Mission at Alpine Rehabilitation Center

Report ID: CCN 465088
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§ 1 Facility Identity

Facility	Mission at Alpine Rehabilitation Center
CCN	465088
Location	25 East Alpine Drive, Pleasant Grove, UT, 84062
Ownership type	Non profit - Other
Certified beds	52

§ 2 CMS Federal Record

Civil money penalties on file	$125,737
Deficiency citations — current cycle	30 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
Immediate Jeopardy — current cycle	**5**
Actual-harm (G+) citations — current cycle	2
Special Focus Facility status	SFF candidate
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$125,737
UT state average	$25,896 (this facility is 4.9× the UT average)
National average	$31,239 (this facility is 4.0× 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 30 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
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	**K · Immediate Jeopardy**	Complaint
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	**K · Immediate Jeopardy**	Complaint
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	**K · Immediate Jeopardy**	Complaint
F610	Respond appropriately to all alleged violations.	**K · Immediate Jeopardy**	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	**K · Immediate Jeopardy**	Complaint
F835	Administer the facility in a manner that enables it to use its resources effectively and efficiently.	H	Standard survey
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	H	Standard survey
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	F	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F843	Have an agreement with at least one or more hospitals certified by Medicare or Medicaid to make sure residents can be moved quickly to the hospital when they need medical care.	F	Standard survey
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	F	Standard survey
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	E	Standard survey

F728	Ensure that nurse aides who have worked more than 4 months, are trained and competent; and nurse aides who have worked less than 4 months are enrolled in appropriate training.	E	Standard survey
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.	E	Standard survey
F809	Ensure meals and snacks are served at times in accordance with resident's needs, preferences, and requests. Suitable and nourishing alternative meals and snacks must be provided for residents who want to eat at non-traditional times or outside of scheduled meal times.	E	Standard survey
F944	Conduct mandatory training, for all staff, on the facility's Quality Assurance and Performance Improvement Program.	E	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.	E	Complaint
F943	Give their staff education on dementia care, and what abuse, neglect, and exploitation are; and how to report abuse, neglect, and exploitation.	E	Complaint
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
F641	Ensure each resident receives an accurate assessment.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	D	Standard survey
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	D	Standard survey
F800	Provide each resident with a nourishing, palatable, well-balanced diet that meets his or her daily nutritional and special dietary needs.	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

F880	Provide and implement an infection prevention and control program.	D	Standard survey
F881	Implement a program that monitors antibiotic use.	D	Standard survey
F883	Develop and implement policies and procedures for flu and pneumonia vaccinations.	D	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Complaint
F692	Provide enough food/fluids to maintain a resident's health.	D	Complaint
F740	Ensure each resident must receive and the facility must provide necessary behavioral health care and services.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: MISSION HEALTH SERVICES (7 facilities); Owner on file: BARTHOLOMEW, BRENDA (individual)
Ownership chain	MISSION HEALTH SERVICES (7 facilities)
Penalties vs chain average	$125,737 vs $31,734 (4.0× the chain average)
Current deficiencies vs chain average	30 vs 8.9 (3.4× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3.3 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	2 / 5 (state avg 3 · US avg 2.9)
Quality measures (QM)	5 / 5 (state avg 4.5 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/465088
Snapshot SHA-256	f4680e58d8a401e99bfad08de0a4340f84e427a6b96f158e5425c63c5003094e
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 465088.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash f4680e58d8a4.
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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