

RIDGEVIEW HEALTHCARE AND REHABILITATION CENTER

Report ID: CCN 395652
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§ 1 Facility Identity

Facility	RIDGEVIEW HEALTHCARE AND REHABILITATION CENTER
CCN	395652
Location	30 FOURTH AVENUE, CURWENSVILLE, PA, 16833
Ownership type	For profit - Corporation
Certified beds	131

§ 2 CMS Federal Record

Civil money penalties on file	\$38,798
Deficiency citations — current cycle	16 (20% vs prior 24 months (20))
Deficiency citations — prior 24 months	20
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	\$38,798
PA state average	\$25,102 (this facility is 1.5× the PA average)
National average	\$31,239 (this facility is 1.2× 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 16 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
F636	Assess the resident completely in a timely manner when first admitted, and then periodically, at least every 12 months.	E	Standard survey
F638	Assure that each resident's assessment is updated at least once every 3 months.	E	Standard survey
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	D	Standard survey
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	D	Standard survey
F640	Encode each resident's assessment data and transmit these data to the State within 7 days of assessment.	D	Standard survey
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey
F690	Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.	D	Standard survey
F692	Provide enough food/fluids to maintain a resident's health.	D	Standard survey
F693	Ensure that feeding tubes are not used unless there is a medical reason and the resident agrees; and provide appropriate care for a resident with a feeding tube.	D	Standard survey
F694	Provide for the safe, appropriate administration of IV fluids for a resident when needed.	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
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	D	Standard survey
F688	Provide appropriate care for a resident to maintain and/or improve range of motion (ROM), limited ROM and/or mobility, unless a decline is for a medical reason.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: BONAMOUR HEALTH GROUP (5 facilities); Owner on file: ZIDELE, YESHAYAHU (individual)
Ownership chain	BONAMOUR HEALTH GROUP (5 facilities)
Penalties vs chain average	\$38,798 vs \$13,894 (2.8× the chain average)
Current deficiencies vs chain average	16 vs 12.2 (1.3× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	4 / 5 (state avg 3.1 · US avg 2.9)
Quality measures (QM)	4 / 5 (state avg 3.6 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/395652
Snapshot SHA-256	f7315ac97a76c8ba29fe8bb2739bf2138f58c5b5059c316a80f4884ca413c011
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 395652.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash f7315ac97a76.
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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