Green Lea Senior Living

Report ID: CCN 245536
Generated: 2026-07-23T19:19:43.814Z

§ 1 Facility Identity

Facility	Green Lea Senior Living
CCN	245536
Location	115 NORTH LYNDALE, RR 2 BOX 49, MABEL, MN, 55954
Ownership type	For profit - Corporation
Certified beds	41

§ 2 CMS Federal Record

Civil money penalties on file	$0
Deficiency citations — current cycle	17 (240% vs prior 24 months (5))
Deficiency citations — prior 24 months	5
Immediate Jeopardy — current cycle	**2**
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	$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 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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	**J · Immediate Jeopardy**	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	**J · Immediate Jeopardy**	Complaint
F839	Employ staff that are licensed, certified, or registered in accordance with state laws.	F	Complaint
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	F	Complaint
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.	F	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Complaint
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Complaint
F558	Reasonably accommodate the needs and preferences of each resident.	D	Complaint
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F641	Ensure each resident receives an accurate assessment.	D	Complaint
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted	D	Complaint
F690	Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.	D	Complaint

F880	Provide and implement an infection prevention and control program.	D	Complaint
F557	Honor the resident's right to be treated with respect and dignity and to retain and use personal possessions.	D	Standard survey
F561	Honor the resident's right to and the facility must promote and facilitate resident self-determination through support of resident choice.	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
F568	Properly hold, secure, and manage each resident's personal money which is deposited with the nursing home.	B	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: ACCURA HEALTHCARE (42 facilities); Owner on file: TEALWOOD ENTERPRISE INC (organization)
Ownership chain	ACCURA HEALTHCARE (42 facilities)
Penalties vs chain average	$0 vs $12,557 (0.0× the chain average)
Current deficiencies vs chain average	17 vs 7.4 (2.3× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3.2 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	1 / 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/245536
Snapshot SHA-256	127dcf2d61960d07af1fca1383c97673ee5dc73c2732021591f7bc1a645c89da
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 245536.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 127dcf2d6196.
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.