

Quality Living, Inc.

Report ID: CCN 28A060
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§ 1 Facility Identity

Facility	Quality Living, Inc.
CCN	28A060
Location	6404 North 70th Plaza, Omaha, NE, 68104
Ownership type	Non profit - Corporation
Certified beds	133

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	10 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$0
NE state average	\$9,499 (this facility is 0.0× the NE 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 10 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
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Standard survey
F604	Ensure that each resident is free from the use of physical restraints, unless needed for medical treatment.	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
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
F693	Ensure that feeding tubes are not used unless there is a medical reason and the resident agrees; and provide appropriate care for a resident with a feeding tube.	D	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.	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

Ownership record	Ownership type: Non profit - Corporation
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§ 6 CMS Care Compare Star Ratings

Overall	3 / 5 (state avg 2.9 · US avg 3)
Health inspection	3 / 5 (state avg 2.8 · US avg 2.8)
Staffing	4 / 5 (state avg 3.2 · US avg 2.9)
Quality measures (QM)	4 / 5 (state avg 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/28A060
Snapshot SHA-256	ccfec2aad305984fc92c68d2468f36474163ad94a44a297938089fd50ec75ce8
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 28A060.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash ccfec2aad305.
 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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