SULLIVAN PARK CARE CENTER

Report ID: CCN 505383
Generated: 2026-07-23T19:21:33.265Z

§ 1 Facility Identity

Facility	SULLIVAN PARK CARE CENTER
CCN	505383
Location	14820 EAST FOURTH, SPOKANE, WA, 99216
Ownership type	For profit - Corporation
Certified beds	125

§ 2 CMS Federal Record

Civil money penalties on file	$126,188
Deficiency citations — current cycle	32 (100% vs prior 24 months (16))
Deficiency citations — prior 24 months	16
Immediate Jeopardy — current cycle	0
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	$126,188
WA state average	$54,992 (this facility is 2.3× the WA average)
National average	$31,239 (this facility is 4.0× 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 32 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
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	E	Standard survey
F730	Observe each nurse aide's job performance and give regular training.	E	Standard survey
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	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
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	E	Complaint
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	E	Complaint
F699	Provide care or services that was trauma informed and/or culturally competent.	E	Complaint
F554	Allow residents to self-administer drugs if determined clinically appropriate.	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
F622	Not transfer or discharge a resident without an adequate reason; and must provide documentation and convey specific information when a resident is transferred or discharged.	D	Standard survey
F644	Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	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
F694	Provide for the safe, appropriate administration of IV fluids for a resident when needed.	D	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
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.	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
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
F760	Ensure that residents are free from significant medication errors.	D	Standard survey
F802	Provide sufficient support personnel to safely and effectively carry out the functions of the food and nutrition service.	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
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.	D	Standard survey
F558	Reasonably accommodate the needs and preferences of each resident.	D	Complaint
F578	Honor the resident's right to request, refuse, and/or discontinue treatment, to participate in or refuse to	D	Complaint

	participate in experimental research, and to formulate an advance directive.		
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Complaint
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted	D	Complaint
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	D	Complaint
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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: PACS GROUP (280 facilities); Owner on file: TRUIST BANK (organization)
Ownership chain	PACS GROUP (280 facilities)
Penalties vs chain average	$126,188 vs $32,207 (3.9× the chain average)
Current deficiencies vs chain average	32 vs 12.7 (2.5× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	3 / 5 (state avg 3.3 · US avg 3)
Health inspection	2 / 5 (state avg 2.9 · US avg 2.8)
Staffing	2 / 5 (state avg 3.5 · US avg 2.9)
Quality measures (QM)	5 / 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/505383
Snapshot SHA-256	dce0eb41d7d2a43003378b36e625ad68507e0e65bf46219f0786721e86478d7a
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 505383.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash dce0eb41d7d2.
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.