

THE VILLAS AT ST LOUIS PARK

Report ID: CCN 245182
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§ 1 Facility Identity

Facility	THE VILLAS AT ST LOUIS PARK
CCN	245182
Location	7500 WEST 22ND STREET, SAINT LOUIS PARK, MN, 55426
Ownership type	For profit - Corporation
Certified beds	100

§ 2 CMS Federal Record

Civil money penalties on file	\$26,153
Deficiency citations — current cycle	17 (42% vs prior 24 months (12))
Deficiency citations — prior 24 months	12
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	\$26,153
MN state average	\$20,689 (this facility is 1.3× the MN average)
National average	\$31,239 (this facility is 0.8× 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
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	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F554	Allow residents to self-administer drugs if determined clinically appropriate.	D	Standard survey
F582	Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered.	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
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	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
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Standard survey
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	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
F880	Provide and implement an infection prevention and control program.	D	Standard survey
F883	Develop and implement policies and procedures for flu and pneumonia vaccinations.	D	Standard survey
F919	Make sure that a working call system is available in each resident's bathroom and bathing area.	D	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.	D	Complaint
F825	Provide or get specialized rehabilitative services as required for a resident.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: MONARCH HEALTHCARE MANAGEMENT (45 facilities); Owner on file: MONARCH HEALTHCARE OPERATING XII LLC (organization)
Ownership chain	MONARCH HEALTHCARE MANAGEMENT (45 facilities)
Penalties vs chain average	\$26,153 vs \$27,779 (0.9× the chain average)
Current deficiencies vs chain average	17 vs 11.7 (1.5× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3.2 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	3 / 5 (state avg 4.1 · US avg 2.9)
Quality measures (QM)	3 / 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/245182
Snapshot SHA-256	b289633bdefb9095c28633bbef8b3fcd46c1afdfa0b9848e3eec8fff17253de9
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 245182.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash b289633bdefb.
 4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).
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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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