

LAURELS OF NORWORTH THE

Report ID: CCN 365222
Generated: 2026-07-23T19:20:20.056Z

§ 1 Facility Identity

Facility	LAURELS OF NORWORTH THE
CCN	365222
Location	6830 NORTH HIGH STREET, WORTHINGTON, OH, 43085
Ownership type	For profit - Corporation
Certified beds	126

§ 2 CMS Federal Record

Civil money penalties on file	\$51,871
Deficiency citations — current cycle	17 (467% vs prior 24 months (3))
Deficiency citations — prior 24 months	3
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	2
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$51,871
OH state average	\$23,139 (this facility is 2.2× the OH average)
National average	\$31,239 (this facility is 1.7× 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 17 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	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	G	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
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
F836	Ensure the facility is licensed under applicable State and local law and operates and provides services in compliance with all applicable Federal, State, and local laws, regulations, and codes, and with accepted professional standards.	D	Complaint
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F610	Respond appropriately to all alleged violations.	D	Complaint
F644	Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.	D	Standard survey
F646	Notify the appropriate authorities when residents with MD or ID services has a significant change in condition.	D	Standard survey
F685	Assist a resident in gaining access to vision and hearing services.	D	Standard survey
F692	Provide enough food/fluids to maintain a resident's health.	D	Standard survey
F740	Ensure each resident must receive and the facility must provide necessary behavioral health care and services.	D	Standard survey

F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	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
F790	Provide routine and 24-hour emergency dental care for each resident.	D	Standard survey
F881	Implement a program that monitors antibiotic use.	D	Standard survey
F850	Hire a qualified full-time social worker in a facility with more than 120 beds.	C	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	\$51,871 vs \$34,511 (1.5× the chain average)
Current deficiencies vs chain average	17 vs 11.7 (1.5× 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 2.4 · US avg 2.9)
Quality measures (QM)	4 / 5 (state avg 4.5 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/365222
Snapshot SHA-256	81e56f162235ed225c0824b37e069c7cc56dc36d3f2b25e385a035030ab3d119
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 365222.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 81e56f162235.
 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.