AYER VALLEY REHAB AND NURSING

Report ID: CCN 225421
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§ 1 Facility Identity

Facility	AYER VALLEY REHAB AND NURSING
CCN	225421
Location	400 GROTON ROAD, AYER, MA, 01432
Ownership type	For profit - Limited Liability company
Certified beds	123

§ 2 CMS Federal Record

Civil money penalties on file	$72,804
Deficiency citations — current cycle	18 (500% 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	$72,804
MA state average	$36,630 (this facility is 2.0× the MA average)
National average	$31,239 (this facility is 2.3× 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 18 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
F695	Provide safe and appropriate respiratory care for a resident when needed.	E	Standard survey
F712	Ensure that the resident and his/her doctor meet face-to-face at all required visits.	E	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.	E	Standard survey
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Standard survey
F585	Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.	D	Standard survey
F694	Provide for the safe, appropriate administration of IV fluids for a resident when needed.	D	Standard survey
F699	Provide care or services that was trauma informed and/or culturally competent.	D	Standard survey
F726	Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.	D	Standard survey
F730	Observe each nurse aide's job performance and give regular training.	D	Standard survey
F760	Ensure that residents are free from significant medication errors.	D	Standard survey
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	D	Standard survey
F805	Ensure each resident receives and the facility provides food prepared in a form designed to meet individual needs.	D	Standard survey
F825	Provide or get specialized rehabilitative services as required for a 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
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
F843	Have an agreement with at least one or more hospitals certified by Medicare or Medicaid to make sure residents can be moved quickly to the hospital when they need medical care.	C	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: STERN CONSULTANTS (23 facilities); Owner on file: FRIEDMAN, SHANA (individual)
Ownership chain	STERN CONSULTANTS (23 facilities)
Penalties vs chain average	$72,804 vs $50,756 (1.4× the chain average)
Current deficiencies vs chain average	18 vs 12.3 (1.5× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	1 / 5 (state avg 2.9 · US avg 2.8)
Staffing	2 / 5 (state avg 3 · US avg 2.9)
Quality measures (QM)	2 / 5 (state avg 3.3 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/225421
Snapshot SHA-256	daf2c1a828574d3c6f04629209737dc9dee0c033152aa5af4b23dc0abbbcc840
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 225421.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash daf2c1a82857.
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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