

DELMAR CENTER FOR REHABILITATION AND NURSING

Report ID: CCN 335735
Generated: 2026-07-26T05:20:59.591Z

§ 1 Facility Identity

Facility	DELMAR CENTER FOR REHABILITATION AND NURSING
CCN	335735
Location	125 ROCKEFELLER ROAD, DELMAR, NY, 12054
Ownership type	For profit - Limited Liability company
Certified beds	120

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	32 (3100% vs prior 24 months (1))
Deficiency citations — prior 24 months	1
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	SFF candidate
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$0
NY state average	\$23,784 (this facility is 0.0× the NY 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 32 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
F726	Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	F	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	E	Standard survey
F554	Allow residents to self-administer drugs if determined clinically appropriate.	E	Standard survey
F585	Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.	E	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	E	Standard survey
F622	Not transfer or discharge a resident without an adequate reason; and must provide documentation and convey specific information when a resident is transferred or discharged.	E	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	E	Standard survey
F679	Provide activities to meet all resident's needs.	E	Standard survey
F692	Provide enough food/fluids to maintain a resident's health.	E	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	E	Standard survey

F727	Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis.	E	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	E	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.	E	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	E	Standard survey
F814	Dispose of garbage and refuse properly.	E	Standard survey
F835	Administer the facility in a manner that enables it to use its resources effectively and efficiently.	E	Standard survey
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	E	Standard survey
F868	Have the Quality Assessment and Assurance group have the required members and meet at least quarterly	E	Standard survey
F882	Designate a qualified infection preventionist to be responsible for the infection prevent and control program in the nursing home.	E	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
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	E	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.	E	Complaint

F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	E	Complaint
F577	Allow residents to easily view the nursing home's survey results and communicate with advocate agencies.	D	Standard survey
F625	Notify the resident or the resident's representative in writing how long the nursing home will hold the resident's bed in cases of transfer to a hospital or therapeutic leave.	D	Standard survey
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	D	Standard survey
F813	Have a policy regarding use and storage of foods brought to residents by family and other visitors.	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	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Complaint
F760	Ensure that residents are free from significant medication errors.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: CENTERS HEALTH CARE (37 facilities); Owner on file: GOOD SAMARITAN LUTHERAN HEALTH CARE CENTER INC (organization)
Ownership chain	CENTERS HEALTH CARE (37 facilities)
Penalties vs chain average	\$0 vs \$19,104 (0.0× the chain average)
Current deficiencies vs chain average	32 vs 9.8 (3.3× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	1 / 5 (state avg 2.7 · US avg 2.8)
Staffing	1 / 5 (state avg 2.7 · US avg 2.9)
Quality measures (QM)	4 / 5 (state avg 3.9 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/335735
Snapshot SHA-256	5a6cdf95d2851139bc6dbd22782e5a5c657617347c1b811b49d2ac887ff61ae3
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 335735.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 5a6cdf95d285.
 4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).
-

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.

CareSentinel operates as an independent legal-advertising service, not a law firm, and does not recommend, endorse, or vouch for any attorney (ABA Model Rule 5.4). This document restates the public federal record only; it is not legal advice and forms no attorney-client relationship. Inspection findings are point-in-time CMS survey results, not a determination that any specific resident was harmed.