RegalCare at Wakefield

Report ID: CCN 225400
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§ 1 Facility Identity

Facility	RegalCare at Wakefield
CCN	225400
Location	ONE BATHOL STREET, WAKEFIELD, MA, 01880
Ownership type	For profit - Limited Liability company
Certified beds	149

§ 2 CMS Federal Record

Civil money penalties on file	$63,843
Deficiency citations — current cycle	28 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
Immediate Jeopardy — current cycle	**4**
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	SFF candidate
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$63,843
MA state average	$36,630 (this facility is 1.7× the MA average)
National average	$31,239 (this facility is 2.0× 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 28 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
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	**J · Immediate Jeopardy**	Standard survey
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	**J · Immediate Jeopardy**	Standard survey
F726	Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.	**J · Immediate Jeopardy**	Standard survey
F740	Ensure each resident must receive and the facility must provide necessary behavioral health care and services.	**J · Immediate Jeopardy**	Standard survey
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	F	Standard survey
F881	Implement a program that monitors antibiotic use.	F	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
F760	Ensure that residents are free from significant medication errors.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F919	Make sure that a working call system is available in each resident's bathroom and bathing area.	E	Standard survey
F949	Provide behavior health training consistent with the requirements and as determined by a facility assessment.	E	Standard survey
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	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
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
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
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Standard survey
F688	Provide appropriate care for a resident to maintain and/or improve range of motion (ROM), limited ROM and/or mobility, unless a decline is for a medical reason.	D	Standard survey
F692	Provide enough food/fluids to maintain a resident's health.	D	Standard survey
F694	Provide for the safe, appropriate administration of IV fluids for a resident when needed.	D	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F698	Provide safe, appropriate dialysis care/services for a resident who requires such services.	D	Standard survey
F699	Provide care or services that was trauma informed and/or culturally competent.	D	Standard survey
F742	Provide the appropriate treatment and services to a resident who displays or is diagnosed with mental disorder or psychosocial adjustment difficulty, or who has a history of trauma and/or post-traumatic stress disorder.	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

F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Standard survey
F887	Educate residents and staff on COVID-19 vaccination, offer the COVID-19 vaccine to eligible residents and staff after education, and properly document each resident and staff member's vaccination status.	D	Standard survey
F582	Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered.	C	Standard survey
F732	Post nurse staffing information every day.	C	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: VANTAGE CARE (8 facilities); Owner on file: VANTAGE CARE MA4 LLC (organization)
Ownership chain	VANTAGE CARE (8 facilities)
Penalties vs chain average	$63,843 vs $14,651 (4.4× the chain average)
Current deficiencies vs chain average	28 vs 10.4 (2.7× 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	1 / 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/225400
Snapshot SHA-256	74313bfeb52c69c702f04e26afdc7bc1a5e124713a51baf92cce436229cfc583
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 225400.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 74313bfeb52c.
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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