STATE LICENSING COMPLIANCE REPORT

Report #: HL312629808C

Date Concluded: April 20, 2026

Name, Address, and County of Facility Investigated:
Twin Cities Nursing Care
1635 Hazel Street North
St. Paul, MN 55119
Ramsey County

Facility Type: Assisted Living Facility (ALF)

Evaluator's Name:
Christine Bluhm, RN
Special Investigator

The Minnesota Department of Health conducted a complaint investigation to determine compliance with state laws and rules governing the provision of care under Minnesota Statutes, Chapter 144G. The purpose of this complaint investigation was to review if facility policies and practices comply with applicable laws and rules. No maltreatment under Minnesota Statutes, Chapter 626 was alleged.

To view a copy of the correction orders, if any, please visit:

https://www.health.state.mn.us/facilities/regulation/directory/provcompselect.html

Or call 651-201-4201 to be provided with a copy via mail or email. If you are viewing this report on the MDH website, please see the attached state form.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	31262	A. BUILDING: _____ B. WING _____	C 03/17/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TWIN CITIES NURSING CARE	1635 HAZEL STREET NORTH SAINT PAUL, MN 55119

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
0 000	Initial Comments ******ATTENTION****** ASSISTED LIVING PROVIDER CORRECTION ORDER In accordance with Minnesota Statutes, section 144G.08 to 144G.95, these correction orders are issued pursuant to a complaint investigation. Determination of whether a violation is corrected requires compliance with all requirements provided at the statute number indicated below. When a Minnesota Statute contains several items, failure to comply with any of the items will be considered lack of compliance. INITIAL COMMENTS: #HL312629808C On March 17, 2026, the Minnesota Department of Health conducted a complaint investigation at the above provider, and the following correction order is issued. At the time of the complaint investigation, there were three (3) residents receiving services under the provider's Assisted Living license. The following correction order is issued for #HL312629808C, tag identification 0510.	0 000	Minnesota Department of Health is documenting the State Correction Orders using federal software. Tag numbers have been assigned to Minnesota State Statutes for Assisted Living Facilities. The assigned tag number appears in the far-left column entitled "ID Prefix Tag." The state Statute number and the corresponding text of the state Statute out of compliance is listed in the "Summary Statement of Deficiencies" column. This column also includes the findings which are in violation of the state requirement after the statement, "This Minnesota requirement is not met as evidenced by." Following the evaluators' findings is the Time Period for Correction. PLEASE DISREGARD THE HEADING OF THE FOURTH COLUMN WHICH STATES,"PROVIDER'S PLAN OF CORRECTION." THIS APPLIES TO FEDERAL DEFICIENCIES ONLY. THIS WILL APPEAR ON EACH PAGE. THERE IS NO REQUIREMENT TO SUBMIT A PLAN OF CORRECTION FOR VIOLATIONS OF MINNESOTA STATE STATUTES. THE LETTER IN THE LEFT COLUMN IS USED FOR TRACKING PURPOSES AND REFLECTS THE SCOPE AND LEVEL ISSUED PURSUANT TO 144G.31 SUBDIVISION 1-3.	
0 510 SS=F	144G.41 Subd. 3 Infection control program (a) All assisted living facilities must establish and	0 510		

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0 510	Continued From page 1 maintain an infection control program that complies with accepted health care, medical, and nursing standards for infection control. (b)The facility's infection control program must be consistent with current guidelines from the national Centers for Disease Control and Prevention (CDC) for infection prevention and control in long-term care facilities and, as applicable, for infection prevention and control in assisted living facilities. (c) The facility must maintain written evidence of compliance with this subdivision. This MN Requirement is not met as evidenced by: Based on observation, interview and record review, the licensee failed to establish and maintain an infection control program that complies with accepted health care, medical and nursing standards for infection control. This had the potential to affect all three residents (R1, R2, R3) and all staff working at the facility. This practice resulted in a level two violation (a violation that did not harm a resident's health or safety but had the potential to have harmed a resident's health or safety, but was not likely to cause serious injury, impairment, or death), and was issued at a widespread scope (when problems are pervasive or represent a systemic failure that has affected or has potential to affect a large portion or all of the residents). The findings include: The following substandard infection control issue was identified: Infestation of rodents with lack of adequate follow up with a pest control plan in place.	0 510		

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0 510	Continued From page 2 On March 17, 2026, the inside of the Assisted Living facility was observed. On March 17, 2026, at approximately 10:55 a.m., resident assistant, (RA)-B along with MDH investigators (C and D) observed what appeared to be mouse droppings on the floor behind an unemptied garbage can in the bedroom belonging to R3. There were used food container wrappings and eggs shells on the floor in other areas of the room. RA-B stated that each of the resident rooms are cleaned every shift which included sweeping, mopping and emptying the garbage. RA-B agreed that whatever was seen on the floor and in the garbage would be new activity since last evening when it was last cleaned. On March 17, 2026, at approximately 11:05 a.m., persons C and D observed R1's bedroom along with registered nurse (RN)-A. RN-A stated there were likely mice in R1's room at the time. RN-A stated they try to keep all R1's clothing off the floor now. RN-A stated R1 ate in her room and so there was often food in the room and the garbage could get full. RN-A stated R1 had a stroke, drooled, and used a lot of paper towels. Staff try to empty it at the end of the day. In R1's room, persons C and D observed a mouse trap in a ready set position on the floor in the closet and mouse poison bars on and near shelving. Black small mouse droppings were on the shelving and on the floor as well. RN-A could not verify who set the traps in R1's room or when they had been set. RN-A said it may have been the exterminator company. RN-A stated Greenix has been here and suggested using those plug-ins to deter mice but she was not sure what they were called. RN-A stated Greenix said that if they see any holes leading outside to plug them up.	0 510		

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0 510	Continued From page 3 On March 17, 2026, at approximately 11:15 a.m., RN-A and investigator D observed the lower level of the facility. Mouse droppings were observed in the basement. On March 17, 2026, at approximately 11:30 a.m., investigators C and D observed three dead rodents stuck to a rodent sticky pad trap under wire shelving in the kitchen. The sticky pad had various other garbage items stuck to it and appeared to have been there for some time. RN-A also observed and asked if she could throw it away. Observed were large black rodent catching boxes, one box outside along the back of the house and one box in the front yard area alongside the house. On March 17, 2026, at 11:45 a.m. RN-A verified pest concerns could be a health risk to the residents. On March 26, 2026, Greenix corporation was contacted by phone and confirmed that they have serviced the licensee on dates December 3, 2025, March 2, 2026, and March 24, 2026, and are scheduled to repeat services every 90 days. Accepted Health Standard Reference from CDC Healthy Housing reference Manual chapter 4. Disease Vectors and Pest at www.cdc.gov/healthyhomes/publications.html: In general, the presence of mice were a sign of poor sanitation. Integrated pest management (IPM) techniques were necessary to reduce the number of pests that threaten human health and property. The standard further noted rodents destroy	0 510		

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0 510	Continued From page 4 property, spread disease, compete for human food sources, and were aesthetically displeasing. Rodent-associated diseases affecting humans include plague, murine typhus, leptospirosis, rickettsialpox, and rat-bite fever. Integrated pest management (IPM) techniques were necessary to reduce the number of pests that threaten human health and property. The licensee's "Minnesota Bill of Rights for Assisted Living Residents" signed and dated by R1 on November 5, 2024, indicated "Residents have the right to care and assisted living services that are appropriate based on the resident's needs and according to an up-to-date service plan subject to accepted health standards." Per R1's Contract/ Lease Agreement dated November 5, 2024, and signed by R1, Twin Cities Nursing Care promised C) to maintain the residents room and all common areas in compliance with the applicable health and safety laws, except when violation of the health and safety laws has been caused by the willful or negligent conduct of the resident. D) To maintain the common areas in state of repair and cleanliness. The facility policy titled Pest Control Policy, Procedure & Implementation Plan dated March 19, 2026, indicated the facility will proactively prevent, identify, and eliminate pest activity. Immediate action will be taken upon any sign of infestation. Zero tolerance for uncontrolled pest activity. TIME PERIOD FOR CORRECTION: Seven (7) days.	0 510		