

BONNER SPRINGS NURSING & REHAB CENTER

Report ID: CCN 175401
Generated: 2026-07-23T19:13:39.428Z

§ 1 Facility Identity

Facility	BONNER SPRINGS NURSING & REHAB CENTER
CCN	175401
Location	520 E MORSE STREET, BONNER SPRINGS, KS, 66012
Ownership type	For profit - Limited Liability company
Certified beds	45

§ 2 CMS Federal Record

Civil money penalties on file	\$39,696
Deficiency citations — current cycle	12 (1100% vs prior 24 months (1))
Deficiency citations — prior 24 months	1
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	\$39,696
KS state average	\$22,557 (this facility is 1.8× the KS average)
National average	\$31,239 (this facility is 1.3× 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 12 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	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
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
F623	Provide timely notification to the resident, and if applicable to the resident representative and ombudsman, before transfer or discharge, including appeal rights.	E	Standard survey
F625	Notify the resident or the resident's representative in writing how long the nursing home will hold the resident's bed in cases of transfer to a hospital or therapeutic leave.	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	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
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	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

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

§ 5 Ownership & Chain Context

Ownership record	Chain: ADVENA LIVING COMMUNITIES (6 facilities); Owner on file: KS HOST PORTFOLIO OPCO LLC (organization)
Ownership chain	ADVENA LIVING COMMUNITIES (6 facilities)
Penalties vs chain average	\$39,696 vs \$51,977 (0.8× the chain average)
Current deficiencies vs chain average	12 vs 16.7 (0.7× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	2 / 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/175401
Snapshot SHA-256	343eefc4e3bd5cbcafce22a3c66afb6c245c037bf10863e50fea35ed91042eff
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 175401.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 343eefc4e3bd.
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.

CareSentinel operates as an independent legal-advertising service, not a law firm, and does not recommend, endorse, or vouch for any attorney (ABA Model Rule 5.4). This document restates the public federal record only; it is not legal advice and forms no attorney-client relationship. Inspection findings are point-in-time CMS survey results, not a determination that any specific resident was harmed.