

CARING HEIGHTS COMMUNITY CARE & REHAB CTR

Report ID: CCN 395603
Generated: 2026-07-26T00:27:32.539Z

§ 1 Facility Identity

Facility	CARING HEIGHTS COMMUNITY CARE & REHAB CTR
CCN	395603
Location	234 CORAOPOLIS ROAD, CORAOPOLIS, PA, 15108
Ownership type	For profit - Corporation
Certified beds	119

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	29 (12% vs prior 24 months (26))
Deficiency citations — prior 24 months	26
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 29 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
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 benefits with the resident/representative; (3) get informed consent; and (4) Correctly install and maintain the bed rail.	E	Standard survey
F773	Provide or obtain laboratory tests/services when ordered and promptly tell the ordering practitioner of the results.	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
F583	Keep residents' personal and medical records private and confidential.	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	Standard survey
F604	Ensure that each resident is free from the use of physical restraints, unless needed for medical treatment.	D	Standard survey
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	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
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	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
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
F744	Provide the appropriate treatment and services to a resident who displays or is diagnosed with dementia.	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
F805	Ensure each resident receives and the facility provides food prepared in a form designed to meet individual needs.	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
F941	Develop, implement, and/or maintain an effective training program that includes effective communications for direct care staff members.	D	Standard survey
F942	Ensure that staff members are educated on resident rights and facility responsibilities to properly care for its residents.	D	Standard survey
F943	Give their staff education on dementia care, and what abuse, neglect, and exploitation are; and how to report abuse, neglect, and exploitation.	D	Standard survey
F944	Conduct mandatory training, for all staff, on the facility's Quality Assurance and Performance Improvement Program.	D	Standard survey

F945	Include as part of its infection prevention and control program, mandatory training that includes written standards, policies, and procedures for the program.	D	Standard survey
F946	Provide training in compliance and ethics.	D	Standard survey
F947	Ensure nurse aides have the skills they need to care for residents, and give nurse aides education in dementia care and abuse prevention.	D	Standard survey
F949	Provide behavior health training consistent with the requirements and as determined by a facility assessment.	D	Standard survey
F575	Post a list of names, addresses, and telephone numbers of all pertinent State agencies and advocacy groups and a statement that the resident may file a complaint with the State Survey Agency.	C	Standard survey
F579	Provide information about how to apply for and use Medicare and Medicaid benefits.	C	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: SABER HEALTHCARE GROUP (127 facilities); Owner on file: VOLPE, BENJAMIN (individual)
Ownership chain	SABER HEALTHCARE GROUP (127 facilities)
Penalties vs chain average	\$0 vs \$26,280 (0.0× the chain average)
Current deficiencies vs chain average	29 vs 9.4 (3.1× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	3 / 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)	5 / 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/395603
Snapshot SHA-256	e33d6532a530f3b71b8e9e2b7a36940a3bd064dcc10c8874bb45b6c3b19e225a
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 395603.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash e33d6532a530.
 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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