

VERNON REHABILITATION AND HEALTHCARE CENTER

Report ID: CCN 075334
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§ 1 Facility Identity

Facility	VERNON REHABILITATION AND HEALTHCARE CENTER
CCN	075334
Location	180 REGAN ROAD, VERNON, CT, 06066
Ownership type	For profit - Corporation
Certified beds	120

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	9 (350% 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	\$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 9 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
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Standard survey
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Standard survey
F688	Provide appropriate care for a resident to maintain and/or improve range of motion (ROM), limited ROM and/or mobility, unless a decline is for a medical reason.	D	Standard survey
F692	Provide enough food/fluids to maintain a resident's health.	D	Standard survey
F760	Ensure that residents are free from significant medication errors.	D	Standard survey
F849	Arrange for the provision of hospice services or assist the resident in transferring to a facility that will arrange for the provision of hospice services.	D	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F803	Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.	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	9 vs 8.9 (1.0× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	5 / 5 (state avg 3 · US avg 3)
Health inspection	5 / 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/075334
Snapshot SHA-256	4b0fb307f0612937ed0fe25a14535afd26621f4e9fc6f8322c757111e7853e84
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 075334.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 4b0fb307f061.
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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