Blumenthal Health and Rehabilitation Center

Report ID: CCN 345006
Generated: 2026-07-23T14:55:27.142Z

§ 1 Facility Identity

Facility	Blumenthal Health and Rehabilitation Center
CCN	345006
Location	3724 Wireless Drive, Greensboro, NC, 27455
Ownership type	For profit - Limited Liability company
Certified beds	134

§ 2 CMS Federal Record

Civil money penalties on file	$210,325
Deficiency citations — current cycle	31 (48% vs prior 24 months (21))
Deficiency citations — prior 24 months	21
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	SFF candidate
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$210,325
NC state average	$38,899 (this facility is 5.4× the NC average)
National average	$31,239 (this facility is 6.7× 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 31 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
F697	Provide safe, appropriate pain management for a resident who requires such services.	G	Complaint
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Complaint
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	E	Complaint
F760	Ensure that residents are free from significant medication errors.	E	Complaint
F887	Educate residents and staff on COVID-19 vaccination, offer the COVID-19 vaccine to eligible residents and staff after education, and properly document each resident and staff member's vaccination status.	E	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	E	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	E	Complaint
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	E	Complaint
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	D	Complaint
F554	Allow residents to self-administer drugs if determined clinically appropriate.	D	Standard survey
F582	Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered.	D	Standard survey
F636	Assess the resident completely in a timely manner when first admitted, and then periodically, at least every 12 months.	D	Standard survey
F637	Assess the resident when there is a significant change in condition	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
F679	Provide activities to meet all resident's needs.	D	Standard survey
F694	Provide for the safe, appropriate administration of IV fluids for a resident when needed.	D	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.	D	Standard survey
F883	Develop and implement policies and procedures for flu and pneumonia vaccinations.	D	Standard survey
F585	Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.	D	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Complaint
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	D	Complaint
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Complaint
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	D	Complaint
F880	Provide and implement an infection prevention and control program.	D	Complaint
F850	Hire a qualified full-time social worker in a facility with more than 120 beds.	C	Standard survey

F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	B	Standard survey
F638	Assure that each resident's assessment is updated at least once every 3 months.	B	Standard survey
F640	Encode each resident's assessment data and transmit these data to the State within 7 days of assessment.	B	Standard survey
F732	Post nurse staffing information every day.	B	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: LIFEWORKS REHAB (66 facilities); Owner on file: BLUMENTHAL HOLDINGS LLC (organization)
Ownership chain	LIFEWORKS REHAB (66 facilities)
Penalties vs chain average	$210,325 vs $73,733 (2.9× the chain average)
Current deficiencies vs chain average	31 vs 18.5 (1.7× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 2.9 · US avg 3)
Health inspection	1 / 5 (state avg 2.9 · US avg 2.8)
Staffing	2 / 5 (state avg 2.7 · 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/345006
Snapshot SHA-256	1d9290fef53c4785b69054364ea79b9386b835dbcc2f51b8e117254beaaed4af
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 345006.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 1d9290fef53c.
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.