

Three Creeks Post Acute

Report ID: CCN 505246
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§ 1 Facility Identity

Facility	Three Creeks Post Acute
CCN	505246
Location	NORTHWEST 1310 DEANE, PULLMAN, WA, 99163
Ownership type	For profit - Limited Liability company
Certified beds	48

§ 2 CMS Federal Record

Civil money penalties on file	\$50,512
Deficiency citations — current cycle	20 (150% vs prior 24 months (8))
Deficiency citations — prior 24 months	8
Immediate Jeopardy — current cycle	1
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$50,512
WA state average	\$54,992 (this facility is 0.9× the WA average)
National average	\$31,239 (this facility is 1.6× 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
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	L • Immediate Jeopardy	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	E	Standard survey
F760	Ensure that residents are free from significant medication errors.	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
F887	Educate residents and staff on COVID-19 vaccination, offer the COVID-19 vaccine to eligible residents and staff after education, and properly document each resident and staff member's vaccination status.	E	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
F645	PASARR screening for Mental disorders or Intellectual Disabilities	E	Complaint
F740	Ensure each resident must receive and the facility must provide necessary behavioral health care and services.	D	Complaint
F644	Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.	D	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Complaint
F760	Ensure that residents are free from significant medication errors.	D	Complaint
F582	Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered.	D	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.	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
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey
F699	Provide care or services that was trauma informed and/or culturally competent.	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
F801	Employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, including a qualified dietician.	D	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.	C	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: KALESTA HEALTHCARE GROUP (17 facilities); Owner on file: KALESTA HEALTHCARE GROUP, LLC (organization)
Ownership chain	KALESTA HEALTHCARE GROUP (17 facilities)
Penalties vs chain average	\$50,512 vs \$41,023 (1.2× the chain average)
Current deficiencies vs chain average	20 vs 22.3 (0.9× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3.3 · US avg 3)
Health inspection	1 / 5 (state avg 2.9 · US avg 2.8)
Staffing	0 / 5 (state avg 3.5 · US avg 2.9)
Quality measures (QM)	2 / 5 (state avg 4.1 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/505246
Snapshot SHA-256	b1c2b41057bf7dd71577d6cd1ee267dfcd512228822c1cc6b3d7f7ec22ea0f57
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 505246.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash b1c2b41057bf.
 4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).
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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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