

CHEROKEE TRAILS NURSING HOME

Report ID: CCN 675835
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§ 1 Facility Identity

Facility	CHEROKEE TRAILS NURSING HOME
CCN	675835
Location	330 E BAGLEY RD, RUSK, TX, 75785
Ownership type	Government - Hospital district
Certified beds	140

§ 2 CMS Federal Record

Civil money penalties on file	\$85,329
Deficiency citations — current cycle	10 (400% vs prior 24 months (2))
Deficiency citations — prior 24 months	2
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	\$85,329
TX state average	\$49,788 (this facility is 1.7× the TX average)
National average	\$31,239 (this facility is 2.7× 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 10 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
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.	E	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	E	Standard survey
F941	Develop, implement, and/or maintain an effective training program that includes effective communications for direct care staff members.	E	Standard survey
F946	Provide training in compliance and ethics.	E	Standard survey
F949	Provide behavior health training consistent with the requirements and as determined by a facility assessment.	E	Standard survey
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Complaint
F880	Provide and implement an infection prevention and control program.	D	Standard survey
F940	Develop, implement, and/or maintain an effective training program for all new and existing staff members.	D	Standard survey
F943	Give their staff education on dementia care, and what abuse, neglect, and exploitation are; and how to report abuse, neglect, and exploitation.	D	Standard survey
F732	Post nurse staffing information every day.	C	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: ADVANCED HEALTHCARE SOLUTIONS (30 facilities); Owner on file: BAYLOR COUNTY HOSPITAL DISTRICT (organization)
Ownership chain	ADVANCED HEALTHCARE SOLUTIONS (30 facilities)
Penalties vs chain average	\$85,329 vs \$59,221 (1.4× the chain average)
Current deficiencies vs chain average	10 vs 8.1 (1.2× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 2.7 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	2 / 5 (state avg 1.8 · US avg 2.9)
Quality measures (QM)	5 / 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/675835
Snapshot SHA-256	7593b9c3161aaa33fa0647c2d3a7802dee63048ad69807c12c09c3b5c13d173b
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 675835.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 7593b9c3161a.
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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