AUTUMN LAKE HEALTHCARE AT LOCH RAVEN

Report ID: CCN 215090
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§ 1 Facility Identity

Facility	AUTUMN LAKE HEALTHCARE AT LOCH RAVEN
CCN	215090
Location	8720 EMGE ROAD, BALTIMORE, MD, 21234
Ownership type	For profit - Limited Liability company
Certified beds	113

§ 2 CMS Federal Record

Civil money penalties on file	$0
Deficiency citations — current cycle	30 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
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
MD state average	$22,972 (this facility is 0.0× the MD 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 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
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	E	Complaint
F638	Assure that each resident’s assessment is updated at least once every 3 months.	E	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.	E	Standard survey
F610	Respond appropriately to all alleged violations.	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
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Complaint
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F568	Properly hold, secure, and manage each resident's personal money which is deposited with the nursing home.	D	Standard survey
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but	D	Standard survey

	not limited to receiving treatment and supports for daily living safely.		
F602	Protect each resident from the wrongful use of the resident's belongings or money.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	D	Standard survey
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted	D	Standard survey
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	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
F757	Ensure each resident’s drug regimen must be free from unnecessary drugs.	D	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.	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
F944	Conduct mandatory training, for all staff, on the facility’s Quality Assurance and Performance Improvement Program.	D	Standard survey
F945	Include as part of its infection prevention and control program, mandatory training that includes written standards, policies, and procedures for the program.	D	Standard survey
F946	Provide training in compliance and ethics.	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
F949	Provide behavior health training consistent with the requirements and as determined by a facility assessment.	D	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Complaint
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Complaint
F732	Post nurse staffing information every day.	C	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: AUTUMN LAKE HEALTHCARE (60 facilities); Owner on file: 8720 EMGE HOLDCO LLC (organization)
Ownership chain	AUTUMN LAKE HEALTHCARE (60 facilities)
Penalties vs chain average	$0 vs $17,812 (0.0× the chain average)
Current deficiencies vs chain average	30 vs 15.9 (1.9× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3.1 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	1 / 5 (state avg 3.2 · US avg 2.9)
Quality measures (QM)	4 / 5 (state avg 3.9 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/215090
Snapshot SHA-256	48e71728ce50c4f3772ce266345d0c087039cde6b6426d1e2bdf6b4e85dbc4a6
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 215090.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 48e71728ce50.
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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