

# Valley View Manor Hcc

Report ID: CCN 245378  
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## § 1 Facility Identity

|                |                                             |
|----------------|---------------------------------------------|
| Facility       | Valley View Manor Hcc                       |
| CCN            | 245378                                      |
| Location       | 200 EAST NINTH AVENUE, LAMBERTON, MN, 56152 |
| Ownership type | For profit - Corporation                    |
| Certified beds | 50                                          |

## § 2 CMS Federal Record

|                                            |                                    |
|--------------------------------------------|------------------------------------|
| Civil money penalties on file              | \$125,300                          |
| Deficiency citations — current cycle       | 25 ( 2400% vs prior 24 months (1)) |
| Deficiency citations — prior 24 months     | 1                                  |
| Immediate Jeopardy — current cycle         | 2                                  |
| Actual-harm (G+) citations — current cycle | 0                                  |
| Special Focus Facility status              | SFF candidate                      |
| Abuse icon                                 | No                                 |

## § 3 Federal Penalties in Context

|                                   |                                                       |
|-----------------------------------|-------------------------------------------------------|
| This facility — penalties on file | \$125,300                                             |
| MN state average                  | \$20,689 (this facility is 6.1× the MN average)       |
| National average                  | \$31,239 (this facility is 4.0× 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 25 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          |
|-------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------|
| F689  | Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.                                                                                          | <b>J · Immediate Jeopardy</b> | Complaint       |
| F689  | Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.                                                                                          | <b>J · Immediate Jeopardy</b> | Complaint       |
| F867  | Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.                                                                                | F                             | Complaint       |
| F726  | Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.                                                            | F                             | Standard survey |
| F802  | Provide sufficient support personnel to safely and effectively carry out the functions of the food and nutrition service.                                                                                      | F                             | Standard survey |
| 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                             | Standard survey |
| F554  | Allow residents to self-administer drugs if determined clinically appropriate.                                                                                                                                 | F                             | 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       |
| F605  | Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.                                                                                 | D                             | Complaint       |
| F609  | Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.                                                                                            | 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       |
| F658 | Ensure services provided by the nursing facility meet professional standards of quality.                                                                    | D | Complaint       |
| F684 | Provide appropriate treatment and care according to orders, resident's preferences and goals.                                                               | D | Complaint       |
| F686 | Provide appropriate pressure ulcer care and prevent new ulcers from developing.                                                                             | D | Complaint       |
| F842 | Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.   | 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       |
| F605 | Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.                              | D | Standard survey |
| F641 | Ensure each resident receives an accurate assessment.                                                                                                       | 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 |
| 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 | 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 |
| F880 | Provide and implement an infection prevention and control program.                                                                                          | D | Standard survey |
| F881 | Implement a program that monitors antibiotic use.                                                                                                           | D | Standard survey |
| F883 | Develop and implement policies and procedures for flu and pneumonia vaccinations.                                                                           | D | Standard survey |

## § 5 Ownership & Chain Context

|                                       |                                                                                  |
|---------------------------------------|----------------------------------------------------------------------------------|
| Ownership record                      | Chain: EPHRAM LAHASKY (23 facilities); Owner on file: AREM, JEFFREY (individual) |
| Ownership chain                       | EPHRAM LAHASKY (23 facilities)                                                   |
| Penalties vs chain average            | \$125,300 vs \$99,886 (1.3× the chain average)                                   |
| Current deficiencies vs chain average | 25 vs 16.4 (1.5× the chain average)                                              |

## § 6 CMS Care Compare Star Ratings

|                       |                                    |
|-----------------------|------------------------------------|
| Overall               | 1 / 5 (state avg 3.2 · US avg 3)   |
| Health inspection     | 1 / 5 (state avg 2.8 · US avg 2.8) |
| Staffing              | 1 / 5 (state avg 4.1 · US avg 2.9) |
| Quality measures (QM) | 3 / 5 (state avg 3.2 · US avg 3.7) |

## § 7 Record Provenance

|                          |                                                                                                                                                   |
|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| CMS data as of           | Jun 2026                                                                                                                                          |
| Independent verification | <a href="https://www.medicare.gov/care-compare/details/nursing-home/245378">https://www.medicare.gov/care-compare/details/nursing-home/245378</a> |
| Snapshot SHA-256         | dad11754bfba5515dbe5825d0a5680d18a4ea071d632b7d6ef17c1c7010f7efc                                                                                  |
| Methodology & version    | v1.0 — <a href="https://www.caregiverhelpnow.com/methodology">https://www.caregiverhelpnow.com/methodology</a>                                    |

## § 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 245378.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash dad11754bfba.
4. Deficiency F-tags cited above are searchable in CMS QCOR ([qcor.cms.gov](https://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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