

MANCHESTER REHABILITATION AND HEALTHCARE CENTER

Report ID: CCN 075333
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§ 1 Facility Identity

Facility	MANCHESTER REHABILITATION AND HEALTHCARE CENTER
CCN	075333
Location	385 W CENTER ST, MANCHESTER, CT, 06040
Ownership type	For profit - Corporation
Certified beds	126

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	8 (300% vs prior 24 months (2))
Deficiency citations — prior 24 months	2
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	\$0
CT state average	\$18,685 (this facility is 0.0× the CT average)
National average	\$31,239 (this facility is 0.0× 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 8 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
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Complaint
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
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	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
F676	Ensure residents do not lose the ability to perform activities of daily living unless there is a medical reason.	D	Standard survey
F730	Observe each nurse aide's job performance and give regular training.	D	Standard survey
F758	Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.	D	Standard survey
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.	B	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: ATLAS HEALTHCARE (29 facilities); Owner on file: CT-3 OPERATIONS HOLDINGS LLC (organization)
Ownership chain	ATLAS HEALTHCARE (29 facilities)
Penalties vs chain average	\$0 vs \$54,948 (0.0× the chain average)
Current deficiencies vs chain average	8 vs 8.9 (0.9× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	5 / 5 (state avg 3 · US avg 3)
Health inspection	4 / 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/075333
Snapshot SHA-256	adcd59cc12132b9ca0084bb2dbe349b8e04c1db6a1a0a6f01fc49ea371c35d24
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 075333.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash adcd59cc1213.
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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