

SAINT JOSEPH TRANSITIONAL REHABILITATION CENTER

Report ID: CCN 295040
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§ 1 Facility Identity

Facility	SAINT JOSEPH TRANSITIONAL REHABILITATION CENTER
CCN	295040
Location	2035 W. CHARLESTON BLVD., LAS VEGAS, NV, 89102
Ownership type	For profit - Limited Liability company
Certified beds	100

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	10 (67% vs prior 24 months (6))
Deficiency citations — prior 24 months	6
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	\$0
NV state average	\$13,076 (this facility is 0.0× the NV 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 10 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
F553	Allow resident to participate in the development and implementation of his or her person-centered plan of care.	D	Standard survey
F637	Assess the resident when there is a significant change in condition	D	Standard survey
F638	Assure that each resident's assessment is updated at least once every 3 months.	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
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Standard survey
F880	Provide and implement an infection prevention and control program.	D	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: GENESIS HEALTHCARE (187 facilities); Owner on file: 9560 PICO LLC (organization)
Ownership chain	GENESIS HEALTHCARE (187 facilities)
Penalties vs chain average	\$0 vs \$45,582 (0.0× the chain average)
Current deficiencies vs chain average	10 vs 14.8 (0.7× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	4 / 5 (state avg 3.2 · US avg 3)
Health inspection	3 / 5 (state avg 2.9 · US avg 2.8)
Staffing	2 / 5 (state avg 3.1 · US avg 2.9)
Quality measures (QM)	5 / 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/295040
Snapshot SHA-256	d2882e0c68e2033101c91234766597ba9e7ee5bab7e6005be0b67eb198e28111
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 295040.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash d2882e0c68e2.
 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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