



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7004 1160 0004 8711 9991

February 8, 2006

Christine Moore, Administrator
Moore Board and Lodge
3552 Clinton Avenue South
Minneapolis, MN 55408

Re: Licensing Follow Up Revisit

Dear Ms. Moore:

This is to inform you of the results of a facility visit conducted by staff of the Minnesota Department of Health, Case Mix Review Program, on January 31, 2006 and February 1, 2006.

The documents checked below are enclosed.

- Informational Memorandum
Items noted and discussed at the facility visit including status of outstanding licensing correction orders.
- MDH Correction Order and Licensed Survey Form
Correction order(s) issued pursuant to visit of your facility.
- Notices Of Assessment For Noncompliance With Correction Orders For Home Care Providers

Feel free to call our office if you have any questions at (651) 215-8703.

Sincerely,

Jean Johnston, Program Manager
Case Mix Review Program

Enclosure(s)

cc: Christine Moore, President Governing Board
Hennepin County Social Services
Gloria Lehnertz, Minnesota Department of Human Services
Sherilyn Moe, Office of Ombudsman for Older Minnesotans
Case Mix Review File

10/04 FPC1000CMR

**Minnesota Department Of Health
Health Policy, Information and Compliance Monitoring Division
Case Mix Review Section**

INFORMATIONAL MEMORANDUM

PROVIDER: MOORE BOARD AND LODGE INC

DATES OF SURVEY: January 31, 2006, and February 1, 2006

BEDS LICENSED:

HOSP: _____ NH: _____ BCH: _____ SLFA: _____ SLFB: _____

CENSUS:

HOSP: _____ NH: _____ BCH: _____ SLF: _____

BEDS CERTIFIED:

SNF/18: _____ SNF 18/19: _____ NFI: _____ NFII: _____ ICF/MR: _____ OTHER:
ALHCP

NAMES AND TITLES OF PERSONS INTERVIEWED:

Jarmillia Childress, Day house manager/cook

Steven Moore, Owner/Assistant director

Christine Moore, Owner/Executive director

SUBJECT: Licensing Survey _____ Licensing Order Follow Up X

ITEMS NOTED AND DISCUSSED:

1. An unannounced visit was made to followup on the status of state licensing orders issued as a result of a visit made on March 16, 17, 18, and 22, 2005. The results of the survey were delineated during the exit conference. Refer to Exit Conference Attendance Sheet for the names of individuals attending the exit conference. The status of the Correction orders is as follows:

1. MN Rule 4668.0030 Subp. 5	Corrected
2. MN Rule 4668.0065 Subp. 1	Corrected
3. MN Rule 4668.0065 Subp. 3	Corrected
4. MN Rule 4668.0070 Subp. 3	Corrected
5. MN Rule 4668.0805 Subp. 1	Corrected
6. MN Rule 4668.0810 Subp. 6	Corrected
7. MN Rule 4668.0815 Subp. 1	Corrected
8. MN Rule 4668.0840 Subp. 3	Corrected
9. MN Rule 4668.0840 Subp. 4	Corrected
10. MN Rule 4668.0845 Subp. 2	Corrected
11. MN Rule 4668.0855 Subp. 7	Corrected
12. MN Rule 4668.0860 Subp. 2	Corrected
13. MN Rule 4668.0870 Subp. 2	Corrected



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7004 1160 0004 8714 4405

September 28, 2005

Christine Moore, Administrator
Moore Board and Lodge, Inc.
3552 Clinton Avenue South
Minneapolis, MN 55408

Re: Results of State Licensing Survey

Dear Ms. Moore:

The above agency was surveyed on March 16, 17, 18 and 22, 2005 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 feel free to call our office with any questions at (651) 215-8703.

Sincerely,

Jean Johnston, Program Manager
Case Mix Review Program

Enclosures

cc: Christine Moore, President Governing Body
Kelly Crawford, Minnesota Department of Human Services
Hennepin County Social Services
Sherillyn Moe, Office of the Ombudsman
CMR File

CMR 3199 6/04



Assisted Living Home Care Provider
LICENSING SURVEY FORM

Registered nurses from the Minnesota Department of Health (MDH) use the Licensing Survey Form during an on-site visit to evaluate the care provided by Assisted Living home care providers (ALHCP). The ALHCP licensee may also use the 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 ALHCP staff, make observations, and review some of the agency's documentation. The nurses may also talk to clients and/or their representatives. This is an opportunity for the licensee to explain to the MDH nurse what systems are in place to provide Assisted Living services. Completing the Licensing Survey Form in advance may expedite 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: MOORE BOARD AND LODGE INC

HFID # (MDH internal use): 21618

Dates of Survey: March 16, 17, 18, and 22, 2005

Project # (MDH internal use): QL21618001

Indicators of Compliance	Outcomes Observed	Comments
1. The agency only accepts and retains clients for whom it can meet the needs as agreed to in the service plan. (MN Rules 4668.0050, 4668.0800 Subpart 3, 4668.0815, 4668.0825, 4668.0845, 4668.0865)	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 understands what care will be provided and what it costs.	<input type="checkbox"/> Met <input checked="" type="checkbox"/> Correction Order(s) issued <input checked="" type="checkbox"/> Education provided

Indicators of Compliance	Outcomes Observed	Comments
<p>2. Agency staff promote the clients' rights as stated in the Minnesota Home Care Bill of Rights. (MN Statute 144A.44; MN Rule 4668.0030)</p>	<p>No violations of the MN Home Care Bill of Rights (BOR) are noted during observations, interviews, or review of the agency's documentation. Clients and/or their representatives receive a copy of the BOR when (or before) services are initiated. There is written acknowledgement in the client's clinical record to show that the BOR was received (or why acknowledgement could not be obtained).</p>	<p><input type="checkbox"/> Met <input checked="" type="checkbox"/> Correction Order(s) issued <input checked="" type="checkbox"/> Education provided</p>
<p>3. The health, safety, and well being of clients are protected and promoted. (MN Statutes 144A.44; 144A.46 Subd. 5(b), 144D.07, 626.557; MN Rules 4668.0065, 4668.0805)</p>	<p>Clients are free from abuse or neglect. Clients are free from restraints imposed for purposes of discipline or convenience. Agency staff 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.</p>	<p><input type="checkbox"/> Met <input checked="" type="checkbox"/> Correction Order(s) issued <input checked="" type="checkbox"/> Education provided</p>
<p>4. The agency has a system to receive, investigate, and resolve complaints from its clients and/or their representatives. (MN Rule 4668.0040)</p>	<p>There is a formal system for complaints. Clients and/or their representatives are aware of the complaint system. Complaints are investigated and resolved by agency staff.</p>	<p><input checked="" type="checkbox"/> Met <input type="checkbox"/> Correction Order(s) issued <input type="checkbox"/> Education provided</p>
<p>5. The clients' confidentiality is maintained. (MN Statute 144A.44; MN Rule 4668.0810)</p>	<p>Client personal information and records are secure. Any information about clients is released only to appropriate parties. Permission to release information is obtained, as required, from clients and/or their representatives.</p>	<p><input type="checkbox"/> Met <input checked="" type="checkbox"/> Correction Order(s) issued <input checked="" type="checkbox"/> Education provided</p>
<p>6. Changes in a client's condition are recognized and acted upon. (MN Rules 4668.0815, 4668.0820, 4668.0825)</p>	<p>A registered nurse is contacted when there is a change in a client's condition that requires a nursing assessment or reevaluation, a change in the services and/or there is a problem with providing services as stated in the service plan. Emergency and medical services are contacted, as needed. The client and/or representative is informed when changes occur.</p>	<p><input checked="" type="checkbox"/> Met <input type="checkbox"/> Correction Order(s) issued <input type="checkbox"/> Education provided</p>

Indicators of Compliance	Outcomes Observed	Comments
<p>7. The agency employs (or contracts with) qualified staff. (MN Statutes 144D.065; 144A.45, Subd. 5; MN Rules 4668.0070, 4668.0820, 4668.0825, 4668.0030, 4668.0835, 4668.0840)</p>	<p>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 who 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.</p>	<p><input type="checkbox"/> Met <input checked="" type="checkbox"/> Correction Order(s) issued <input checked="" type="checkbox"/> Education provided</p>
<p>8. Medications are stored and administered safely. (MN Rules 4668.0800 Subpart 3, 4668.0855, 4668.0860)</p>	<p>The agency has a system for the control of medications. Staff are trained by a registered nurse prior to administering medications. Medications and treatments administered are ordered by a prescriber. Medications are properly labeled. Medications and treatments are administered as prescribed. Medications and treatments administered are documented.</p>	<p><input type="checkbox"/> Met <input checked="" type="checkbox"/> Correction Order(s) issued <input checked="" type="checkbox"/> Education provided <input type="checkbox"/> N/A</p>
<p>9. Continuity of care is promoted for clients who are discharged from the agency. (MN Statute 144A.44, 144D.04; MN Rules 4668.0050, 4668.0170, 4668.0800, 4668.0870)</p>	<p>Clients are given information about other home care services available, if needed. Agency staff follow any Health Care Declarations of the client. Clients are given advance notice when services are terminated by the ALHCP. Medications are returned to the client or properly disposed of at discharge from a HWS.</p>	<p><input type="checkbox"/> Met <input checked="" type="checkbox"/> Correction Order(s) issued <input checked="" type="checkbox"/> Education provided <input type="checkbox"/> N/A</p>
<p>10. The agency has a current license. (MN Statutes 144D.02, 144D.04, 144D.05, 144A.46; MN Rule 4668.0012 Subp.17)</p> <p><u>Note:</u> 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.</p>	<p>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).</p>	<p><input checked="" type="checkbox"/> Met <input type="checkbox"/> Correction Order(s) issued <input type="checkbox"/> Education provided</p>

Please note: 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 and/or education provided, list the number, regulation number, and example(s) of deficient practice noted:

Indicator of Compliance	Regulation	Correction Order Issued	Education provided	Statement(s) of Deficient Practice/Education:
#1	MN Rule 4668.0815 Subp. 1 Evaluation; documentation	X	X	<p>Based on interview and record review the licensee failed to have a registered nurse complete an individualized evaluation of the clients needs no later than two weeks after initiation of services for two of two current clients (#1 and #2) reviewed. The findings include:</p> <p>Client #1 was admitted in 2003. Client #2 was admitted in 2002. During the survey, March 16, 2005, the client records were reviewed and both records lacked an individualized evaluation of their needs by a registered nurse and a suitable up to date service plan. During interview with the executive director March 17, 2005, she agreed that the documentation by the registered nurse of the client's initial assessment was not in the records. She thought perhaps the nurse kept that documentation somewhere else.</p> <p><u>Education:</u> Provided</p>
#1	MN Rule 4668.0845 Subp. 2 Services that require supervision by a registered nurse	X	X	<p>Based on interview and record review the licensee failed to have a registered nurse supervise unlicensed persons performing assisted living services for two of two current clients (#1 and #2) reviewed. The findings include:</p> <p>Client #1 and client #2 received central storage and assistance with administration of medications. There was no evidence that the registered nurse had made supervisory visits or that a licensed practical nurse had done monitoring visits to verify that the work of the unlicensed staff was being performed adequately. During an interview March 18, 2005, the executive director agreed that there was no evidence of supervisory visits by the nurse.</p> <p><u>Education:</u> Provided</p>

Indicator of Compliance	Regulation	Correction Order Issued	Education provided	Statement(s) of Deficient Practice/Education:
#2	MN Rule 4668.0030 Subp. 5 Home Care Bill of Rights; Acknowledgment of receipt	X	X	<p>Based on interview and record review the licensee failed to obtain written acknowledgment of the clients receipt of the home care bill of rights for two of two current clients (#1 and #2) reviewed. The findings include:</p> <p>Client #1 was admitted in 2003 and client #2 was admitted in December of 2002. There was no documentation in either client's record to indicate that they had received the Home Care Bill of Rights. During an interview March 16, 2005, the executive director stated that they were using the most current Home Care Bill of Rights and that each client had received one. She showed me the admission packet that did contain the correct copy. She agreed, however, that there was no documentation for acknowledgment of receipt kept in the clients' record.</p> <p><u>Education:</u> Provided</p>
#3	MN Rule 4668.0065 Subp. 1 Tuberculosis screening	X	X	<p>Based on interview and record review the licensee failed to have documentation of tuberculin testing for three of three employees (#1, #2 and #3) who had direct contact with clients. The findings include:</p> <p>Employees #1 and #3 were hired February 6, 2003. Employee #2 was hired January 17, 2005. None of the employees had any record of tuberculin testing in their files. During an interview March 17, 2005, the executive director agreed that there were no tuberculin tests in the personnel files.</p> <p><u>Education:</u> Provided</p>
#3	MN Rule 4668.0065 Subp. 3 Infection control in-service training	X	X	<p>Based on interview and record review the licensee failed to have direct care staff complete required annual infection control in-service training for two of three employees (#1, and #3) reviewed. The findings include:</p> <p>Both employees #1, and #3 began working as direct care providers for the licensee in February of 2003. Neither employee #1 nor #3 had any documentation in their files within the last twelve months of infection control in-service training. During an</p>

Indicator of Compliance	Regulation	Correction Order Issued	Education provided	Statement(s) of Deficient Practice/Education:
				<p>interview with the executive director on March 17, 2005 she agreed they had not had infection control training. She stated that they have not been providing annual infection control in-service training for all employees that have contact with clients.</p> <p><u>Education:</u> Provided</p>
#3	<p>MN Rule 4668.0805 Subp. 1 Orientation to home care requirements</p>	X	X	<p>Based on interview and record review the licensee failed to ensure orientation to home care requirements for three of three employees (#1, #2 and #3) reviewed. The findings include:</p> <p>Employees #1 and #3 were hired February 6, 2003 and employee #3 was hired January 17, 2005.</p> <p>There was no evidence to indicate that any of the employees had received orientation to home care requirements before providing services to clients in this agency or previously. During an interview on March 17, 2005, the executive director agreed that they were not meeting this requirement as part of their general orientation to the facility.</p> <p><u>Education:</u> Provided</p>
#5	<p>MN Rule 4668.0810 Subp. 6 Content of client record</p>	X	X	<p>Based on interview and record review the licensee failed to have complete client records for two of two current clients (#1 and #2) reviewed. The findings include:</p> <p>Client #1 was admitted in 2003 and client #2 was admitted in 2002. Both records lacked dates of beginning of services; evaluation and service plans; nursing assessment for nursing services, delegated nursing services or central storage of medications; medication and treatment orders; and documentation at least weekly of the clients status and the home care services provided. During an interview March 16, 2005, the executive director stated that she had just begun to put together the charts for her assisted living clients and she didn't have all the information in the charts yet.</p> <p><u>Education:</u> Provided</p>

Indicator of Compliance	Regulation	Correction Order Issued	Education provided	Statement(s) of Deficient Practice/Education:
#7	MN Rule 4668.0840 Subp. 3 Core training of unlicensed personnel	X	X	<p>Based on interview and record review the licensee failed to provide documentation of core training for three of three (#1, #2 and #3) unlicensed personnel performing assisted living home care services. The findings include:</p> <p>Employees #1 and #3 were hired February 6, 2003 and employee #2 was hired January 17, 2005. There was no documentation in their files to indicate that they had completed core training or demonstrated competency in the topics. During an interview March 18, 2005, the executive director agreed that the employees had not received training in all the topics listed in the rule and that there was no documentation for the initial training that they had been given.</p> <p><u>Education:</u> Provided</p>
#7	MN Rule 4668.0840 Subp. 4 Competency evaluations	X	X	<p>Based on interview and record review the licensee failed to provide documentation of competency evaluation tests to perform assisted living home care services for three of three unlicensed personnel (#1, #2 and #3) reviewed. The findings include:</p> <p>Employees #1 and #3 were hired February 6, 2003 and employee #2 was hired January 17, 2005. There was no evidence of written, oral or practical competency tests for the assisted living services that the unlicensed staff were providing. During an interview March 18, 2005, the executive director agreed that they did not have competency evaluations.</p> <p><u>Education:</u> Provided</p>
#7	MN Rule 4668.0070 Subp. 3 Job descriptions	X	X	<p>Based on interview and record review the licensee failed to provide a job description for two of three personnel (#1 and #3) reviewed. The findings include:</p> <p>Employee #1 and #3 had different jobs that both had direct client contact. There were no job descriptions in employee #1 or #3's personnel file. During interview March 17, 2005, the executive director agreed that there were no written position descriptions for those two jobs.</p>

Indicator of Compliance	Regulation	Correction Order Issued	Education provided	Statement(s) of Deficient Practice/Education:
				<u>Education:</u> Provided
#8	MN Rule 4668.0860 Subp. 2 Prescribers' order required	X	X	<p>Based on interview and record review the licensee failed to have written prescribers orders for two of two current clients (#1 and #2) reviewed who received assistance with medication. The findings include:</p> <p>Clients #1 and #2 were receiving assistance with self-administration of medications from the provider. Both client records lacked current prescribers orders for medications. During an interview March 18, 2005, the executive director agreed that they did not have accurate physicians orders on each record for all the medications that they were providing assistance with self-administration.</p> <p><u>Education:</u> Provided</p>
#8	MN Rule 4668.0855 Subp.7 Performance of routine procedures	X	X	<p>Based on interview and client record review the licensee failed to have the registered nurse specify in writing specific instructions for assistance with self administration of medications for two of two current clients (#1 and #2) reviewed. The findings include:</p> <p>Client #1 and client #2 both were receiving assistance with self-administration of medication. Both client records lacked specific instructions, in writing, by a registered nurse for the procedure of assistance with self-administration of medications. During an interview March 18, 2005, the executive director agreed that they do not have a written procedure for assistance with self-administration of medications.</p> <p><u>Education:</u> Provided</p>
#9	MN Rule 4668.0870 Subp. 2 Drugs given to discharged clients	X	X	<p>Based on interview and record review the licensee failed to indicate the disposition of medications for one of one discharged client (#3) reviewed. The findings include:</p> <p>Client #3 went to the hospital August of 2004 and was subsequently discharged. The closed record reviewed on March 17,</p>

Indicator of Compliance	Regulation	Correction Order Issued	Education provided	Statement(s) of Deficient Practice/Education:
				<p>2005 lacked documentation as to the disposition of the clients medications. During an interview March 18, 2005 the executive director stated that she was there that day and she gave the medications to the paramedics to go with the client. She agreed that there was no documentation in the record to support this.</p> <p><u>Education:</u> Provided</p>

A draft copy of this completed form was left with Christine Moore, owner at an exit conference on March 22, 2005. 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 within 3 weeks of this exit conference (see Correction Order form HE-01239-03). If you have any questions about the Licensing Survey Form or the survey results, please contact the Minnesota Department of Health, (651) 215-8703. After supervisory review, this form will be posted on the MDH website. General information about ALHCP is also available on the 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).

(Form Revision 7/04)