

VILLAGE CREST CENTER FOR HEALTH & REHABILITATION

Report ID: CCN 075208
Generated: 2026-07-23T14:55:57.285Z

§ 1 Facility Identity

Facility	VILLAGE CREST CENTER FOR HEALTH & REHABILITATION
CCN	075208
Location	19 POPLAR STREET, NEW MILFORD, CT, 06776
Ownership type	For profit - Corporation
Certified beds	95

§ 2 CMS Federal Record

Civil money penalties on file	\$24,418
Deficiency citations — current cycle	13 (225% vs prior 24 months (4))
Deficiency citations — prior 24 months	4
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$24,418
CT state average	\$18,685 (this facility is 1.3× 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 13 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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	G	Complaint
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F791	Provide or obtain dental services for each resident.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F635	Provide doctor's orders for the resident's immediate care at the time the resident was admitted.	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Standard survey
F694	Provide for the safe, appropriate administration of IV fluids for a resident when needed.	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
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
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.	D	Standard survey
F814	Dispose of garbage and refuse properly.	C	Standard survey
F577	Allow residents to easily view the nursing home's survey results and communicate with advocate agencies.	B	Standard survey

F921	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.	B	Standard survey
------	---	---	-----------------

§ 5 Ownership & Chain Context

Ownership record	Chain: NATIONAL HEALTH CARE ASSOCIATES (43 facilities); Owner on file: BNB HEALTH CARE FUNDS LLC (organization)
Ownership chain	NATIONAL HEALTH CARE ASSOCIATES (43 facilities)
Penalties vs chain average	\$24,418 vs \$13,894 (1.8× the chain average)
Current deficiencies vs chain average	13 vs 11.0 (1.2× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	3 / 5 (state avg 3 · US avg 3)
Health inspection	3 / 5 (state avg 2.7 · US avg 2.8)
Staffing	3 / 5 (state avg 3.3 · US avg 2.9)
Quality measures (QM)	4 / 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/075208
Snapshot SHA-256	9de4bd60b0ba94aae7839d71c9573eec0ca1f42e78f7918b4dfa2b8a1edef725
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 075208.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 9de4bd60b0ba.
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.