

West Woods of Bridgman

Report ID: CCN 235625
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§ 1 Facility Identity

Facility	West Woods of Bridgman
CCN	235625
Location	9935 Red Arrow Hwy, Bridgman, MI, 49106
Ownership type	For profit - Limited Liability company
Certified beds	92

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	21 (163% vs prior 24 months (8))
Deficiency citations — prior 24 months	8
Immediate Jeopardy — current cycle	1
Actual-harm (G+) citations — current cycle	3
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$0
MI state average	\$33,031 (this facility is 0.0× the MI average)
National average	\$31,239 (this facility is 0.0× 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 21 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
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	J • Immediate Jeopardy	Complaint
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	G	Complaint
F940	Develop, implement, and/or maintain an effective training program for all new and existing staff members.	G	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	G	Standard survey
F680	Ensure the activities program is directed by a qualified professional.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F921	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.	E	Standard survey
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	E	Complaint
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	D	Complaint
F760	Ensure that residents are free from significant medication errors.	D	Complaint
F645	PASARR screening for Mental disorders or Intellectual Disabilities	D	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Standard survey
F679	Provide activities to meet all resident's needs.	D	Standard survey

F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	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
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	C	Standard survey
F730	Observe each nurse aide's job performance and give regular training.	B	Complaint
F947	Ensure nurse aides have the skills they need to care for residents, and give nurse aides education in dementia care and abuse prevention.	B	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: THE PEPLINSKI GROUP (10 facilities); Owner on file: ACKERMAN, RICKY (individual)
Ownership chain	THE PEPLINSKI GROUP (10 facilities)
Penalties vs chain average	\$0 vs \$35,824 (0.0× the chain average)
Current deficiencies vs chain average	21 vs 13.3 (1.6× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3.2 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	3 / 5 (state avg 3.5 · US avg 2.9)
Quality measures (QM)	5 / 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/235625
Snapshot SHA-256	bcb371319733bdcf49db61818601b0705f3ebce6b1e670e383ee5e35f2ddb2d5
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 235625.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash bcb371319733.
 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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