

ROSSVILLE HEALTHCARE AND REHABILITATION CENTER

Report ID: CCN 175397
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§ 1 Facility Identity

Facility	ROSSVILLE HEALTHCARE AND REHABILITATION CENTER
CCN	175397
Location	600 E. PERRY ST, ROSSVILLE, KS, 66533
Ownership type	For profit - Limited Liability company
Certified beds	81

§ 2 CMS Federal Record

Civil money penalties on file	\$60,639
Deficiency citations — current cycle	21 (950% vs prior 24 months (2))
Deficiency citations — prior 24 months	2
Immediate Jeopardy — current cycle	1
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	SFF candidate
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$60,639
KS state average	\$22,557 (this facility is 2.7× the KS average)
National average	\$31,239 (this facility is 1.9× 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 21 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.	K · Immediate Jeopardy	Standard survey
F730	Observe each nurse aide's job performance and give regular training.	F	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	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
F851	Electronically submit to CMS complete and accurate direct care staffing information, based on payroll and other verifiable and auditable data.	F	Standard survey
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	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
F558	Reasonably accommodate the needs and preferences of each resident.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F583	Keep residents' personal and medical records private and confidential.	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

F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	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
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F744	Provide the appropriate treatment and services to a resident who displays or is diagnosed with dementia.	D	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.	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
F732	Post nurse staffing information every day.	C	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: RECOVER-CARE HEALTHCARE (27 facilities); Owner on file: MRCMM LLC (organization)
Ownership chain	RECOVER-CARE HEALTHCARE (27 facilities)
Penalties vs chain average	\$60,639 vs \$33,168 (1.8× the chain average)
Current deficiencies vs chain average	21 vs 12.0 (1.7× 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	2 / 5 (state avg 3.4 · US avg 2.9)
Quality measures (QM)	2 / 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/175397
Snapshot SHA-256	8053de67c8e155e730f70c626449d1212f951047f6d88662fd59c7063e2e4d1b
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 175397.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 8053de67c8e1.
 4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).
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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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