

Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7005 0390 0006 1220 3053

December 15, 2006

Gerald McGowan, Administrator The Lodge on Natchez 27890 Natchez Avenue Elko, MN 55020

Re: Results of State Licensing Survey

Dear Mr. McGowan:

The above agency was surveyed on November 7, 8, and 9, 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 Johnston, Program Manager

Case Mix Review Program

Enclosures

cc: Scott 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: THE LODGE ON NATCHEZ

HFID #: 21486

Dates of Survey: November 7, 8, 9, 2006

Project #: QL21486003

Indicators of Compliance	Outcomes Observed	Comments
 The provider only accepts and retains clients for whom it can meet the needs as agreed to in the service plan. Focus Survey MN Rule 4668.0815 Expanded Survey MN Rule 4668.0800 MN Rule 4668.0800 Subp. 3 MN Rule 4668.0825 Subp. 2 MN Rule 4668.0845 	 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. The service plan accurately describes the client's needs. Care is provided as stated in the service plan. The client and/or representative understand what care will be provided and what it costs. 	Focus Survey X

Indicators of Compliance	Outcomes Observed	Comments
2. The provider promotes the clients' rights. Focus Survey MN Rule 4668.0030 MN Statute §144A.44 Expanded Survey MN Rule 4668.0040 MN Rule 4668.0170 MN Statute §144D.04 MN Rule 4668.0870	 Clients are aware of and have their rights honored. Clients are informed of and afforded the right to file a complaint. Continuity of Care is promoted for clients who are discharged from the agency. 	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
3. The health, safety, and well being of clients are protected and promoted. Focus Survey MN Statute §144A.46 MN Statute §626.557 Expanded Survey MN Rule 4668.0035 MN Rule 4668.0805	 Clients are free from abuse or neglect. Clients are free from restraints imposed for purposes of discipline or convenience. Agency personnel observe infection control requirements. There is a system for reporting and investigating any incidents of maltreatment. There is adequate training and supervision for all staff. Criminal background checks are performed as required. 	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	Outcomes Observed	Comments
 4. The clients' confidentiality is maintained. Expanded Survey MN Rule 4668.0810 	 Client personal information and records are secure. Any information about clients is released only to appropriate parties. Client records are maintained, are complete and are secure. 	This area does not apply to a Focus Survey Expanded Survey Survey not Expanded Met X Correction Orders issued X Education Provided Follow-up Survey # New Correction Order issued Education Provided
5. The provider employs (or contracts with) qualified staff. Focus Survey MN Rule 4668.0065 MN Rule 4668.0835 Expanded Survey MN Rule 4668.0820 MN Rule 4668.0825 MN Rule 4668.0840 MN Rule 4668.0070 MN Statute §144D.065	 Staff have received training and/or competency evaluations as required, including training in dementia care, if applicable. Nurse licenses are current. The registered nurse(s) delegates nursing tasks only to staff that are competent to perform the procedures that have been delegated. The process of delegation and supervision is clear to all staff and reflected in their job descriptions. Personnel records are maintained and retained. Staff meet infection control guidelines. 	Focus Survey MetCorrection Orders issuedEducation Provided Expanded SurveySurvey not ExpandedMetX_Correction Orders issued _X_Education Provided Follow-up Survey #New Correction Order issuedEducation Provided

Indicators of Compliance	Outcomes Observed	Comments
6. Changes in a client's condition are recognized and acted upon. Medications are stored and administered safely. Focus Survey MN Rule 4668.0855 MN Rule 4668.0860 Expanded Survey MN Rule 4668.0815 MN Rule 4668.0820 MN Rule 4668.0865 MN Rule 4668.0870	 A registered nurse is contacted when there is a change in a client's condition that requires a nursing assessment. Emergency and medical services are contacted, as needed. The client and/or representative is informed when changes occur. The agency has a system for the control of medications. A registered nurse trains unlicensed personnel prior to them administering medications. Medications and treatments are ordered by a prescriber and are administered and documented as prescribed. 	Focus Survey MetCorrection Order(s) issuedEducation Provided Expanded SurveySurvey not ExpandedMetX_Correction Orders issuedX_Education Provided Follow-up Survey #New Correction Order issuedEducation Provided
7. The provider has a current license. Focus Survey MN Rule 4668.0019 Expanded Survey MN Rule 4668.0008 MN Rule 4668.0012 MN Rule 4668.0016 MN Rule 4668.0220 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.	 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. The agency operates within its license(s) and applicable waivers and variances. Advertisement accurately reflects the services provided by the agency. 	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	Outcomes Observed	Comments	
8. The provider is in compliance with MDH waivers and variances	Licensee provides services within the scope of applicable MDH	Enternation Provides Services William	This area does not apply to a Focus Survey.
Expanded Survey • MN Rule 4668.0016	waivers and variances	Expanded Survey X Survey not Expanded Met Correction Order(s) issued Education Provided Follow-up Survey # New Correction Order issued Education Provided	

<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 4668.0070 Subp. 2

AREA OF COMPLIANCE: #5

Based on record review and interview, the licensee failed to maintain documentation of training for two of two unlicensed employee (#B, #C) records reviewed. The findings include:

Employees B and C, unlicensed HHAs were hired December of 2005, and November of 2005, respectively. There was no evidence indicating employees B and C had been determined competent to perform delegated nursing services such as transferring, bathing, feeding, and skin care for clients served by the licensee. When interviewed November 8, 2006, the owner stated all unlicensed staff were trained and determined competent by the licensee's registered nurse (RN) during the orientation of each employee. The owner provided the surveyor with a training packet that she indicated was reviewed with each employee by the RN. Contents of the training packet included the procedures for bathing, transferring clients, feeding clients and other delegated services. The owner stated the training had occurred, but there was no documentation to verify when the training occurred. When interviewed November 7, 2006, an unlicensed employee stated she had been instructed by the facility RN when she was hired on skills she needed to care for the clients.

2. MN Rule 4668.0810 Subp. 6

AREA OF COMPLIANCE: #4

Based on record review and interview, the licensee failed to assure a discharge summary was completed for one of one discharged client's (#5) record reviewed. The findings include:

Client #5 began receiving services March of 2006, and continued receiving services until she died on July of 2006. The last entry, dated July of 2006, noted the client had expired that date without a discharge summary. When interviewed on November 8, 2006, the owner stated the final entry in the health progress notes at the time of the client's death was the discharge summary. When queried, the owner stated there was not a procedure in place at the time of a client's discharge which summarized the client's reason for initiation and discontinuation of services.

3. MN Rule 4668.0865 Subp. 2

AREA OF COMPLIANCE: #6

Based on record review and interview, the licensee failed to have a registered nurse (RN) assess the client's need for central medication storage for three of three clients' (#2, #4, #5) records reviewed. The findings include:

Clients #2, #4, and #5 were admitted October of 2006, April of 2006 and March of 2006, respectively. Each client's service plan indicated they received central storage of their medications. None of the client records contained a RN assessment of the client's need for central storage of medications.

When interviewed on November 11, 2006, the owner stated all clients admitted to the agency are required to have their medications centrally stored and this is part of each client's service agreement. The owner acknowledged that the need for central storage was not assessed and addressed by the RN since central storage was a requirement for services by the licensee.

4. MN Rule 4668.0865 Subp. 9

AREA OF COMPLIANCE: #6

Based on observation and interview, the agency failed to provide locked affixed storage for controlled medications. The findings include:

On November 7, 2006, the medication storage area located in the lower level of the agency was observed. Percocet for client #2 was stored on a shelf next to client's other prescription medications. When interviewed on November 7, 2006, the owner stated she was in the process of purchasing a storage unit for controlled medications which would be attached to a wall. On November 9, the owner showed the reviewer a storage unit which been purchased, but not yet permanently attached next to the physical plant.

A draft copy of this completed form was left with <u>Jackie McGowan, Owner</u>, at an exit conference on <u>November 9, 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: http://www.revisor.leg.state.mn.us/stats (for MN statutes) http://www.revisor.leg.state.mn.us/arule/ (for MN Rules).