THE JEFFERSON

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§ 1 Facility Identity

Facility	THE JEFFERSON
CCN	495269
Location	900 NORTH TAYLOR STREET, ARLINGTON, VA, 22203
Ownership type	For profit - Corporation
Certified beds	31

§ 2 CMS Federal Record

Civil money penalties on file	$61,065
Deficiency citations — current cycle	42 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
Immediate Jeopardy — current cycle	**3**
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	Not listed
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$61,065
VA state average	$20,882 (this facility is 2.9× the VA average)
National average	$31,239 (this facility is 2.0× 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 42 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
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	**J · Immediate Jeopardy**	Complaint
F604	Ensure that each resident is free from the use of physical restraints, unless needed for medical treatment.	**J · Immediate Jeopardy**	Complaint
F806	Ensure each resident receives and the facility provides food that accommodates resident allergies, intolerances, and preferences, as well as appealing options.	**J · Immediate Jeopardy**	Complaint
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	G	Complaint
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
F730	Observe each nurse aide's job performance and give regular training.	F	Standard survey
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	F	Standard survey
F868	Have the Quality Assessment and Assurance group have the required members and meet at least quarterly	F	Standard survey
F678	Provide basic life support, including CPR, prior to the arrival of emergency medical personnel , subject to physician orders and the resident’s advance directives.	F	Complaint
F838	Conduct and document a facility-wide assessment to determine what resources are necessary to care for residents competently during both day-to-day operations (including nights and weekends) and emergencies.	F	Complaint
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	E	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.	E	Standard survey
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	E	Standard survey
F694	Provide for the safe, appropriate administration of IV fluids for a resident when needed.	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
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.	E	Standard survey
F944	Conduct mandatory training, for all staff, on the facility’s Quality Assurance and Performance Improvement Program.	E	Standard survey
F947	Ensure nurse aides have the skills they need to care for residents, and give nurse aides education in dementia care and abuse prevention.	E	Standard survey
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	D	Standard survey
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted	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
F676	Ensure residents do not lose the ability to perform activities of daily living unless there is a medical reason.	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
F690	Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.	D	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F712	Ensure that the resident and his/her doctor meet face-to-face at all required visits.	D	Standard survey
F729	Verify that a nurse aide has been trained; and if they haven't worked as a nurse aide for 2 years, receive retraining.	D	Standard survey
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	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
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Standard survey
F941	Develop, implement, and/or maintain an effective training program that includes effective communications for direct care staff members.	D	Standard survey
F942	Ensure that staff members are educated on resident rights and facility responsibilities to properly care for its residents.	D	Standard survey
F943	Give their staff education on dementia care, and what abuse, neglect, and exploitation are; and how to report abuse, neglect, and exploitation.	D	Standard survey
F945	Include as part of its infection prevention and control program, mandatory training that includes written standards, policies, and procedures for the program.	D	Standard survey

F946	Provide training in compliance and ethics.	D	Standard survey
F949	Provide behavior health training consistent with the requirements and as determined by a facility assessment.	D	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	Complaint
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Complaint
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	D	Complaint
F770	Provide timely, quality laboratory services/tests to meet the needs of residents.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: SUNRISE SENIOR LIVING (5 facilities); Owner on file: WELLTOWER TRS HOLDCO LLC (organization)
Ownership chain	SUNRISE SENIOR LIVING (5 facilities)
Penalties vs chain average	$61,065 vs $18,888 (3.2× the chain average)
Current deficiencies vs chain average	42 vs 17.4 (2.4× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3 · 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)	5 / 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/495269
Snapshot SHA-256	b4e45136b6457a31869098ca481f987b21738e9f87e4ecd3e37581fadf7c9745
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 495269.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash b4e45136b645.
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.

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