COPPER RIDGE NURSING AND ASSISTED LIVING CENTER

Report ID: CCN 215265
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§ 1 Facility Identity

Facility	COPPER RIDGE NURSING AND ASSISTED LIVING CENTER
CCN	215265
Location	710 OBRECHT ROAD, SYKESVILLE, MD, 21784
Ownership type	For profit - Limited Liability company
Certified beds	66

§ 2 CMS Federal Record

Civil money penalties on file	$14,020
Deficiency citations — current cycle	21 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
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	$14,020
MD state average	$22,972 (this facility is 0.6× the MD average)
National average	$31,239 (this facility is 0.4× 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 21 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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	**J · Immediate Jeopardy**	Complaint
F941	Develop, implement, and/or maintain an effective training program that includes effective communications for direct care staff members.	E	Complaint
F944	Conduct mandatory training, for all staff, on the facility's Quality Assurance and Performance Improvement Program.	E	Complaint
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	E	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F730	Observe each nurse aide's job performance and give regular training.	D	Complaint
F945	Include as part of its infection prevention and control program, mandatory training that includes written standards, policies, and procedures for the program.	D	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Complaint
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	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
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Standard survey
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a	D	Standard survey

	licensed pharmacist.		
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
F757	Ensure each resident’s drug regimen must be free from unnecessary drugs.	D	Standard survey
F791	Provide or obtain dental services for each resident.	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
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
F887	Educate residents and staff on COVID-19 vaccination, offer the COVID-19 vaccine to eligible residents and staff after education, and properly document each resident and staff member's vaccination status.	D	Standard survey
F919	Make sure that a working call system is available in each resident's bathroom and bathing area.	D	Standard survey
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	D	Complaint

§ 5 Ownership

Ownership record	Owner on file: CARROLL MD HOLDCO LLC (organization)

§ 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	2 / 5 (state avg 3.2 · US avg 2.9)
Quality measures (QM)	1 / 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/215265
Snapshot SHA-256	c1c67f523e912f75f53a15695b88edebfe40c1d01610b46eb635527407d5a339
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 215265.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash c1c67f523e91.
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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