

COMPLETE CARE AT FOX HILL

Report ID: CCN 075183
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§ 1 Facility Identity

Facility	COMPLETE CARE AT FOX HILL
CCN	075183
Location	1253 HARTFORD TPKE, VERNON, CT, 06066
Ownership type	For profit - Corporation
Certified beds	120

§ 2 CMS Federal Record

Civil money penalties on file	\$25,449
Deficiency citations — current cycle	20 (567% 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	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$25,449
CT state average	\$18,685 (this facility is 1.4× the CT average)
National average	\$31,239 (this facility is 0.8× 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
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	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
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F887	Educate residents and staff on COVID-19 vaccination, offer the COVID-19 vaccine to eligible residents and staff after education, and properly document each resident and staff member's vaccination status.	E	Standard survey
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	E	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	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Standard survey
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	D	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Standard survey
F610	Respond appropriately to all alleged violations.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	D	Standard survey
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of	D	Standard survey

	being admitted		
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
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F697	Provide safe, appropriate pain management for a resident who requires such services.	D	Standard survey
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	D	Standard survey
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Complaint
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: COMPLETE CARE (85 facilities); Owner on file: PC GEN CT OPCO HOLDCO LLC (organization)
Ownership chain	COMPLETE CARE (85 facilities)
Penalties vs chain average	\$25,449 vs \$26,818 (0.9× the chain average)
Current deficiencies vs chain average	20 vs 11.1 (1.8× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	3 / 5 (state avg 3 · US avg 3)
Health inspection	2 / 5 (state avg 2.7 · US avg 2.8)
Staffing	3 / 5 (state avg 3.3 · US avg 2.9)
Quality measures (QM)	5 / 5 (state avg 3.7 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/075183
Snapshot SHA-256	abd5efebf1f999871e966cfe5e13b55b37a4b19fba2c2a9e2aa757157dd5cf30
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 075183.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash abd5efebf1f9.
 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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