

SUMMIT ACRES NURSING HOME

Report ID: CCN 365612
Generated: 2026-07-23T13:42:37.454Z

§ 1 Facility Identity

Facility	SUMMIT ACRES NURSING HOME
CCN	365612
Location	44565 SUNSET ROAD, CALDWELL, OH, 43724
Ownership type	For profit - Corporation
Certified beds	95

§ 2 CMS Federal Record

Civil money penalties on file	\$16,801
Deficiency citations — current cycle	20 (300% vs prior 24 months (5))
Deficiency citations — prior 24 months	5
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	Yes — CMS abuse icon currently listed

§ 3 Federal Penalties in Context

This facility — penalties on file	\$16,801
OH state average	\$23,139 (this facility is 0.7× the OH average)
National average	\$31,239 (this facility is 0.5× 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 20 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
F921	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.	F	Complaint
F880	Provide and implement an infection prevention and control program.	E	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
F610	Respond appropriately to all alleged violations.	D	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	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	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	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
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	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
F698	Provide safe, appropriate dialysis care/services for a resident who requires such services.	D	Standard survey
F699	Provide care or services that was trauma informed and/or culturally competent.	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
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
F791	Provide or obtain dental services for each resident.	D	Standard survey
F881	Implement a program that monitors antibiotic use.	D	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Complaint
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: ALTERCARE (22 facilities); Owner on file: TSG NURSING CENTERS, INC (organization)
Ownership chain	ALTERCARE (22 facilities)
Penalties vs chain average	\$16,801 vs \$29,931 (0.6× the chain average)
Current deficiencies vs chain average	20 vs 11.5 (1.7× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	3 / 5 (state avg 3.2 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	2 / 5 (state avg 2.4 · US avg 2.9)
Quality measures (QM)	5 / 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/365612
Snapshot SHA-256	5eeefc26a9061ad4d433ffb8ec9dab108f9661fd311590535337890e2abd8f3
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 365612.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 5eeefc26a906.
 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.