ATLEE HILL HEALTH AND REHAB CENTER

Report ID: CCN 215247
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§ 1 Facility Identity

Facility	ATLEE HILL HEALTH AND REHAB CENTER
CCN	215247
Location	297 STONER AVENUE, WESTMINSTER, MD, 21157
Ownership type	For profit - Limited Liability company
Certified beds	60

§ 2 CMS Federal Record

Civil money penalties on file	$14,888
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	0
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	$14,888
MD state average	$22,972 (this facility is 0.6× the MD average)
National average	$31,239 (this facility is 0.5× 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
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	F	Complaint
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	E	Standard survey
F944	Conduct mandatory training, for all staff, on the facility's Quality Assurance and Performance Improvement Program.	E	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	E	Complaint
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	E	Complaint
F641	Ensure each resident receives an accurate assessment.	D	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	D	Standard survey
F883	Develop and implement policies and procedures for flu and pneumonia vaccinations.	D	Standard survey
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

F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	D	Complaint
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted	D	Complaint
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Complaint
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Complaint
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	D	Complaint
F803	Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: FUTURE CARE/LIFEBRIDGE HEALTH (18 facilities); Owner on file: LBH CARROLL COUNTY NURSING AND REHABLITITATION LLC (organization)
Ownership chain	FUTURE CARE/LIFEBRIDGE HEALTH (18 facilities)
Penalties vs chain average	$14,888 vs $4,644 (3.2× the chain average)
Current deficiencies vs chain average	19 vs 14.1 (1.4× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3.1 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	3 / 5 (state avg 3.2 · US avg 2.9)
Quality measures (QM)	4 / 5 (state avg 3.9 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/215247
Snapshot SHA-256	8dd79323b4663e3cf1aab40ddf44ed1c33a0fe8452c86a122c2adec9745c2b24
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 215247.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 8dd79323b466.
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.

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