

SUNSHINE HEALTH & REHAB

Report ID: CCN 505411
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§ 1 Facility Identity

Facility	SUNSHINE HEALTH & REHAB
CCN	505411
Location	10410 EAST NINTH AVENUE, SPOKANE, WA, 99206
Ownership type	For profit - Individual
Certified beds	37

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	12 (8% vs prior 24 months (13))
Deficiency citations — prior 24 months	13
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	\$0
WA state average	\$54,992 (this facility is 0.0× the WA average)
National average	\$31,239 (this facility is 0.0× 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 12 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
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.	E	Standard survey
F641	Ensure each resident receives an accurate assessment.	E	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	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.	D	Complaint
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	D	Standard survey
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	D	Standard survey
F868	Have the Quality Assessment and Assurance group have the required members and meet at least quarterly	D	Standard survey
F921	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.	D	Standard survey
F851	Electronically submit to CMS complete and accurate direct care staffing information, based on payroll and other verifiable and auditable data.	C	Complaint

§ 5 Ownership

Ownership record	Owner on file: DIKES, CAROL (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/505411
Snapshot SHA-256	1612976d25688b7e2d0cb9033a05d0d9b2707a7a6f592830d54c00e762d032df
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 505411.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 1612976d2568.
 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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