

RUSSELL PARK REHABILITATION & LIVING CENTER

Report ID: CCN 205052
Generated: 2026-07-25T22:44:44.599Z

§ 1 Facility Identity

Facility	RUSSELL PARK REHABILITATION & LIVING CENTER
CCN	205052
Location	158 RUSSELL ST, LEWISTON, ME, 04240
Ownership type	For profit - Corporation
Certified beds	50

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	13 (333% vs prior 24 months (3))
Deficiency citations — prior 24 months	3
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
ME state average	\$7,225 (this facility is 0.0× the ME 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 13 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
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	F	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	E	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	E	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	E	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.	E	Standard survey
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.	E	Complaint
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
F730	Observe each nurse aide's job performance and give regular training.	E	Complaint
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	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

F814	Dispose of garbage and refuse properly.	D	Standard survey
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: NORTH COUNTRY ASSOCIATES (9 facilities); Owner on file: ORESTIS, JOHN (individual)
Ownership chain	NORTH COUNTRY ASSOCIATES (9 facilities)
Penalties vs chain average	\$0 vs \$2,575 (0.0× the chain average)
Current deficiencies vs chain average	13 vs 11.3 (1.1× 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	4 / 5 (state avg 3.8 · US avg 2.9)
Quality measures (QM)	3 / 5 (state avg 3 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/205052
Snapshot SHA-256	cc1d85dcdb51c50d2851e236f7d191f5015e54d372f10bba561491bb361648
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 205052.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash cc1d85dcdb51c50d2851e236f7d191f5015e54d372f10bba561491bb361648.
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.

CareSentinel operates as an independent legal-advertising service, not a law firm, and does not recommend, endorse, or vouch for any attorney (ABA Model Rule 5.4). This document restates the public federal record only; it is not legal advice and forms no attorney-client relationship. Inspection findings are point-in-time CMS survey results, not a determination that any specific resident was harmed.