GRESHAM POST ACUTE CARE AND REHABILITATION

Report ID: CCN 385190
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§ 1 Facility Identity

Facility	GRESHAM POST ACUTE CARE AND REHABILITATION
CCN	385190
Location	405 NE 5TH STREET, GRESHAM, OR, 97030
Ownership type	For profit - Limited Liability company
Certified beds	78

§ 2 CMS Federal Record

Civil money penalties on file	$76,801
Deficiency citations — current cycle	20 (67% vs prior 24 months (12))
Deficiency citations — prior 24 months	12
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	2
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	$76,801
OR state average	$27,599 (this facility is 2.8× the OR average)
National average	$31,239 (this facility is 2.5× 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 20 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
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	G	Complaint
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Complaint
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	D	Standard survey
F558	Reasonably accommodate the needs and preferences of each resident.	D	Standard survey
F604	Ensure that each resident is free from the use of physical restraints, unless needed for medical treatment.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	D	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Standard survey
F685	Assist a resident in gaining access to vision and hearing services.	D	Standard survey
F690	Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.	D	Standard survey
F692	Provide enough food/fluids to maintain a resident's health.	D	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F699	Provide care or services that was trauma informed and/or culturally competent.	D	Standard survey
F700	Try different approaches before using a bed rail. If a bed rail is needed, the facility must (1) assess a resident for safety risk; (2) review these risks and	D	Standard survey

	benefits with the resident/representative; (3) get informed consent; and (4) Correctly install and maintain the bed rail.		
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	D	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	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
F880	Provide and implement an infection prevention and control program.	D	Standard survey
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.	D	Complaint
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: SAPPHIRE HEALTH SERVICES (8 facilities); Owner on file: BECKER, ANDREW (individual)
Ownership chain	SAPPHIRE HEALTH SERVICES (8 facilities)
Penalties vs chain average	$76,801 vs $26,540 (2.9× the chain average)
Current deficiencies vs chain average	20 vs 16.5 (1.2× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3.1 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	3 / 5 (state avg 3.9 · US avg 2.9)
Quality measures (QM)	3 / 5 (state avg 3.5 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/385190
Snapshot SHA-256	df7e8f67a211b52b68a27600289213d5728ad5a1deb5c81de77afde673b19f60
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 385190.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash df7e8f67a211.
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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