into binding arbitration agreement and right to refuse.	E	Standard survey
F848	Provide a neutral and fair arbitration process and agree to arbitrator and venue.	E	Standard survey
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F881	Implement a program that monitors antibiotic use.	E	Standard survey
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	E	Standard survey
F641	Ensure each resident receives an accurate assessment.	E	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	E	Standard survey

F711	Ensure the resident's doctor reviews the resident's care, writes, signs and dates progress notes and orders, at each required visit.	E	Standard survey
F727	Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis.	E	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.	E	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	E	Standard survey
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	D	Complaint
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	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
F551	Give the resident's representative the ability to exercise the resident's rights.	D	Standard survey
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Standard survey
F603	Protect each resident from separation (from other residents, his/her room, or confinement to his/her room).	D	Standard survey
F661	Ensure necessary information is communicated to the resident, and receiving health care provider at the time of a planned discharge.	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	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

F712	Ensure that the resident and his/her doctor meet face-to-face at all required visits.	D	Standard survey
F744	Provide the appropriate treatment and services to a resident who displays or is diagnosed with dementia.	D	Standard survey
F758	Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.	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
F732	Post nurse staffing information every day.	C	Standard survey
F582	Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered.	B	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.	B	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: ELDER SERVICES (6 facilities); Owner on file: ROMANO, FRANK (individual)
Ownership chain	ELDER SERVICES (6 facilities)
Penalties vs chain average	$464,490 vs $102,989 (4.5× the chain average)
Current deficiencies vs chain average	46 vs 16.5 (2.8× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	1 / 5 (state avg 2.9 · US avg 2.8)
Staffing	4 / 5 (state avg 3 · US avg 2.9)
Quality measures (QM)	3 / 5 (state avg 3.3 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/225264
Snapshot SHA-256	15fcbd618846a1a9b747caf10cf401d42567fc420b72ea4a68983b44e1793c4a
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 225264.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 15fcbd618846.
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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