

ROCHESTER RESIDENCE AND CARE CENTER

Report ID: CCN 395751
Generated: 2026-07-23T17:37:42.766Z

§ 1 Facility Identity

Facility	ROCHESTER RESIDENCE AND CARE CENTER
CCN	395751
Location	174 VIRGINIA AVENUE, ROCHESTER, PA, 15074
Ownership type	For profit - Limited Liability company
Certified beds	119

§ 2 CMS Federal Record

Civil money penalties on file	\$513,687
Deficiency citations — current cycle	44 (51% vs prior 24 months (89))
Deficiency citations — prior 24 months	89
Immediate Jeopardy — current cycle	2
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Special Focus Facility
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$513,687
PA state average	\$25,102 (this facility is 20.5× the PA average)
National average	\$31,239 (this facility is 16.4× 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 44 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
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.	L • Immediate Jeopardy	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	J • Immediate Jeopardy	Standard survey
F814	Dispose of garbage and refuse properly.	F	Complaint
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	F	Complaint
F806	Ensure each resident receives and the facility provides food that accommodates resident allergies, intolerances, and preferences, as well as appealing options.	F	Complaint
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	F	Standard survey
F908	Keep all essential equipment working safely.	F	Standard survey
F919	Make sure that a working call system is available in each resident's bathroom and bathing area.	F	Standard survey
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.	F	Complaint
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	E	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	E	Standard survey

F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	E	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	E	Standard survey
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
F835	Administer the facility in a manner that enables it to use its resources effectively and efficiently.	E	Standard survey
F849	Arrange for the provision of hospice services or assist the resident in transferring to a facility that will arrange for the provision of hospice services.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	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.	E	Standard survey
F844	Follow rules about disclosure of ownership requirements and tell the state agency about changes in ownership and/or administrative personnel.	D	Complaint
F921	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.	D	Complaint
F925	Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.	D	Complaint
F554	Allow residents to self-administer drugs if determined clinically appropriate.	D	Complaint
F583	Keep residents' personal and medical records private and confidential.	D	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Complaint
F761	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted	D	Complaint

professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.

F835	Administer the facility in a manner that enables it to use its resources effectively and efficiently.	D	Complaint
F692	Provide enough food/fluids to maintain a resident's health.	D	Complaint
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Complaint
F558	Reasonably accommodate the needs and preferences of each resident.	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
F607	Develop and implement policies and procedures to prevent abuse, neglect, and theft.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	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
F694	Provide for the safe, appropriate administration of IV fluids for a resident when needed.	D	Standard survey
F730	Observe each nurse aide's job performance and give regular training.	D	Standard survey
F744	Provide the appropriate treatment and services to a resident who displays or is diagnosed with dementia.	D	Standard survey
F941	Develop, implement, and/or maintain an effective training program that includes effective communications for direct care staff members.	D	Standard survey
F942	Ensure that staff members are educated on resident rights and facility responsibilities to properly care for its residents.	D	Standard survey
F943	Give their staff education on dementia care, and what abuse, neglect, and exploitation are; and how to	D	Standard survey

report abuse, neglect, and exploitation.

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
F949	Provide behavior health training consistent with the requirements and as determined by a facility assessment.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: POLLAK HOLDINGS (6 facilities); Owner on file: POLLAK HOLDINGS LLC (organization)
Ownership chain	POLLAK HOLDINGS (6 facilities)
Penalties vs chain average	\$513,687 vs \$124,530 (4.1× the chain average)
Current deficiencies vs chain average	44 vs 41.8 (1.1× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	0 / 5 (state avg 3 · US avg 3)
Health inspection	0 / 5 (state avg 2.8 · US avg 2.8)
Staffing	0 / 5 (state avg 3.1 · US avg 2.9)
Quality measures (QM)	0 / 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/395751
Snapshot SHA-256	72de8cbf3520e5d0e734cc292c0e38dc1bf5b6e978ed5ae99e493d32d221cf1d
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 395751.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 72de8cbf3520.
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.

CareSentinel operates as an independent legal-advertising service, not a law firm, and does not recommend, endorse, or vouch for any attorney (ABA Model Rule 5.4). This document restates the public federal record only; it is not legal advice and forms no attorney-client relationship. Inspection findings are point-in-time CMS survey results, not a determination that any specific resident was harmed.