

FARWELL CARE AND REHABILITATION CENTER

Report ID: CCN 675098
Generated: 2026-07-23T11:36:45.415Z

§ 1 Facility Identity

Facility	FARWELL CARE AND REHABILITATION CENTER
CCN	675098
Location	305 FIFTH ST, FARWELL, TX, 79325
Ownership type	Government - Hospital district
Certified beds	75

§ 2 CMS Federal Record

Civil money penalties on file	\$13,397
Deficiency citations — current cycle	17 (325% vs prior 24 months (4))
Deficiency citations — prior 24 months	4
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	\$13,397
TX state average	\$49,788 (this facility is 0.3× the TX average)
National average	\$31,239 (this facility is 0.4× 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 17 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
F940	Develop, implement, and/or maintain an effective training program for all new and existing staff members.	E	Complaint
F583	Keep residents' personal and medical records private and confidential.	E	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.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
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
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	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
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
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Standard survey
F699	Provide care or services that was trauma informed and/or culturally competent.	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
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
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	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

§ 5 Ownership

Ownership record	Owner on file: FARWELL HOSPITAL DISTRICT (organization)
------------------	---

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 2.7 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	1 / 5 (state avg 1.8 · US avg 2.9)
Quality measures (QM)	3 / 5 (state avg 3.8 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/675098
Snapshot SHA-256	944062f3127eca3d78e7aa1eec80b387a12a0c5bdcfcf7983126edd67f1a2846
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 675098.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 944062f3127e.
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.