Flanagan Rehabilitation and Health Care Center

Report ID: CCN 145842
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§ 1 Facility Identity

Facility	Flanagan Rehabilitation and Health Care Center
CCN	145842
Location	201 EAST FALCON HIGHWAY, FLANAGAN, IL, 61740
Ownership type	For profit - Corporation
Certified beds	43

§ 2 CMS Federal Record

Civil money penalties on file	$80,703
Deficiency citations — current cycle	14 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	2
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	$80,703
IL state average	$105,530 (this facility is 0.8× the IL average)
National average	$31,239 (this facility is 2.6× 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 14 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
F760	Ensure that residents are free from significant medication errors.	G	Complaint
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	G	Complaint
F868	Have the Quality Assessment and Assurance group have the required members and meet at least quarterly	F	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.	E	Complaint
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.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	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	Complaint
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	D	Complaint
F745	Provide medically-related social services to help each resident achieve the highest possible quality of life.	D	Complaint
F558	Reasonably accommodate the needs and preferences of each resident.	D	Standard survey
F568	Properly hold, secure, and manage each resident's personal money which is deposited with the nursing home.	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

F692	Provide enough food/fluids to maintain a resident's health.	D	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: PETERSEN HEALTH CARE (12 facilities); Owner on file: XCH, LLC (organization)
Ownership chain	PETERSEN HEALTH CARE (12 facilities)
Penalties vs chain average	$80,703 vs $102,503 (0.8× the chain average)
Current deficiencies vs chain average	14 vs 10.8 (1.3× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	3 / 5 (state avg 2.6 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	3 / 5 (state avg 2.1 · US avg 2.9)
Quality measures (QM)	5 / 5 (state avg 3 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/145842
Snapshot SHA-256	082b88983ff6b6c6bc6003389d010da556973a9a399fd6750609c46463a56b14
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 145842.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 082b88983ff6.
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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