

KITTANNING HEALTH & REHAB CENTER

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§ 1 Facility Identity

Facility	KITTANNING HEALTH & REHAB CENTER
CCN	395986
Location	120 KITTANNING CARE DRIVE, KITTANNING, PA, 16201
Ownership type	For profit - Limited Liability company
Certified beds	119

§ 2 CMS Federal Record

Civil money penalties on file	\$85,548
Deficiency citations — current cycle	31 (30% vs prior 24 months (44))
Deficiency citations — prior 24 months	44
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$85,548
PA state average	\$25,102 (this facility is 3.4× the PA average)
National average	\$31,239 (this facility is 2.7× 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
F760	Ensure that residents are free from significant medication errors.	G	Standard survey
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	F	Standard survey
F908	Keep all essential equipment working safely.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Complaint
F568	Properly hold, secure, and manage each resident's personal money which is deposited with the nursing home.	E	Standard survey
F569	Notify each resident of certain balances and convey resident funds upon discharge, eviction, or death.	E	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	E	Standard survey
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	E	Standard survey
F940	Develop, implement, and/or maintain an effective training program for all new and existing staff members.	E	Standard survey
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Complaint
F760	Ensure that residents are free from significant medication errors.	D	Complaint
F554	Allow residents to self-administer drugs if determined clinically appropriate.	D	Standard survey
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Standard survey

F602	Protect each resident from the wrongful use of the resident's belongings or money.	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
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	D	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Standard survey
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Standard survey
F698	Provide safe, appropriate dialysis care/services for a resident who requires such services.	D	Standard survey
F730	Observe each nurse aide's job performance and give regular training.	D	Standard survey
F740	Ensure each resident must receive and the facility must provide necessary behavioral health care and services.	D	Standard survey
F745	Provide medically-related social services to help each resident achieve the highest possible quality of life.	D	Standard survey
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	D	Standard survey
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Standard survey

F868	Have the Quality Assessment and Assurance group have the required members and meet at least quarterly	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
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.	D	Complaint
F732	Post nurse staffing information every day.	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	\$85,548 vs \$26,280 (3.3× the chain average)
Current deficiencies vs chain average	31 vs 9.4 (3.3× 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	2 / 5 (state avg 3.1 · US avg 2.9)
Quality measures (QM)	2 / 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/395986
Snapshot SHA-256	8bf072c210085fa3ad0dbc03043fe2e681096e30c3c5419f664d574d2078dc84
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 395986.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 8bf072c21008.
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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