PINE VIEW HEALTHCARE AND REHABILITATION CENTER

Report ID: CCN 395078
Generated: 2026-07-25T18:00:03.368Z

§ 1 Facility Identity

Facility	PINE VIEW HEALTHCARE AND REHABILITATION CENTER
CCN	395078
Location	50 NORTH MALIN ROAD, BROOMALL, PA, 19008
Ownership type	For profit - Corporation
Certified beds	298

§ 2 CMS Federal Record

Civil money penalties on file	$0
Deficiency citations — current cycle	16 (167% 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
PA state average	$25,102 (this facility is 0.0× the PA 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 16 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
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	E	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	E	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	E	Standard survey
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	E	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Complaint
F880	Provide and implement an infection prevention and control program.	D	Complaint
F604	Ensure that each resident is free from the use of physical restraints, unless needed for medical treatment.	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
F638	Assure that each resident's assessment is updated at least once every 3 months.	D	Standard survey
F640	Encode each resident's assessment data and transmit these data to the State within 7 days of assessment.	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

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
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

§ 5 Ownership

Ownership record	Owner on file: LIMESTONE ENTERPRISES LLC (organization)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	3 / 5 (state avg 3.1 · US avg 2.9)
Quality measures (QM)	3 / 5 (state avg 3.6 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/395078
Snapshot SHA-256	e2ef61ec82a4c4dc4bc5d0ad4e174f36f8fe779b060fa42f8bb38e114b8bff3b
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 395078.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash e2ef61ec82a4.
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.