

Bethany At Pacific

Report ID: CCN 505404
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§ 1 Facility Identity

Facility	Bethany At Pacific
CCN	505404
Location	916 PACIFIC AVENUE 3RD-5TH FLOORS, EVERETT, WA, 98201
Ownership type	Non profit - Church related
Certified beds	80

§ 2 CMS Federal Record

Civil money penalties on file	\$42,477
Deficiency citations — current cycle	18 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
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	\$42,477
WA state average	\$54,992 (this facility is 0.8× the WA average)
National average	\$31,239 (this facility is 1.4× 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
F745	Provide medically-related social services to help each resident achieve the highest possible quality of life.	E	Standard survey
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	D	Complaint
F553	Allow resident to participate in the development and implementation of his or her person-centered plan of care.	D	Standard survey
F578	Honor the resident's right to request, refuse, and/or discontinue treatment, to participate in or refuse to participate in experimental research, and to formulate an advance directive.	D	Standard survey
F582	Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered.	D	Standard survey
F585	Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.	D	Standard survey
F604	Ensure that each resident is free from the use of physical restraints, unless needed for medical treatment.	D	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Standard survey
F610	Respond appropriately to all alleged violations.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	D	Standard survey
F646	Notify the appropriate authorities when residents with MD or ID services has a significant change in condition.	D	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Standard survey

F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Standard survey
F688	Provide appropriate care for a resident to maintain and/or improve range of motion (ROM), limited ROM and/or mobility, unless a decline is for a medical reason.	D	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	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
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
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

§ 5 Ownership

Ownership record	Owner on file: DEGROODT, PATRICIA (individual)
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§ 6 CMS Care Compare Star Ratings

Overall	4 / 5 (state avg 3.3 · US avg 3)
Health inspection	3 / 5 (state avg 2.9 · US avg 2.8)
Staffing	4 / 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/505404
Snapshot SHA-256	6da27aec4f4c62511c5a74f7fa7250a2b040c8d2ad39ea9ba528d38d033ea911
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 505404.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 6da27aec4f4c.
 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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