

Premier Healthcare at Harrington House

Report ID: CCN 225536
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§ 1 Facility Identity

Facility	Premier Healthcare at Harrington House
CCN	225536
Location	160 MAIN STREET, WALPOLE, MA, 02081
Ownership type	For profit - Corporation
Certified beds	90

§ 2 CMS Federal Record

Civil money penalties on file	\$43,891
Deficiency citations — current cycle	19 (1800% vs prior 24 months (1))
Deficiency citations — prior 24 months	1
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$43,891
MA state average	\$36,630 (this facility is 1.2× the MA average)
National average	\$31,239 (this facility is 1.4× 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 19 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
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Standard survey
F844	Follow rules about disclosure of ownership requirements and tell the state agency about changes in ownership and/or administrative personnel.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F881	Implement a program that monitors antibiotic use.	F	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.	E	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	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
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.	E	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Complaint
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	D	Standard survey

(injury/decline/room, etc.) that affect the resident.

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
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
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
F883	Develop and implement policies and procedures for flu and pneumonia vaccinations.	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
F641	Ensure each resident receives an accurate assessment.	B	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.	B	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: STELLAR HEALTH GROUP (7 facilities); Owner on file: 160 MAIN STREET WALPOLE OPERATOR HOLDCO LLC (organization)
Ownership chain	STELLAR HEALTH GROUP (7 facilities)
Penalties vs chain average	\$43,891 vs \$89,181 (0.5× the chain average)
Current deficiencies vs chain average	19 vs 7.6 (2.5× 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	2 / 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/225536
Snapshot SHA-256	7b5ef78c40b53a497f2821554de1449edac1a63737f30a29a96209047dd31382
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 225536.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 7b5ef78c40b5.
 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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