

NORTONVILLE HEALTH CARE CENTER

Report ID: CCN 175323
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§ 1 Facility Identity

Facility	NORTONVILLE HEALTH CARE CENTER
CCN	175323
Location	412 E WALNUT ST, NORTONVILLE, KS, 66060
Ownership type	For profit - Limited Liability company
Certified beds	45

§ 2 CMS Federal Record

Civil money penalties on file	\$271,205
Deficiency citations — current cycle	37 (37% vs prior 24 months (27))
Deficiency citations — prior 24 months	27
Immediate Jeopardy — current cycle	4
Actual-harm (G+) citations — current cycle	4
Special Focus Facility status	SFF candidate
Abuse icon	Yes — CMS abuse icon currently listed

§ 3 Federal Penalties in Context

This facility — penalties on file	\$271,205
KS state average	\$22,557 (this facility is 12.0× the KS average)
National average	\$31,239 (this facility is 8.7× 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 37 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.	L · Immediate Jeopardy	Standard survey
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	L · Immediate Jeopardy	Standard survey
F880	Provide and implement an infection prevention and control program.	L · Immediate Jeopardy	Standard survey
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	J · Immediate Jeopardy	Complaint
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Complaint
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	G	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Standard survey
F697	Provide safe, appropriate pain management for a resident who requires such services.	G	Standard survey
F620	Not require residents to give up Medicare or Medicaid benefits, or pay privately as a condition of admission; and must tell residents what care they do not provide.	F	Standard survey
F679	Provide activities to meet all resident's needs.	F	Standard survey
F726	Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.	F	Standard survey
F730	Observe each nurse aide's job performance and give regular training.	F	Standard survey
F835	Administer the facility in a manner that enables it to use its resources effectively and efficiently.	F	Standard survey

F838	Conduct and document a facility-wide assessment to determine what resources are necessary to care for residents competently during both day-to-day operations (including nights and weekends) and emergencies.	F	Standard survey
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	F	Standard survey
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	F	Standard survey
F868	Have the Quality Assessment and Assurance group have the required members and meet at least quarterly	F	Standard survey
F881	Implement a program that monitors antibiotic use.	F	Standard survey
F882	Designate a qualified infection preventionist to be responsible for the infection prevent and control program in the nursing home.	F	Standard survey
F883	Develop and implement policies and procedures for flu and pneumonia vaccinations.	F	Standard survey
F944	Conduct mandatory training, for all staff, on the facility's Quality Assurance and Performance Improvement Program.	F	Standard survey
F947	Ensure nurse aides have the skills they need to care for residents, and give nurse aides education in dementia care and abuse prevention.	F	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.	E	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.	E	Standard survey
F887	Educate residents and staff on COVID-19 vaccination, offer the COVID-19 vaccine to eligible residents and	E	Standard survey

staff after education, and properly document each resident and staff member's vaccination status.

F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Complaint
F582	Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered.	D	Standard survey
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	D	Standard survey
F690	Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.	D	Standard survey
F698	Provide safe, appropriate dialysis care/services for a resident who requires such services.	D	Standard survey
F699	Provide care or services that was trauma informed and/or culturally competent.	D	Standard survey
F744	Provide the appropriate treatment and services to a resident who displays or is diagnosed with dementia.	D	Standard survey
F791	Provide or obtain dental services for each resident.	D	Standard survey
F636	Assess the resident completely in a timely manner when first admitted, and then periodically, at least every 12 months.	D	Complaint
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
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	Complaint
F732	Post nurse staffing information every day.	C	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: ANEW HEALTHCARE (2 facilities)
Ownership chain	ANEW HEALTHCARE (2 facilities)
Penalties vs chain average	\$271,205 vs \$172,347 (1.6× the chain average)
Current deficiencies vs chain average	37 vs 26.5 (1.4× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	1 / 5 (state avg 3.4 · US avg 2.9)
Quality measures (QM)	1 / 5 (state avg 3.3 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/175323
Snapshot SHA-256	c6c8dd0eeea8a2344bff8cce9e43ebc8a2428bacca6d1057790c35f374b5e6ad
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 175323.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash c6c8dd0eeea8.
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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