STATE LICENSING COMPLIANCE REPORT

Report #: HL371019811C

Date Concluded: October 16, 2025

Name, Address, and County of Facility Investigated:
1st Attentive Services
1717 Thomas Avenue North
Minneapolis, MN 55411
Hennepin County

Facility Type: Assisted Living Facility (ALF)

Evaluator's Name: Brandon Martfeld, RN, BSN, 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 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
	37101	A. BUILDING: _____ B. WING _____	C 09/29/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
1ST ATTENTIVE SERVICES LLC	1717 THOMAS AVENUE NORTH MINNEAPOLIS, MN 55411

(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: HL371019811C On September 29, 2025, the Minnesota Department of Health conducted a complaint investigation at the above provider, and the following correction orders are issued. At the time of the complaint investigation, there were four residents receiving services under the provider's Assisted Living license. The following correction order is issued HL371019811C, tag identification 1820.	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.	
01820 SS=D	144G.71 Subd. 13 Prescriptions	01820		

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01820	Continued From page 1 There must be a current written or electronically recorded prescription as defined in section 151.01, subdivision 16a, for all prescribed medications that the assisted living facility is managing for the resident. This MN Requirement is not met as evidenced by: Based on interview and record review, the licensee failed to ensure written or electronically recorded prescriptions were obtained prior to changing a medication order for one of one resident (R1). 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) and was issued at an isolated scope (when one or a limited number of residents are affected or one or a limited number of staff are involved, or the situation has occurred only occasionally). The findings include: R1's diagnosis included schizo-affective disorder with paranoia, hallucination bipolar, borderline personality disorder, and anxiety. R1's service plan dated August 27, 2025, indicated R1 received services for medication management, anxiety management, and management of behavior and mental symptoms. R1's provider orders dated March 19, 2025, indicated R1 had an order for lorazepam tablet 1 milligram (mg) take 1 tablet every 8 hours as needed for anxiety and agitation.	01820		

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01820	Continued From page 2 R1's medication administration record (MAR) for the month of June 2025, indicated R1 was to receive lorazepam 1 mg take 1 tablet by mouth every 8 hours as needed for anxiety or agitation that ended on June 19, 2025. On June 19, 2025, R1 started lorazepam tablet 1 mg take 1 tablet by mouth every 6 hours as needed for anxiety or agitation. -June 19, 2025, R1 received three doses of lorazepam, at 6:47 a.m., 3:30 p.m. and 11:28 p.m. -June 20, 2025, R1 received two doses of lorazepam, at 10:32 a.m. and 8:39 p.m. -June 21, 2025, R1 received two doses of lorazepam, at 5:48 a.m. and 2:53 p.m. -June 22, 2025, R1 received two doses of lorazepam, at 4:53 a.m. and 1:16 p.m. -June 23, 3025, R1 received two doses of lorazepam, at 2:44 p.m. and 8:58 p.m. -June 24, 2025, R1 received two doses of lorazepam, at 9:53 a.m. and 6:45 p.m. -June 25, 2025, R1 received two doses of lorazepam at 9:08 a.m. and 5:22 p.m. -June 26, 2025, R1 received three doses of lorazepam at 1:30 a.m., 8:09 a.m. and 4:03 p.m. -June 27, 2025, R1 received two doses of lorazepam at 12:13 p.m. and 8:45 p.m. -June 28, 2025, R1 received two doses of lorazepam at 10:54 a.m. and 5:13 p.m. -June 29, 2025, R1 received two doses of lorazepam at 9:13 a.m. and 4:23 p.m. -June 30, 2025, R1 received two doses of lorazepam at 8:51 a.m. and 4:16 p.m. R1's MAR for the month of July indicated R1 was to receive lorazepam tablet 1 mg take 1 tablet by mouth every 6 hours as needed for anxiety or agitation that ended on July 8, 2025. -July 1, 2025, R1 received two doses of	01820		

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01820	Continued From page 3 lorazepam at 7:04 a.m. and 3:26 p.m. -July 2, 2025, R1 received two doses of lorazepam at 12:06 p.m. and 6:34 p.m. -July 3, 2025, R1 received three doses of lorazepam at 7:50 a.m., 3:26 p.m., and 9:28 p.m. -July 4, 2025, R1 received three doses of lorazepam at 6:41 a.m., 3:05 p.m., and 9:18 p.m. -July 5, 2025, R1 received two doses of lorazepam at 7:34 a.m. and 1:59 p.m. During an interview on September 29, 2025, at 10:45 a.m., licensed assisted living director, who is also the registered nurse (LALD/RN)-A, stated she changed R1's lorazepam order from every 8 hours to every 6 hours without a provider order. LALD/RN-A stated provider orders are needed prior to making changes to medications. The licensee's Medication and Treatment Orders policy dated August 1, 2021, indicated, a written prescriber's order must be obtained for any medication administration provided to a resident. Prescriptions or orders that are to be implemented must be received from an authorized prescriber. TIME PERIOD FOR CORRECTION: Seven (7) days	01820		