

STEVENS COUNTY HOSPITAL LTCU DBA PIONEER MANOR

Report ID: CCN 17E546
Generated: 2026-07-23T20:29:57.060Z

§ 1 Facility Identity

Facility	STEVENS COUNTY HOSPITAL LTCU DBA PIONEER MANOR
CCN	17E546
Location	1711 S MAIN STREET, HUGOTON, KS, 67951
Ownership type	Government - City/county
Certified beds	77

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	19 (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	3
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$0
KS state average	\$22,557 (this facility is 0.0× the KS average)
National average	\$31,239 (this facility is 0.0× 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 19 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
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	G	Complaint
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Complaint
F692	Provide enough food/fluids to maintain a resident's health.	G	Complaint
F882	Designate a qualified infection preventionist to be responsible for the infection prevent and control program in the nursing home.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Complaint
F881	Implement a program that monitors antibiotic use.	F	Complaint
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	Complaint
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	E	Complaint
F578	Honor the resident's right to request, refuse, and/or discontinue treatment, to participate in or refuse to participate in experimental research, and to formulate an advance directive.	E	Complaint
F641	Ensure each resident receives an accurate assessment.	E	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.	E	Complaint
F695	Provide safe and appropriate respiratory care for a resident when needed.	E	Complaint
F759	Ensure medication error rates are not 5 percent or greater.	E	Complaint
F761	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted	E	Complaint

professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.

F883	Develop and implement policies and procedures for flu and pneumonia vaccinations.	E	Complaint
F660	Plan the resident's discharge to meet the resident's goals and needs.	D	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Complaint
F742	Provide the appropriate treatment and services to a resident who displays or is diagnosed with mental disorder or psychosocial adjustment difficulty, or who has a history of trauma and/or post-traumatic stress disorder.	D	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.	D	Complaint

§ 5 Ownership

Ownership record	Ownership type: Government - City/county
------------------	--

§ 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	4 / 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/17E546
Snapshot SHA-256	b8314f58d33d326e96c431d175a09c00ec8e81c2cfd98b33c0804e2cdde5a310
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 17E546.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash b8314f58d33d.
 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.