Harmar Place Nursing and Rehabilitation

Report ID: CCN 366001
Generated: 2026-07-12T00:37:00.666Z

§ 1 Facility Identity

Facility	Harmar Place Nursing and Rehabilitation
CCN	366001
Location	401 HARMAR STREET, MARIETTA, OH, 45750
Ownership type	Non profit - Corporation
Certified beds	86

§ 2 CMS Federal Record

Civil money penalties on file	$202,275
Deficiency citations — current cycle	18 (350% vs prior 24 months (4))
Deficiency citations — prior 24 months	4
Immediate Jeopardy — current cycle	**1**
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	$202,275
OH state average	$23,139 (this facility is 8.7× the OH average)
National average	$31,239 (this facility is 6.5× 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 18 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
F692	Provide enough food/fluids to maintain a resident's health.	G	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.	F	Complaint
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F881	Implement a program that monitors antibiotic use.	F	Standard survey
F610	Respond appropriately to all alleged violations.	E	Standard survey
F602	Protect each resident from the wrongful use of the resident's belongings or money.	E	Complaint
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
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
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey
F697	Provide safe, appropriate pain management for a resident who requires such services.	D	Standard survey
F742	Provide the appropriate treatment and services to a resident who displays or is diagnosed with mental disorder or psychosocial adjustment difficulty, or who has a history of trauma and/or post-traumatic stress disorder.	D	Standard survey

F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	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
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Standard survey
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	C	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: UNITED CHURCH HOMES (8 facilities); Owner on file: BOULTON, SUSAN (individual)
Ownership chain	UNITED CHURCH HOMES (8 facilities)
Penalties vs chain average	$202,275 vs $26,526 (7.6× the chain average)
Current deficiencies vs chain average	18 vs 8.5 (2.1× 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	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/366001
Snapshot SHA-256	b8d1e29b3f4c6b6eb6fec4c178a3eb121204c585236a7dc98dc559217532e548
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 366001.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash b8d1e29b3f4c.
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.