Harbor Valley Health and Rehabilitation

Report ID: CCN 676478
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§ 1 Facility Identity

Facility	Harbor Valley Health and Rehabilitation
CCN	676478
Location	6211 Old Pearsall Road, San Antonio, TX, 78242
Ownership type	For profit - Individual
Certified beds	120

§ 2 CMS Federal Record

Civil money penalties on file	$18,989
Deficiency citations — current cycle	17 (31% vs prior 24 months (13))
Deficiency citations — prior 24 months	13
Immediate Jeopardy — current cycle	**1**
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$18,989
TX state average	$49,788 (this facility is 0.4× the TX average)
National average	$31,239 (this facility is 0.6× 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 17 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.	**J · Immediate Jeopardy**	Complaint
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Complaint
F565	Honor the resident's right to organize and participate in resident/family groups in the facility.	E	Standard survey
F641	Ensure each resident receives an accurate assessment.	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	Standard survey
F627	Ensure the transfer/discharge meets the resident's needs/preferences and that the resident is prepared for a safe transfer/discharge.	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
F880	Provide and implement an infection prevention and control program.	D	Complaint
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	D	Complaint
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	D	Standard survey
F637	Assess the resident when there is a significant change in condition	D	Standard survey
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed,	D	Standard survey

	and revised by a team of health professionals.		
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	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
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	D	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	D	Standard survey
F880	Provide and implement an infection prevention and control program.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: FANNIN COUNTY HOSPITAL DISTRICT (5 facilities); Owner on file: FANNIN COUNTY HOSPITAL AUTHORITY (organization)
Ownership chain	FANNIN COUNTY HOSPITAL DISTRICT (5 facilities)
Penalties vs chain average	$18,989 vs $15,376 (1.2× the chain average)
Current deficiencies vs chain average	17 vs 7.6 (2.2× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 2.7 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	2 / 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/676478
Snapshot SHA-256	eb006eebc0fb5aadbcb147a76e2013eae8f3acc00653c328c6ebe1500a3c2d77
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 676478.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash eb006eebc0fb.
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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