

SPRING HILL CARE AND REHAB

Report ID: CCN 175425
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§ 1 Facility Identity

Facility	SPRING HILL CARE AND REHAB
CCN	175425
Location	251 E WILSON AVENUE, SPRING HILL, KS, 66083
Ownership type	For profit - Limited Liability company
Certified beds	45

§ 2 CMS Federal Record

Civil money penalties on file	\$21,645
Deficiency citations — current cycle	22 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
Immediate Jeopardy — current cycle	1
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	Yes — CMS abuse icon currently listed

§ 3 Federal Penalties in Context

This facility — penalties on file	\$21,645
KS state average	\$22,557 (this facility is 1.0× the KS average)
National average	\$31,239 (this facility is 0.7× 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 22 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
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
F801	Employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, including a qualified dietician.	F	Complaint
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	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	E	Complaint
F880	Provide and implement an infection prevention and control program.	E	Complaint
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Complaint
F790	Provide routine and 24-hour emergency dental care for each resident.	D	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Complaint
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	D	Complaint
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
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Complaint
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Complaint
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Complaint
F744	Provide the appropriate treatment and services to a resident who displays or is diagnosed with dementia.	D	Complaint
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	Complaint
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	D	Complaint
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	Complaint
F732	Post nurse staffing information every day.	C	Complaint
F851	Electronically submit to CMS complete and accurate direct care staffing information, based on payroll and other verifiable and auditable data.	C	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: MISSION HEALTH COMMUNITIES (33 facilities); Owner on file: BARRES, LLC (organization)
Ownership chain	MISSION HEALTH COMMUNITIES (33 facilities)
Penalties vs chain average	\$21,645 vs \$17,974 (1.2× the chain average)
Current deficiencies vs chain average	22 vs 10.1 (2.2× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	3 / 5 (state avg 3.4 · US avg 2.9)
Quality measures (QM)	3 / 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/175425
Snapshot SHA-256	c3b15f88ccc42ecae768b0b7c445ee2672747d8cfa75aadd42fc1d97314b9328
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 175425.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash c3b15f88ccc4.
 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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