# LORIEN MAYS CHAPEL

Report ID: CCN 215351
Generated: 2026-07-26T03:07:10.494Z

## § 1 Facility Identity

| | |
|---|---|
| Facility | LORIEN MAYS CHAPEL |
| CCN | 215351 |
| Location | 12230 ROUND WOOD ROAD, TIMONIUM, MD, 21093 |
| Ownership type | For profit - Corporation |
| Certified beds | 93 |

## § 2 CMS Federal Record

| | |
|---|---|
| Civil money penalties on file | $0 |
| Deficiency citations — current cycle | 19 ( 1800% vs prior 24 months (1)) |
| Deficiency citations — prior 24 months | 1 |
| 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 19 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 |
|---|---|---|---|
| F583 | Keep residents' personal and medical records private and confidential. | 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 |
| F607 | Develop and implement policies and procedures to prevent abuse, neglect, and theft. | 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. | D | Complaint |
| F623 | Provide timely notification to the resident, and if applicable to the resident representative and ombudsman, before transfer or discharge, including appeal rights. | 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 |
| F689 | Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents. | D | Standard survey |
| F757 | Ensure each resident’s drug regimen must be free from unnecessary drugs. | D | Standard survey |
| F758 | Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited. | D | Standard survey |
| F760 | Ensure that residents are free from significant medication errors. | D | Standard survey |
| F761 | Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted | D | Standard survey |

| | | | |
|---|---|---|---|
| | professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs. | | |
| F842 | Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards. | D | Standard survey |
| F880 | Provide and implement an infection prevention and control program. | 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 |
| F600 | Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody. | D | Complaint |
| F606 | Not hire anyone with a finding of abuse, neglect, exploitation, or theft. | D | Complaint |
| F609 | Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities. | D | 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. | D | Complaint |

## § 5 Ownership & Chain Context

| | |
|---|---|
| Ownership record | Chain: LORIEN HEALTH SERVICES (8 facilities); Owner on file: COLLISON, MICHELE (individual) |
| Ownership chain | LORIEN HEALTH SERVICES (8 facilities) |
| Penalties vs chain average | $0 vs $10,180 (0.0× the chain average) |
| Current deficiencies vs chain average | 19 vs 13.5 (1.4× the chain average) |

## § 6 CMS Care Compare Star Ratings

| | |
|---|---|
| Overall | 3 / 5 (state avg 3.1 · US avg 3) |
| Health inspection | 3 / 5 (state avg 2.8 · US avg 2.8) |
| Staffing | 2 / 5 (state avg 3.2 · US avg 2.9) |
| Quality measures (QM) | 3 / 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/215351 |
| Snapshot SHA-256 | 0f02d4db21ca5db06f0e3ba7e15cbaeb296b89be8aacea1cf50d8c800252d208 |
| 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 215351.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 0f02d4db21ca.
4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).