

QUALITY LIFE SERVICES - APOLLO

Report ID: CCN 395371
Generated: 2026-07-23T20:47:39.179Z

§ 1 Facility Identity

Facility	QUALITY LIFE SERVICES - APOLLO
CCN	395371
Location	151 GOODVIEW DRIVE, APOLLO, PA, 15613
Ownership type	For profit - Limited Liability company
Certified beds	177

§ 2 CMS Federal Record

Civil money penalties on file	\$43,759
Deficiency citations — current cycle	31 (29% vs prior 24 months (24))
Deficiency citations — prior 24 months	24
Immediate Jeopardy — current cycle	1
Actual-harm (G+) citations — current cycle	2
Special Focus Facility status	Not listed
Abuse icon	Yes — CMS abuse icon currently listed

§ 3 Federal Penalties in Context

This facility — penalties on file	\$43,759
PA state average	\$25,102 (this facility is 1.7× the PA average)
National average	\$31,239 (this facility is 1.4× 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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	J • Immediate Jeopardy	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	G	Complaint
F760	Ensure that residents are free from significant medication errors.	G	Complaint
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F908	Keep all essential equipment working safely.	F	Standard survey
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	E	Standard survey
F636	Assess the resident completely in a timely manner when first admitted, and then periodically, at least every 12 months.	E	Standard survey
F641	Ensure each resident receives an accurate assessment.	E	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	E	Standard survey
F699	Provide care or services that was trauma informed and/or culturally competent.	E	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.	E	Standard survey
F691	Provide appropriate colostomy, urostomy, or ileostomy care/services for a resident who requires such services.	D	Complaint

F835	Administer the facility in a manner that enables it to use its resources effectively and efficiently.	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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	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
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
F676	Ensure residents do not lose the ability to perform activities of daily living unless there is a medical reason.	D	Standard survey
F688	Provide appropriate care for a resident to maintain and/or improve range of motion (ROM), limited ROM and/or mobility, unless a decline is for a medical reason.	D	Standard survey
F693	Ensure that feeding tubes are not used unless there is a medical reason and the resident agrees; and provide appropriate care for a resident with a feeding tube.	D	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey

F711	Ensure the resident's doctor reviews the resident's care, writes, signs and dates progress notes and orders, at each required visit.	D	Standard survey
F730	Observe each nurse aide's job performance and give regular training.	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
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Complaint
F803	Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: QUALITY LIFE SERVICES (10 facilities); Owner on file: TACK, STEVEN (individual)
Ownership chain	QUALITY LIFE SERVICES (10 facilities)
Penalties vs chain average	\$43,759 vs \$44,433 (1.0× the chain average)
Current deficiencies vs chain average	31 vs 13.4 (2.3× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	1 / 5 (state avg 3.1 · US avg 2.9)
Quality measures (QM)	4 / 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/395371
Snapshot SHA-256	642225b86bab055cce5a739a5883b4bf8d8e73a521836348a757253446288b7
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 395371.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 642225b86bab.
 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.