

Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7005 0390 0006 1220 2988

December 15, 2006

Michael Demmer, Administrator Prairie Senior Cottages Willmar 1705 19<sup>th</sup> Avenue Southeast Willmar, MN 56201

Re: Results of State Licensing Survey

Dear Mr. Dummer:

The above agency was surveyed on November 27, 28, and 29, 2006, for the purpose of assessing compliance with state licensing regulations. State licensing deficiencies, if found, are delineated on the attached Minnesota Department of Health (MDH) correction order form. The correction order form should be signed and returned to this office when all orders are corrected. We urge you to review these orders carefully, item by item, and if you find that any of the orders are not in accordance with your understanding at the time of the exit conference following the survey, you should immediately contact me, or the RN Program Coordinator. If further clarification is necessary, I can arrange for an informal conference at which time your questions relating to the order(s) can be discussed.

A final version of the Licensing Survey Form is enclosed. This document will be posted on the MDH website.

Also attached is an optional Provider questionnaire, which is a self-mailer, which affords the provider with an opportunity to give feedback on the survey experience.

Please note, it is your responsibility to share the information contained in this letter and the results of this visit with the President of your facility's Governing Body.

Please feel free to call our office with any questions at (651) 201-4301.

Sincerely,

Jean M. Johnston

Jean Johnston, Program Manager Case Mix Review Program

Enclosures

cc: Kandiyohi County Social Services Ron Drude, Minnesota Department of Human Services Sherilyn Moe, Office of the Ombudsman



Assisted Living Home Care Provider

# LICENSING SURVEY FORM

Registered nurses from the Minnesota Department of Health (MDH) use this Licensing Survey Form during on-site visits to evaluate the care provided by Assisted Living home care providers (ALHCP). ALHCP licensees may also use this form to monitor the quality of services provided to clients at any time. Licensees may use their completed Licensing Survey Form to help communicate to MDH nurses during an on-site regulatory visit.

During an on-site visit, MDH nurses will interview staff, talk with clients and/or their representatives, make observations and review documentation. The survey is an opportunity for the licensee to explain to the MDH nurse what systems are in place to provide Assisted Living Home Care services. Completing this Licensing Survey Form in advance may facilitate the survey process.

Licensing requirements listed below are reviewed during a survey. A determination is made whether the requirements are met or not met for each Indicator of Compliance box. This form must be used in conjunction with a copy of the ALHCP home care regulations. Any violations of ALHCP licensing requirements are noted at the end of the survey form.

## Name of ALHCP: PRAIRIE SR COTTAGES WILLMAR

HFID #: 20579	
Date(s) of Survey: November 27, 28, and 29, 2006	
Project #: QL20579003	

Indicators of Compliance	<b>Outcomes Observed</b>	Comments
<ol> <li>The provider only accepts and retains clients for whom it can meet the needs as agreed to in the service plan.</li> <li>Focus Survey         <ul> <li>MN Rule 4668.0815</li> </ul> </li> <li>Expanded Survey         <ul> <li>MN Rule 4668.0050</li> <li>MN Rule 4668.0800 Subp. 3</li> <li>MN Rule 4668.0825 Subp. 2</li> <li>MN Rule 4668.0845</li> </ul> </li> </ol>	<ul> <li>Each client has an assessment and service plan developed by a registered nurse within 2 weeks and prior to initiation of delegated nursing services, reviewed at least annually, and as needed.</li> <li>The service plan accurately describes the client's needs.</li> <li>Care is provided as stated in the service plan.</li> <li>The client and/or representative understand what care will be provided and what it costs.</li> </ul>	Focus Survey          Met         X       Correction Order(s)         issued       X         Education Provided         Expanded Survey         Survey not Expanded         Met         Correction Order(s)         issued         Education Provided         Follow-up Survey #         New Correction         Order issued         Education Provided

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Indicators of Compliance	<b>Outcomes Observed</b>	Comments
<ul> <li>2. The provider promotes the clients' rights.</li> <li>Focus Survey <ul> <li>MN Rule 4668.0030</li> <li>MN Statute §144A.44</li> </ul> </li> <li>Expanded Survey <ul> <li>MN Rule 4668.0040</li> <li>MN Rule 4668.0170</li> <li>MN Statute §144D.04</li> <li>MN Rule 4668.0870</li> </ul> </li> </ul>	<ul> <li>Clients are aware of and have their rights honored.</li> <li>Clients are informed of and afforded the right to file a complaint.</li> <li>Continuity of Care is promoted for clients who are discharged from the agency.</li> </ul>	Focus Survey         X       Met        Correction Order(s)         issued         X       Education Provided         Expanded Survey         X       Survey not Expanded        Met        Correction Order(s)         issued        Education Provided         Follow-up Survey         #        New Correction         Order issued        Education Provided
<ul> <li>3. The health, safety, and well being of clients are protected and promoted.</li> <li>Focus Survey <ul> <li>MN Statute §144A.46</li> <li>MN Statute §626.557</li> </ul> </li> <li>Expanded Survey <ul> <li>MN Rule 4668.0035</li> <li>MN Rule 4668.0805</li> </ul> </li> </ul>	<ul> <li>Clients are free from abuse or neglect.</li> <li>Clients are free from restraints imposed for purposes of discipline or convenience. Agency personnel observe infection control requirements.</li> <li>There is a system for reporting and investigating any incidents of maltreatment.</li> <li>There is adequate training and supervision for all staff.</li> <li>Criminal background checks are performed as required.</li> </ul>	Focus Survey         X       Met        Correction Order(s)         issued         X       Education Provided         Expanded Survey         X       Survey not Expanded        Met        Correction Order(s)         issued        Education Provided         Follow-up Survey        New Correction         Order issued        Education Provided

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Indicators of Compliance	Outcomes Observed	Comments
<ul> <li>4. The clients' confidentiality is maintained.</li> <li>Expanded Survey</li> <li>MN Rule 4668.0810</li> </ul>	<ul> <li>Client personal information and records are secure.</li> <li>Any information about clients is released only to appropriate parties.</li> <li>Client records are maintained, are complete and are secure.</li> </ul>	This area does not apply to         a Focus Survey         Expanded Survey         X_Survey not Expanded        Met        Correction Order(s)         issued        Education Provided         Follow-up Survey #
<ul> <li>5. The provider employs (or contracts with) qualified staff.</li> <li>Focus Survey <ul> <li>MN Rule 4668.0065</li> <li>MN Rule 4668.0835</li> </ul> </li> <li>Expanded Survey <ul> <li>MN Rule 4668.0820</li> <li>MN Rule 4668.0825</li> <li>MN Rule 4668.0840</li> <li>MN Rule 4668.0070</li> <li>MN Statute §144D.065</li> </ul> </li> </ul>	<ul> <li>Staff have received training and/or competency evaluations as required, including training in dementia care, if applicable.</li> <li>Nurse licenses are current.</li> <li>The registered nurse(s) delegates nursing tasks only to staff that are competent to perform the procedures that have been delegated.</li> <li>The process of delegation and supervision is clear to all staff and reflected in their job descriptions.</li> <li>Personnel records are maintained and retained.</li> <li>Staff meet infection control guidelines.</li> </ul>	Focus Survey         X       Met        Correction Order(s)         issued         X       Education Provided         Expanded Survey         X       Survey not Expanded        Met        Correction Order(s)         issued        Education Provided         Follow-up Survey #        New Correction         Order issued        Education Provided

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Indicators of Compliance	<b>Outcomes Observed</b>	Comments
<ul> <li>6. Changes in a client's condition are recognized and acted upon. Medications are stored and administered safely.</li> <li>Focus Survey <ul> <li>MN Rule 4668.0855</li> <li>MN Rule 4668.0860</li> </ul> </li> <li>Expanded Survey <ul> <li>MN Rule 4668.0800</li> <li>MN Rule 4668.0815</li> <li>MN Rule 4668.0820</li> <li>MN Rule 4668.0865</li> <li>MN Rule 4668.0870</li> </ul> </li> </ul>	<ul> <li>A registered nurse is contacted when there is a change in a client's condition that requires a nursing assessment.</li> <li>Emergency and medical services are contacted, as needed.</li> <li>The client and/or representative is informed when changes occur.</li> <li>The agency has a system for the control of medications.</li> <li>A registered nurse trains unlicensed personnel prior to them administering medications.</li> <li>Medications and treatments are ordered by a prescriber and are administered and documented as prescribed.</li> </ul>	Focus Survey          Met         X       Correction Order(s)         issued         X       Education Provided         Expanded Survey         X       Survey not Expanded         Met         Correction Order(s)         issued         Education Provided         Follow-up Survey #         New Correction         Order issued         Education Provided
<ul> <li>7. The provider has a current license.</li> <li>Focus Survey <ul> <li>MN Rule 4668.0019</li> </ul> </li> <li>Expanded Survey <ul> <li>MN Rule 4668.0008</li> <li>MN Rule 4668.0012</li> <li>MN Rule 4668.0016</li> <li>MN Rule 4668.0220</li> </ul> </li> <li>Note: MDH will make referrals to the Attorney General's office for violations of MN Statutes 144D or 325F.72; and make other referrals, as needed.</li> </ul>	<ul> <li>The ALHCP license (and other licenses or registrations as required) are posted in a place that communicates to the public what services may be provided.</li> <li>The agency operates within its license(s) and applicable waivers and variances.</li> <li>Advertisement accurately reflects the services provided by the agency.</li> </ul>	Focus Survey         X       Met        Correction Order(s)         issued        Education Provided         Expanded Survey         X       Survey not Expanded        Met        Correction Order(s)         issued        Education Provided         Follow-up Survey         #        New Correction         Order issued        Education Provided

Indicators of Compliance	<b>Outcomes Observed</b>	Comments
8. The provider is in compliance with MDH waivers and variances	• Licensee provides services within the scope of applicable MDH	This area does not apply to a Focus Survey.
<ul><li>Expanded Survey</li><li>MN Rule 4668.0016</li></ul>	waivers and variances	Expanded Survey          X       Survey not Expanded        Met

<u>Please note</u>: Although the focus of the licensing survey is the regulations listed in the Indicators of Compliance boxes above, other violations may be cited depending on what systems a provider has or fails to have in place and/or the severity of a violation. Also, the results of the focused licensing survey may result in an expanded survey where additional interviews, observations, and documentation reviews are conducted.

# **SURVEY RESULTS:** \_\_\_\_ All Indicators of Compliance listed above were met.

For Indicators of Compliance not met, the rule or statute numbers and the findings of deficient practice are noted below.

## 1. MN Rule 4668.0815 Subp. 3

## AREA OF COMPLIANCE: #1

Based on record review and interview, the licensee failed to ensure that the client or the client's responsible person agreed in writing to a service plan modification for one of two current clients' (#1) records reviewed. The findings include:

Client #1's current service plan was authenticated by the licensee and responsible person July of 2005. The service plan indicated that the fee for a private room was \$900 and the services would be paid by the county. On interview, November 27, 2006, the director stated that client #1 was no longer paying the \$900 but instead had been paying \$737 since November 1, 2005. From July 1, 2006 to September 30, 2006 the county had been paying \$3013.58 for assisted living services. On October 1, 2006 the county payment increased to \$3,081.48. On interview, November 28, 2006, client #1's responsible person stated that client #1 had never paid the \$900 but had instead been paying \$737.00 for the private room rent. The service plan lacked a modification for the changes in fees for the private room and for services.

#### 2. MN Rule 4668.0855 Subp. 5

### AREA OF COMPLIANCE: #6

Based on record review and interview, the licensee failed to ensure that the registered nurse (RN) was notified, either within twenty-four hours after it's administration, or within a time period that was specified by a registered nurse prior to the administration, when an unlicensed person administered a pro re nata (PRN, as needed) medication to a client for one of two current clients' (#2) records reviewed. The findings include:

Client #2's medication administration record indicated she was given PRN (pro re nata- as needed) Tylenol 325 milligrams at 7:50PM on November 23, 2006 by an unlicensed person because the client was "sick". There was no documentation that a registered nurse (RN) was notified of the administration of the PRN Tylenol. When interviewed November 28, 2006 the RN stated she had not been notified of the PRN Tylenol administration. She also stated she had instructed the unlicensed personnel to call her before they administered any PRN medications and they were also to document all PRN medications on the "PRN Medication Notification Sheet", which the RN reviewed each time she was at the facility. On review the PRN medication notification sheet also lacked documentation of the PRN Tylenol.

#### 3. MN Rule 4668.0855 Subp. 9

#### AREA OF COMPLIANCE: #6

Based on record review and interview, the licensee failed to maintain a system for control of medications for two of two current clients' (#1 and #2) records reviewed. The findings include:

Client #1 received central storage and medication administration by facility unlicensed staff. The November 2006 medication administration record indicated client #1 was to receive an antibiotic, one tablet twice a day from November 21, 2006 through November 30, 2006. The 8PM dose for November 23, 2006 was not initialed as being administered. The medication administration record lacked documentation of the reason why it was not administered as ordered or any follow up procedures provided. The November medication administration record also indicated that client #1 was to receive a powder medication, one capful daily. The 8 AM dose for November 9, 2006 was not initialed as being given. The August 2006 medication administration record for client #1 indicated the client was to receive Seroquel 50 mg. twice daily. The 8AM dose for August 4, 2006 was not initialed as being administered. The medication of the reason why it was not administration record lacked documentation of the client was to receive Seroquel 50 mg. twice daily up to administration record lacked documentation of the reason why it was not administration record lacked documentation of the reason why it was not administered. The medication administration record for client #1 indicated the client was to receive Seroquel 50 mg. twice daily up to the the the table the table the table the table the table the table t

On interview, November 27, 2006, the licensed practical nurse stated that she had just been informed that the 8PM dose of an antibiotic had not been administered on November 23, 2006 and she had notified the registered nurse, who instructed her to complete a medication error report and to extend the administration of the medication for one more dose in order to complete the ten day regimen. When interviewed, November 28, 2006, the registered nurse stated that unlicensed staff was instructed to check the medication administration records several times during their shifts in order to avoid missed medication administration.

A draft copy of this completed form was left with <u>Becky Holmgren, Director; Pamela Quimby, RN; and</u> <u>Dawn Slagter, LPN</u>, at an exit conference on <u>November 29, 2006</u>. Any correction orders issued as a result of the on-site visit and the final Licensing Survey Form will arrive by certified mail to the licensee. If you have any questions about the Licensing Survey Form or the survey results, please contact the Minnesota Department of Health, (651) 201-4301. After supervisory review, this form will be posted on the MDH website. General information about ALHCP is also available on the MDH website:

#### http://www.health.state.mn.us/divs/fpc/profinfo/cms/alhcp/alhcpsurvey.htm

Regulations can be viewed on the Internet: <u>http://www.revisor.leg.state.mn.us/stats</u> (for MN statutes) <u>http://www.revisor.leg.state.mn.us/arule/</u> (for MN Rules).