

THE OVERSIGHT REPORT

EVIDENCE REPORT

Sample Facility Name

Springfield, IL 62704

CCN: 000000 · 120 Beds

RISK SCORE

87.4

Nat'l avg: 32.1

CMS STARS

1/5

Nat'l avg: 3.2/5

TOTAL FINES

\$285K

Nat'l avg: \$28K

KEY FINDINGS

- High risk score: 87.4 (national avg: 32.1)
- 2 immediate jeopardy citations
- Zero-RN coverage on 31.0% of days
- \$284,500 in federal fines
- 5 actual-harm citations

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Data through: Q3 2025 (staffing) · Dec 2025 (inspections) · Jan 2026 (ownership)
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Prepared for: _____

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About This Report

This report compiles data from 6 federal databases maintained by the Centers for Medicare & Medicaid Services (CMS). It is designed to support families evaluating care options, attorneys conducting discovery, journalists investigating patterns, and regulators monitoring compliance. All data is publicly available and independently verifiable against original sources.

Verify facilities on Medicare.gov:

<https://www.medicare.gov/care-compare/>

1. Executive Summary

RISK SCORE

87.4

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Assessment

This facility has an overall CMS star rating of 1 out of 5. It has been assessed \$284,500 in federal penalties across 4 enforcement actions since 2023. It reported zero registered nurse hours on 29 days (31.0% of Q3 2025), a potential violation of 42 CFR §483.35. State inspectors documented 2 instances of immediate jeopardy and 5 instances of actual harm — conditions posing serious danger to residents. The facility is operated by Sample Holdings LLC, who controls 4 facilities in CMS data averaging 1.3 CMS stars. Total staffing of 2.35 hours per resident per day is 32% below the 3.48 HPRD threshold cited by 18 state Attorneys General. Penalties have escalated from \$42,500 (2023) to \$89,000 (2025), indicating a worsening compliance trajectory.

2. Ownership Portfolio

Owner Name:	Sample Holdings LLC
Chain Name:	Sample Healthcare Group
Ownership Type:	For Profit - Corporation
Portfolio Size:	4 facilities in our dataset

Portfolio-Wide Performance

This facility is operated by Sample Holdings LLC, who controls 4 facilities nationwide. Portfolio averages: 1.3 CMS stars, \$196,375 in fines per facility, 79.8 risk score.

Worst-Performing Siblings

Facility	Location	Stars	Risk	Defs	Total Fines
>> Sample Facility Name	Springfield, IL	1/5	87.4	23	\$284,500
Lakeview Manor	Joliet, IL	1/5	82.1	19	\$195,000
Sunrise Care of Peoria	Peoria, IL	1/5	78.5	17	\$172,000
Valley Ridge Health	Gary, IN	2/5	71.3	14	\$134,000
PORTFOLIO AVERAGE		1.3	79.8		\$196,375

Facility	Location	Stars	Risk	Defs	Total Fines
NATIONAL AVERAGE		3.2	32.1	8.5	\$28,000

3. Staffing Analysis

TOTAL HPRD 2.35 hrs Nat'l avg: 3.82 hrs	RN HPRD 0.15 hrs Nat'l avg: 0.54 hrs	ZERO-RN DAYS 31.0% Nat'l avg: 8.0%
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Staffing Breakdown vs National Benchmarks

Metric	This Facility	National Avg	Difference
Registered Nurse (RN)	0.15 hrs	0.54 hrs	-72%
Licensed Practical Nurse	0.47 hrs	0.79 hrs	-41%
Certified Nursing Asst	1.58 hrs	2.18 hrs	-28%
Total Nursing HPRD	2.35 hrs	3.82 hrs	-38%
Zero-RN Day %	31.0%	8%	23.0%
Contract Staffing %	28.0%	12%	16.0%
CMS Stars (Staffing)	1/5	N/A	N/A
CMS Stars (Overall)	1/5	3.2/5	-2.2

Weekend Total HPRD:	1.82 hrs
Weekend RN HPRD:	0.04 hrs
Average Census:	98.3

Staffing Verification

Self-Reported RN Hours:	0.26 hrs
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Verified RN Hours (Payroll):

0.15 hrs

Discrepancy:

42.0%

Regulatory Context (42 CFR §483.35): Federal law requires a registered nurse on site for at least 8 consecutive hours per day, 7 days per week. This facility reported zero RN hours on 31.0% of days, which may indicate a violation of this federal requirement.

Staffing Standard Context: In February 2026, 18 state Attorneys General urged CMS to adopt a minimum staffing standard of 3.48 hours per resident per day. This facility provides 2.35 HPRD, which is 32% below the proposed threshold.

Verification Discrepancy: This facility shows a 42.0% discrepancy between self-reported and verified staffing levels, which may warrant further investigation.

Contract Staffing Context: Research in Health Affairs has linked high contract staffing rates to quality concerns. This facility reports 28.0% contract staffing, above the national average of 12.0%.

4. Inspection History

Total Deficiencies:	23
Immediate Jeopardy Citations:	2
Actual Harm Citations:	5

Top Deficiency Categories

Infection Control:	6
Fall Prevention:	4
Medication Errors:	3
Nutrition/Dietary:	3
Resident Rights:	2

Individual Deficiency Details

Top 8 most serious deficiencies (sorted by severity — immediate jeopardy first):

Date	Tag Code	Scope / Severity	Description
Sep 14, 2025	F0880	K (Immediate Jeopardy)	Failure to establish and maintain an infection prevention and control program. Facility failed to implement proper hand hygiene protocols, exposing multiple residents to infectious agents.
Jun 1, 2025	F0689	J (Immediate)	Failure to ensure residents receive adequate supervision and assistance to

Date	Tag Code	Scope / Severity	Description
		Jeopardy)	prevent accidents. Two fall incidents within 48 hours involving the same resident without updated care plan.
Sep 14, 2025	F0684	H (Actual Harm)	Failure to provide care and services to maintain the highest practicable well-being. Resident developed a Stage 3 pressure ulcer due to inadequate repositioning and wound care.
Mar 19, 2025	F0760	H (Actual Harm)	Failure to ensure each resident's drug regimen is free from unnecessary drugs. Resident received incorrect medication dosage for 6 consecutive days.
Nov 7, 2024	F0812	H (Actual Harm)	Failure to procure food from sources approved or considered satisfactory and store, prepare, distribute, and serve food in accordance with professional standards.
Nov 7, 2024	F0686	G (Harm - No Jeopardy)	Failure to ensure that a resident who has a pressure ulcer receives necessary treatment and services consistent with professional standards of practice.
Jun 1, 2025	F0585	G (Harm - No Jeopardy)	Failure to establish a grievance policy and make prompt efforts to resolve grievances. Multiple resident complaints about call light response times went unaddressed for weeks.
Mar 19, 2025	F0657	F (No Harm - Potential)	Failure to develop a comprehensive care plan for each resident that includes measurable objectives and timetables.

Immediate Jeopardy Context (42 CFR §488.301): Immediate jeopardy citations indicate conditions that have caused, or are likely to cause, serious injury, harm, impairment, or death to a resident. This facility has received 2 such citations.

5. Financial Penalties

Total Fines:	\$284,500
Number of Fines:	4
Payment Denials:	1

Penalty Timeline

Chronological record of all federal penalties:

Date	Amount	Type	Description
Apr 14, 2023	\$42,500	Fine	Civil monetary penalty
Nov 27, 2023	\$0	Payment Denial	Payment denial starting Nov 30, 2023 for 30 days

Date	Amount	Type	Description
Jun 9, 2024	\$68,000	Fine	Civil monetary penalty
Dec 2, 2024	\$85,000	Fine	Civil monetary penalty
Jul 21, 2025	\$89,000	Fine	Civil monetary penalty
TOTAL	\$284,500		

Civil Monetary Penalties (42 CFR §488.438): CMS imposes civil monetary penalties on facilities that fail to meet federal requirements. Penalties range from \$1,000 to \$21,393 per day depending on severity. This facility has been assessed \$284,500 in total penalties.

Payment Denials (42 CFR §488.417): CMS can deny payment for new admissions when facilities are out of compliance. This facility has 1 payment denial on record.

6. Red Flags & Accountability Indicators

Immediate Jeopardy: 2 citations

Immediate jeopardy citations (42 CFR §488.301) indicate the most serious form of noncompliance — conditions that have caused, or are likely to cause, serious injury, harm, impairment, or death.

Actual Harm: 5 citations

Actual harm citations indicate residents were directly and negatively affected by facility practices or conditions.

Total Staffing Below 3.48 HPRD: 2.35 hours

In February 2026, 18 state Attorneys General called 3.48 HPRD the minimum safe staffing level. This facility is 32% below that threshold.

High Zero-RN Days: 31.0%

Federal law (42 CFR §483.35) requires an RN on site at least 8 hours per day, 7 days per week.

Staffing Verification Gap: 42.0%

Large discrepancies between self-reported and payroll-verified staffing may warrant investigation.

High Financial Penalties: \$284,500

Repeated or severe violations resulted in substantial civil monetary penalties.

High Contract Staffing: 28.0%

Research links high contract staffing rates to continuity of care concerns.

7. Comparison Context

How This Facility Compares

Key metrics for Sample Facility Name compared against national averages. Percentile rankings are estimated relative to all 14,713 nursing homes nationwide.

Metric	This Facility	National Avg	Percentile
CMS Stars	1/5	3.2/5	10th
Risk Score	87.4	32.1	10th
Total Staffing HPRD	2.35	3.82	10th
RN Staffing HPRD	0.15	0.54	10th
Zero-RN Day %	31.0%	8%	10th
Total Deficiencies	23	8.5	10th
Total Fines	\$284,500	\$28,000	10th
Contract Staffing %	28.0%	12%	10th

8. Nearby Alternatives

The following facilities within a reasonable distance have lower risk scores than Sample Facility Name. This comparison is provided for reference purposes only and does not constitute a recommendation.

Facility	Distance	City	Stars	Risk	HPRD	Fines
Oakwood Care Center	2.3 mi	Springfield, IL	4/5	22.1	4.12	\$12,000
Lincoln Meadows Nursing	4.1 mi	Springfield, IL	4/5	18.5	4.35	\$8,500
Heritage Health Center	5.7 mi	Chatham, IL	3/5	35.2	3.78	\$22,000

9. Data Sources & Methodology

Data Sources

All data sourced from publicly available federal databases:

- CMS Care Compare (Provider Information, Star Ratings)
- CMS Payroll-Based Journal (Daily Nurse Staffing through Q3 2025)
- CMS Health Deficiencies (State Survey Inspections 2017-December 2025)
- CMS Penalties (Civil Monetary Penalties, Payment Denials 2023-2025)
- CMS Ownership Database (Corporate Structure, January 2026)
- CMS HCRIS Cost Reports (FY2024 related-party transactions)

Composite Risk Score Formula

Weighted composite of multiple factors (scale: 0-100):

- Staffing Levels: 30% (verified payroll vs. self-reported, zero-RN days)
- Inspection Results: 25% (deficiencies, serious danger, harm citations)
- Financial Penalties: 20% (civil monetary penalties, payment denials)
- Ownership History: 15% (portfolio performance, ownership changes)
- Quality Measures: 10% (CMS star rating components)

Higher scores indicate greater patterns of concern. Thresholds: 0-40 (Low), 40-60 (Moderate), 60+ (High).

Regulatory References

Federal regulations cited in this report:

- 42 CFR §483.35 — Nursing Services (RN staffing requirements)
- 42 CFR §488.301 — Definitions (Immediate Jeopardy)
- 42 CFR §488.417 — Denial of Payment (New Admissions)
- 42 CFR §488.438 — Civil Monetary Penalties

10. Disclaimer

This report is generated from publicly available federal data and is provided for informational purposes only.

This document does not constitute legal advice, medical advice, or a recommendation for or against any specific facility. Risk scores represent patterns in federal data that may warrant further investigation.

Facilities should be evaluated through personal visits, consultation with healthcare professionals, and review of current inspection reports. Conditions may have changed since data collection.

If you have concerns about a nursing home, contact: Your state survey agency (health department), HHS Office of Inspector General (tips.hhs.gov), or National Eldercare Locator (1-800-677-1116).