

# Laurels Peak Care & Rehabilitation Center

Report ID: CCN 245516  
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## § 1 Facility Identity

|                |                                           |
|----------------|-------------------------------------------|
| Facility       | Laurels Peak Care & Rehabilitation Center |
| CCN            | 245516                                    |
| Location       | 700 JAMES AVENUE, MANKATO, MN, 56001      |
| Ownership type | For profit - Corporation                  |
| Certified beds | 60                                        |

## § 2 CMS Federal Record

|                                            |                                  |
|--------------------------------------------|----------------------------------|
| Civil money penalties on file              | \$0                              |
| Deficiency citations — current cycle       | 13 ( 63% vs prior 24 months (8)) |
| Deficiency citations — prior 24 months     | 8                                |
| Immediate Jeopardy — current cycle         | 0                                |
| Actual-harm (G+) citations — current cycle | 1                                |
| Special Focus Facility status              | Not listed                       |
| Abuse icon                                 | No                               |

## § 3 Federal Penalties in Context

|                                   |                                                       |
|-----------------------------------|-------------------------------------------------------|
| This facility — penalties on file | \$0                                                   |
| MN state average                  | \$20,689 (this facility is 0.0× the MN average)       |
| National average                  | \$31,239 (this facility is 0.0× 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 13 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          |
|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------|
| F689  | Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.                                                               | G          | Complaint       |
| F554  | Allow residents to self-administer drugs if determined clinically appropriate.                                                                                                      | E          | Standard survey |
| F880  | Provide and implement an infection prevention and control program.                                                                                                                  | E          | 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.           | E          | Complaint       |
| F641  | Ensure each resident receives an accurate assessment.                                                                                                                               | D          | Complaint       |
| F740  | Ensure each resident must receive and the facility must provide necessary behavioral health care and services.                                                                      | D          | Complaint       |
| F585  | Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances. | 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 |
| F676  | Ensure residents do not lose the ability to perform activities of daily living unless there is a medical reason.                                                                    | D          | Standard survey |
| F684  | Provide appropriate treatment and care according to orders, resident's preferences and goals.                                                                                       | D          | Standard survey |
| F685  | Assist a resident in gaining access to vision and hearing services.                                                                                                                 | D          | Standard survey |
| F695  | Provide safe and appropriate respiratory care for a resident when needed.                                                                                                           | D          | 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. | D | Standard survey |
|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-----------------|

## § 5 Ownership & Chain Context

|                                       |                                                                                                |
|---------------------------------------|------------------------------------------------------------------------------------------------|
| Ownership record                      | Chain: MONARCH HEALTHCARE MANAGEMENT (45 facilities);<br>Owner on file: HML LLC (organization) |
| Ownership chain                       | MONARCH HEALTHCARE MANAGEMENT (45 facilities)                                                  |
| Penalties vs chain average            | \$0 vs \$27,779 (0.0× the chain average)                                                       |
| Current deficiencies vs chain average | 13 vs 11.7 (1.1× 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              | 4 / 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 | <a href="https://www.medicare.gov/care-compare/details/nursing-home/245516">https://www.medicare.gov/care-compare/details/nursing-home/245516</a> |
| Snapshot SHA-256         | 9b6a23cd1a4aee7e67a68662fa8f83dfca122cc53146dbf3668914ee2a129de7                                                                                  |
| Methodology & version    | v1.0 — <a href="https://www.caregiverhelpnow.com/methodology">https://www.caregiverhelpnow.com/methodology</a>                                    |

## § 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 245516.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 9b6a23cd1a4a.
4. Deficiency F-tags cited above are searchable in CMS QCOR ([qcor.cms.gov](https://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/m>

ethodology; the Snapshot SHA-256 above pins this record to that methodology version.

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