Village Creek Rehabilitation and Nursing Center

Report ID: CCN 675975
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§ 1 Facility Identity

Facility	Village Creek Rehabilitation and Nursing Center
CCN	675975
Location	705 N Main St, Lumberton, TX, 77657
Ownership type	Government - Hospital district
Certified beds	120

§ 2 CMS Federal Record

Civil money penalties on file	$125,838
Deficiency citations — current cycle	15 (88% vs prior 24 months (8))
Deficiency citations — prior 24 months	8
Immediate Jeopardy — current cycle	**3**
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	$125,838
TX state average	$49,788 (this facility is 2.5× the TX 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 15 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
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	**K · Immediate Jeopardy**	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	**J · Immediate Jeopardy**	Complaint
F726	Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.	**J · Immediate Jeopardy**	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.	G	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.	E	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	E	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	E	Standard survey
F760	Ensure that residents are free from significant medication errors.	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
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
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	Complaint

F640	Encode each resident's assessment data and transmit these data to the State within 7 days of assessment.	D	Standard survey
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	D	Standard survey
F880	Provide and implement an infection prevention and control program.	D	Standard survey
F908	Keep all essential equipment working safely.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: NEXION HEALTH (52 facilities); Owner on file: SWEENY HOSPITAL DISTRICT (organization)
Ownership chain	NEXION HEALTH (52 facilities)
Penalties vs chain average	$125,838 vs $50,569 (2.5× the chain average)
Current deficiencies vs chain average	15 vs 9.6 (1.6× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 2.7 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	1 / 5 (state avg 1.8 · US avg 2.9)
Quality measures (QM)	3 / 5 (state avg 3.8 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/675975
Snapshot SHA-256	8e5122b214e36c7b37f9472c0dc34e74c464b72d74b09793bf89d58fef67f230
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 675975.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 8e5122b214e3.
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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