

Regency at Whitmore Lake

Report ID: CCN 235545
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§ 1 Facility Identity

Facility	Regency at Whitmore Lake
CCN	235545
Location	8633 N Main Street, Whitmore Lake, MI, 48189
Ownership type	For profit - Corporation
Certified beds	131

§ 2 CMS Federal Record

Civil money penalties on file	\$235,995
Deficiency citations — current cycle	19 (171% vs prior 24 months (7))
Deficiency citations — prior 24 months	7
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	\$235,995
MI state average	\$33,031 (this facility is 7.1× the MI average)
National average	\$31,239 (this facility is 7.6× 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
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	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
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
F921	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.	F	Standard survey
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.	E	Complaint
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	E	Complaint
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Complaint
F610	Respond appropriately to all alleged violations.	D	Complaint
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	Complaint
F809	Ensure meals and snacks are served at times in accordance with resident's needs, preferences, and requests. Suitable and nourishing alternative meals and snacks must be provided for residents who want to eat at non-traditional times or outside of scheduled meal times.	D	Complaint

F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	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
F687	Provide appropriate foot care.	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
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
F803	Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.	D	Standard survey
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: CIENA HEALTHCARE/LAUREL HEALTH CARE (83 facilities); Owner on file: QAZI, MOHAMMAD (individual)
Ownership chain	CIENA HEALTHCARE/LAUREL HEALTH CARE (83 facilities)
Penalties vs chain average	\$235,995 vs \$34,511 (6.8× the chain average)
Current deficiencies vs chain average	19 vs 11.7 (1.6× 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)	4 / 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/235545
Snapshot SHA-256	9160bff91cca622626894f9518a3af2b3d1b2f714a4d41dfb5ed132467ee51c1
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 235545.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 9160bff91cca.
 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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