

OROVILLE HOSPITAL POST-ACUTE CENTER

Report ID: CCN 555281
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§ 1 Facility Identity

Facility	OROVILLE HOSPITAL POST-ACUTE CENTER
CCN	555281
Location	1000 EXECUTIVE PARKWAY, OROVILLE, CA, 95966
Ownership type	Non profit - Other
Certified beds	126

§ 2 CMS Federal Record

Civil money penalties on file	\$45,500
Deficiency citations — current cycle	29 (867% vs prior 24 months (3))
Deficiency citations — prior 24 months	3
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	Yes — CMS abuse icon currently listed

§ 3 Federal Penalties in Context

This facility — penalties on file	\$45,500
CA state average	\$26,375 (this facility is 1.7× the CA average)
National average	\$31,239 (this facility is 1.5× 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 29 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
F625	Notify the resident or the resident's representative in writing how long the nursing home will hold the resident's bed in cases of transfer to a hospital or therapeutic leave.	E	Standard survey
F636	Assess the resident completely in a timely manner when first admitted, and then periodically, at least every 12 months.	E	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	E	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	E	Standard survey
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	E	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	E	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.	E	Standard survey
F802	Provide sufficient support personnel to safely and effectively carry out the functions of the food and nutrition service.	E	Standard survey
F803	Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.	E	Standard survey
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	E	Standard survey
F805	Ensure each resident receives and the facility provides food prepared in a form designed to meet individual needs.	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
F813	Have a policy regarding use and storage of foods brought to residents by family and other visitors.	E	Standard survey
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	E	Standard survey
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F925	Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.	E	Standard survey
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Complaint
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
F623	Provide timely notification to the resident, and if applicable to the resident representative and ombudsman, before transfer or discharge, including appeal rights.	D	Standard survey
F638	Assure that each resident's assessment is updated at least once every 3 months.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	D	Standard survey
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	D	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Standard survey
F690	Provide appropriate care for residents who are continent or incontinent of bowel/bladder,	D	Standard survey

appropriate catheter care, and appropriate care to prevent urinary tract infections.

F692	Provide enough food/fluids to maintain a resident's health.	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
F801	Employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, including a qualified dietician.	D	Standard survey
F847	Inform resident or representatives choice to enter into binding arbitration agreement and right to refuse.	D	Standard survey

§ 5 Ownership

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

Overall	1 / 5 (state avg 3.2 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	1 / 5 (state avg 3.1 · US avg 2.9)
Quality measures (QM)	1 / 5 (state avg 4.2 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/555281
Snapshot SHA-256	c3b40d252ab53fa7f9a42fdb32ac2065faacf14cfb358d78fb6148043c08f23
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 555281.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash c3b40d252ab5.
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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