

JUDSON PARK HEALTH CENTER

Report ID: CCN 505455
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§ 1 Facility Identity

Facility	JUDSON PARK HEALTH CENTER
CCN	505455
Location	23620 MARINE VIEW DRIVE SOUTH, DES MOINES, WA, 98198
Ownership type	Non profit - Corporation
Certified beds	96

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	20 (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	\$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 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
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.	E	Standard survey
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	E	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	E	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.	E	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	E	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
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	D	Standard survey
F644	Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.	D	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Standard survey
F679	Provide activities to meet all resident's needs.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	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
F697	Provide safe, appropriate pain management for a resident who requires such services.	D	Standard survey
F699	Provide care or services that was trauma informed and/or culturally competent.	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
F791	Provide or obtain dental services for each resident.	D	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	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
F880	Provide and implement an infection prevention and control program.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: HUMANGOOD (17 facilities); Owner on file: HUMANGOOD WASHINGTON (organization)
Ownership chain	HUMANGOOD (17 facilities)
Penalties vs chain average	\$0 vs \$14,094 (0.0× the chain average)
Current deficiencies vs chain average	20 vs 8.1 (2.5× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	5 / 5 (state avg 3.3 · US avg 3)
Health inspection	3 / 5 (state avg 2.9 · US avg 2.8)
Staffing	5 / 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/505455
Snapshot SHA-256	952b15cddd7c0d81a36b75811ca7ad3bb609d96fd2680054e687a6b6c88617ee
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 505455.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 952b15cddd7c.
 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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