LAUDERDALE COMMUNITY LIVING CENTER

Report ID: CCN 445354
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§ 1 Facility Identity

Facility	LAUDERDALE COMMUNITY LIVING CENTER
CCN	445354
Location	215 LACKEY LANE PO BOX 186, RIPLEY, TN, 38063
Ownership type	For profit - Limited Liability company
Certified beds	71

§ 2 CMS Federal Record

Civil money penalties on file	$43,644
Deficiency citations — current cycle	15 (1400% vs prior 24 months (1))
Deficiency citations — prior 24 months	1
Immediate Jeopardy — current cycle	**1**
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	$43,644
TN state average	$25,657 (this facility is 1.7× the TN average)
National average	$31,239 (this facility is 1.4× 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 15 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
F880	Provide and implement an infection prevention and control program.	**J · Immediate Jeopardy**	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.	E	Standard survey
F727	Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis.	E	Standard survey
F732	Post nurse staffing information every day.	E	Standard survey
F802	Provide sufficient support personnel to safely and effectively carry out the functions of the food and nutrition service.	E	Standard survey
F803	Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.	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
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	E	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
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	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to	D	Standard survey

	prevent accidents.		
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	D	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.	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: COMMUNITY ELDERCARE SERVICES (17 facilities); Owner on file: COMMUNITY ELDERCARE SERVICES, LLC (organization)
Ownership chain	COMMUNITY ELDERCARE SERVICES (17 facilities)
Penalties vs chain average	$43,644 vs $39,625 (1.1× the chain average)
Current deficiencies vs chain average	15 vs 9.1 (1.7× 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	1 / 5 (state avg 2.4 · US avg 2.9)
Quality measures (QM)	1 / 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/445354
Snapshot SHA-256	cdb32087a3cb13f1eeae2e7e7f69ebfba3b816febf03be50863b13802963475d
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 445354.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash cdb32087a3cb.
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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