

ST ANTHONY PARK HOME INC

Report ID: CCN 245063
Generated: 2026-07-23T18:53:50.805Z

§ 1 Facility Identity

Facility	ST ANTHONY PARK HOME INC
CCN	245063
Location	2237 COMMONWEALTH AVENUE, SAINT PAUL, MN, 55108
Ownership type	For profit - Corporation
Certified beds	84

§ 2 CMS Federal Record

Civil money penalties on file	\$8,827
Deficiency citations — current cycle	17 (6% vs prior 24 months (16))
Deficiency citations — prior 24 months	16
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	\$8,827
MN state average	\$20,689 (this facility is 0.4× the MN average)
National average	\$31,239 (this facility is 0.3× 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 17 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.	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
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F881	Implement a program that monitors antibiotic use.	F	Standard survey
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	E	Standard survey
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	E	Standard survey
F554	Allow residents to self-administer drugs if determined clinically appropriate.	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
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
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	Standard survey
F697	Provide safe, appropriate pain management for a resident who requires such services.	D	Standard survey

F700	Try different approaches before using a bed rail. If a bed rail is needed, the facility must (1) assess a resident for safety risk; (2) review these risks and benefits with the resident/representative; (3) get informed consent; and (4) Correctly install and maintain the bed rail.	D	Standard survey
F806	Ensure each resident receives and the facility provides food that accommodates resident allergies, intolerances, and preferences, as well as appealing options.	D	Standard survey
F577	Allow residents to easily view the nursing home's survey results and communicate with advocate agencies.	C	Standard survey
F570	Assure the security of all personal funds of residents deposited with the facility.	B	Standard survey

§ 5 Ownership

Ownership record	Owner on file: MARKOWITZ, ALAN (individual)
------------------	---

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3.2 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	5 / 5 (state avg 4.1 · US avg 2.9)
Quality measures (QM)	4 / 5 (state avg 3.2 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/245063
Snapshot SHA-256	f74831c8ac2f3b5ef51ec9efe4c1668ac85c904ebea24f8faed5ed383cadd722
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 245063.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash f74831c8ac2f.
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.