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FORM APPROVED

OMB NO. 0938-0391

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES APPROVAL OF DEFICIENCY		PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 205060	MULTIPLE CONSTRUCTION A. BUILDING: B. WING:		DATE SURVEY COMPLETED: 02/28/2025
NAME OF PROVIDER OR SUPPLIER CEDAR RIDGE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 25 CEDAR RIDGE DRIVE SKOWHEGAN, ME 04976		
IRF/PSYCH TYPE	SUMMARY STATEMENT OF DEFICIENCIES EXPLANATION MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION	DEF PROG TAG	PROVIDER'S PLAN OF CORRECTION EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY		DEF COMPLETION DATE
(E 000)	Initial Comments Review To Federal Recertification Survey Survey Date: 02/28/2025 Cedar Ridge Center, a long term care facility, is in substantial compliance with 42 Code of Federal Regulations Part 483.73, Emergency Preparedness Requirement for Long Term Care Facilities.	(E 000)			
(A 000)	INITIAL COMMENTS Review To Federal Recertification Survey Survey Date: 02/28/2025 Cedar Ridge Center, a long term care facility, was surveyed pursuant to the National Fire Protection Association, 101 Life Safety Code, 2012 Edition as referenced in Part 483.90(a-d). Physical Environment is in substantial compliance.	(A 000)			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER/REPRESENTATIVE'S SIGNATURE

TITLE

DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting provided it is determined that other safeguards provide sufficient protection to the patients. (See Instructions.) Except for nursing homes, the findings stated above are disclosed 60 days following the date of survey, whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosed 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of corrections required is contained in the survey report.