

Ely Manor

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§ 1 Facility Identity

Facility	Ely Manor
CCN	235264
Location	1200 Ely St, Allegan, MI, 49010
Ownership type	For profit - Corporation
Certified beds	101

§ 2 CMS Federal Record

Civil money penalties on file	\$179,146
Deficiency citations — current cycle	33 (230% vs prior 24 months (10))
Deficiency citations — prior 24 months	10
Immediate Jeopardy — current cycle	4
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	SFF candidate
Abuse icon	Yes — CMS abuse icon currently listed

§ 3 Federal Penalties in Context

This facility — penalties on file	\$179,146
MI state average	\$33,031 (this facility is 5.4× the MI average)
National average	\$31,239 (this facility is 5.7× 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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	J • Immediate Jeopardy	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	J • Immediate Jeopardy	Complaint
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	J • Immediate Jeopardy	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	J • Immediate Jeopardy	Complaint
F909	Regularly inspect all bed frames, mattresses, and bed rails (if any) for safety; and all bed rails and mattresses must attach safely to the bed frame.	G	Complaint
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	F	Complaint
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F841	Designate a physician to serve as medical director responsible for implementation of resident care policies and coordination of medical care in the facility.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	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
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise	D	Complaint

his or her rights.

F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F679	Provide activities to meet all resident's needs.	D	Complaint
F692	Provide enough food/fluids to maintain a resident's health.	D	Complaint
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Complaint
F880	Provide and implement an infection prevention and control program.	D	Complaint
F554	Allow residents to self-administer drugs if determined clinically appropriate.	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
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Standard survey
F610	Respond appropriately to all alleged violations.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	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
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
F745	Provide medically-related social services to help each resident achieve the highest possible quality of life.	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
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	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
F881	Implement a program that monitors antibiotic use.	D	Standard survey
F926	Have policies on smoking.	D	Standard survey
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	C	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: CIENA HEALTHCARE/LAUREL HEALTH CARE (83 facilities); Owner on file: KHAN, ANIS (individual)
Ownership chain	CIENA HEALTHCARE/LAUREL HEALTH CARE (83 facilities)
Penalties vs chain average	\$179,146 vs \$34,511 (5.2× the chain average)
Current deficiencies vs chain average	33 vs 11.7 (2.8× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3.2 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	4 / 5 (state avg 3.5 · US avg 2.9)
Quality measures (QM)	3 / 5 (state avg 4 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/235264
Snapshot SHA-256	dee751f43fb7bb09d73821cfe5da0d327781ea4b4f00a4a09e1fdee079c07f22
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 235264.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash dee751f43fb7.
 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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