

Hartland Park Health & Rehabilitation

Report ID: CCN 185197
Generated: 2026-07-26T18:04:02.910Z

§ 1 Facility Identity

Facility	Hartland Park Health & Rehabilitation
CCN	185197
Location	1500 Trent Boulevard, Lexington, KY, 40515
Ownership type	For profit - Limited Liability company
Certified beds	150

§ 2 CMS Federal Record

Civil money penalties on file	\$12,925
Deficiency citations — current cycle	13 (44% vs prior 24 months (9))
Deficiency citations — prior 24 months	9
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$12,925
KY state average	\$17,665 (this facility is 0.7× the KY average)
National average	\$31,239 (this facility is 0.4× 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 13 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
F925	Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.	F	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	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
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F825	Provide or get specialized rehabilitative services as required for a resident.	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
F743	Ensure that a resident does not develop patterns of decreased social interaction and/or increased withdrawn, angry, or depressive behaviors, unless unavoidable.	D	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F602	Protect each resident from the wrongful use of the resident's belongings or money.	D	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
F693	Ensure that feeding tubes are not used unless there is a medical reason and the resident agrees; and provide appropriate care for a resident with a feeding tube.	D	Standard survey

F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: LYON HEALTHCARE (14 facilities)
Ownership chain	LYON HEALTHCARE (14 facilities)
Penalties vs chain average	\$12,925 vs \$51,343 (0.3× the chain average)
Current deficiencies vs chain average	13 vs 6.9 (1.9× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	1 / 5 (state avg 3 · US avg 2.8)
Staffing	1 / 5 (state avg 2.7 · US avg 2.9)
Quality measures (QM)	2 / 5 (state avg 3.2 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/185197
Snapshot SHA-256	8d4d3904cef499ff60adbaa1be88477494f2dae6eb643eb1526474be0419334c
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 185197.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 8d4d3904cef4.
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.