Colville Health and Rehabilitation of Cascadia

Report ID: CCN 505275
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§ 1 Facility Identity

Facility	Colville Health and Rehabilitation of Cascadia
CCN	505275
Location	1000 EAST ELEP STREET, COLVILLE, WA, 99114
Ownership type	For profit - Corporation
Certified beds	92

§ 2 CMS Federal Record

Civil money penalties on file	$68,351
Deficiency citations — current cycle	31 (1450% vs prior 24 months (2))
Deficiency citations — prior 24 months	2
Immediate Jeopardy — current cycle	**2**
Actual-harm (G+) citations — current cycle	2
Special Focus Facility status	SFF candidate
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$68,351
WA state average	$54,992 (this facility is 1.2× the WA average)
National average	$31,239 (this facility is 2.2× 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 31 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.	**L · Immediate Jeopardy**	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	**K · Immediate Jeopardy**	Complaint
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	H	Complaint
F760	Ensure that residents are free from significant medication errors.	G	Complaint
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
F835	Administer the facility in a manner that enables it to use its resources effectively and efficiently.	F	Complaint
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	F	Complaint
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	F	Complaint
F868	Have the Quality Assessment and Assurance group have the required members and meet at least quarterly	F	Complaint
F880	Provide and implement an infection prevention and control program.	F	Complaint
F919	Make sure that a working call system is available in each resident's bathroom and bathing area.	F	Complaint
F941	Develop, implement, and/or maintain an effective training program that includes effective communications for direct care staff members.	F	Complaint
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	E	Standard survey

F658	Ensure services provided by the nursing facility meet professional standards of quality.	E	Standard survey
F745	Provide medically-related social services to help each resident achieve the highest possible quality of life.	E	Standard survey
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	E	Complaint
F644	Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.	E	Complaint
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	E	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.	E	Complaint
F740	Ensure each resident must receive and the facility must provide necessary behavioral health care and services.	E	Complaint
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	E	Complaint
F837	Establish a governing body that is legally responsible for establishing and implementing policies for managing and operating the facility and appoints a properly licensed administrator responsible for managing the facility.	E	Complaint
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	Complaint
F944	Conduct mandatory training, for all staff, on the facility’s Quality Assurance and Performance Improvement Program.	E	Complaint
F946	Provide training in compliance and ethics.	E	Complaint
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint

F583	Keep residents' personal and medical records private and confidential.	D	Complaint
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	Complaint
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	D	Complaint
F699	Provide care or services that was trauma informed and/or culturally competent.	D	Complaint
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	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: CASCADIA HEALTHCARE (44 facilities); Owner on file: CASCADIA WASHINGTON OPERATIONS LLC (organization)
Ownership chain	CASCADIA HEALTHCARE (44 facilities)
Penalties vs chain average	$68,351 vs $23,413 (2.9× the chain average)
Current deficiencies vs chain average	31 vs 10.2 (3.0× 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	2 / 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/505275
Snapshot SHA-256	749bddad188f8eea84432b00ebcf5c8ea975b9b5aa0323f8bc2f14c8deea4336
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 505275.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 749bddad188f.
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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