



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7008 0150 0003 5688 9156

August 21, 2008

James Imasuen
The James Inc
6965 Edington Circle
Shakopee, MN 55379

Re: Results of State Licensing Survey

Dear Mr. Imasue:

The above agency was surveyed on July 16 and 17, 2008, 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,

A handwritten signature in black ink that reads "Jean M. Johnston". The signature is written in a cursive style with a large, looped "J" and "N".

Jean Johnston, Program Manager
Case Mix Review Program

Enclosures

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

01/07 CMR3199



Class F 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 Class F home care providers (Class F). Class F 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 Class F 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 Class F home care regulations. Any violations of Class F Home Care Provider licensing requirements are noted at the end of the survey form.

Name of CLASS F: THE JAMES INC

HFID #: 23991

Date(s) of Survey: July 16 and 17, 2008

Project #: QL23991004

Indicators of Compliance	Outcomes Observed	Comments
<p>1. The provider only accepts and retains clients for whom it can meet the needs as agreed to in the service plan.</p> <p>Focus Survey</p> <ul style="list-style-type: none"> MN Rule 4668.0815 <p>Expanded Survey</p> <ul style="list-style-type: none"> MN Rule 4668.0050 MN Rule 4668.0800 Subp. 3 MN Rule 4668.0825 Subp. 2 MN Rule 4668.0845 	<ul style="list-style-type: none"> 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. 	<p>Focus Survey</p> <p><input type="checkbox"/> Met</p> <p><input type="checkbox"/> Correction Order(s) issued</p> <p><input type="checkbox"/> Education Provided</p> <p>Expanded Survey</p> <p><input type="checkbox"/> Survey not Expanded</p> <p><input type="checkbox"/> Met</p> <p><input checked="" type="checkbox"/> Correction Order(s) issued</p> <p><input checked="" type="checkbox"/> Education Provided</p> <p>Follow-up Survey # _____</p> <p><input type="checkbox"/> New Correction Order issued</p> <p><input type="checkbox"/> Education Provided</p>

Indicators of Compliance	Outcomes Observed	Comments
<p>2. The provider promotes the clients' rights.</p> <p>Focus Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0030 • MN Statute §144A.44 <p>Expanded Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0040 • MN Rule 4668.0170 • MN Statute §144D.04 • MN Rule 4668.0870 	<ul style="list-style-type: none"> • 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. 	<p>Focus Survey</p> <p>___ Met</p> <p><input checked="" type="checkbox"/> Correction Order(s) issued</p> <p><input checked="" type="checkbox"/> Education Provided</p> <p>Expanded Survey</p> <p>___ Survey not Expanded</p> <p>___ Met</p> <p>___ Correction Order(s) issued</p> <p>___ Education Provided</p> <p>Follow-up Survey # ___</p> <p>___ New Correction Order issued</p> <p>___ Education Provided</p>
<p>3. The health, safety, and well being of clients are protected and promoted.</p> <p>Focus Survey</p> <ul style="list-style-type: none"> • MN Statute §144A.46 • MN Statute §626.557 <p>Expanded Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0035 • MN Rule 4668.0805 	<ul style="list-style-type: none"> • 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. 	<p>Focus Survey</p> <p>___ Met</p> <p><input checked="" type="checkbox"/> Correction Order(s) issued</p> <p><input checked="" type="checkbox"/> Education Provided</p> <p>Expanded Survey</p> <p>___ Survey not Expanded</p> <p>___ Met</p> <p>___ Correction Order(s) issued</p> <p>___ Education Provided</p> <p>Follow-up Survey # ___</p> <p>___ New Correction Order issued</p> <p>___ Education Provided</p>

Indicators of Compliance	Outcomes Observed	Comments
<p>4. The clients' confidentiality is maintained.</p> <p>Expanded Survey</p> <ul style="list-style-type: none"> MN Rule 4668.0810 	<ul style="list-style-type: none"> 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. 	<p><i>This area does not apply to a Focus Survey</i></p> <p>Expanded Survey</p> <p>___ Survey not Expanded</p> <p>___ Met</p> <p><u>X</u> Correction Order(s) issued</p> <p><u>X</u> Education Provided</p> <p>Follow-up Survey # ___</p> <p>___ New Correction Order issued</p> <p>___ Education Provided</p>
<p>5. The provider employs (or contracts with) qualified staff.</p> <p>Focus Survey</p> <ul style="list-style-type: none"> MN Rule 4668.0065 MN Rule 4668.0835 <p>Expanded Survey</p> <ul style="list-style-type: none"> MN Rule 4668.0820 MN Rule 4668.0825 MN Rule 4668.0840 MN Rule 4668.0070 MN Statute §144D.065 	<ul style="list-style-type: none"> 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. 	<p>Focus Survey</p> <p>___ Met</p> <p>___ Correction Order(s) issued</p> <p>___ Education Provided</p> <p>Expanded Survey</p> <p>___ Survey not Expanded</p> <p>___ Met</p> <p><u>X</u> Correction Order(s) issued</p> <p><u>X</u> Education Provided</p> <p>Follow-up Survey # ___</p> <p>___ New Correction Order issued</p> <p>___ Education Provided</p>

Indicators of Compliance	Outcomes Observed	Comments
<p>6. Changes in a client’s condition are recognized and acted upon. Medications are stored and administered safely.</p> <p>Focus Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0855 • MN Rule 4668.0860 <p>Expanded Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0800 • MN Rule 4668.0815 • MN Rule 4668.0820 • MN Rule 4668.0865 • MN Rule 4668.0870 	<ul style="list-style-type: none"> • 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. 	<p>Focus Survey</p> <p>___ Met</p> <p>___ Correction Order(s) issued</p> <p>___ Education Provided</p> <p>Expanded Survey</p> <p>___ Survey not Expanded</p> <p>___ Met</p> <p><u>X</u> Correction Order(s) issued</p> <p><u>X</u> Education Provided</p> <p>Follow-up Survey # ___</p> <p>___ New Correction Order issued</p> <p>___ Education Provided</p>
<p>7. The provider has a current license.</p> <p>Focus Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0019 <p>Expanded Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0008 • MN Rule 4668.0012 • MN Rule 4668.0016 • MN Rule 4668.0220 <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>	<ul style="list-style-type: none"> • The CLASS F 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. 	<p>Focus Survey</p> <p><u>X</u> Met</p> <p>___ Correction Order(s) issued</p> <p><u>X</u> Education Provided</p> <p>Expanded Survey</p> <p>___ Survey not Expanded</p> <p>___ Met</p> <p>___ Correction Order(s) issued</p> <p>___ Education Provided</p> <p>Follow-up Survey # ___</p> <p>___ New Correction Order issued</p> <p>___ Education Provided</p>

Indicators of Compliance	Outcomes Observed	Comments
<p>8. The provider is in compliance with MDH waivers and variances</p> <p>Expanded Survey</p> <ul style="list-style-type: none"> MN Rule 4668.0016 	<ul style="list-style-type: none"> Licensee provides services within the scope of applicable MDH waivers and variances 	<p><i>This area does not apply to a Focus Survey.</i></p> <p>Expanded Survey</p> <p>___ Survey not Expanded</p> <p><input checked="" type="checkbox"/> Met</p> <p>___ Correction Order(s) issued</p> <p><input checked="" type="checkbox"/> Education Provided</p> <p>Follow-up Survey # ___</p> <p>___ New Correction Order issued</p> <p>___ Education Provided</p>

Please note: Although the focus of the licensing survey is the regulations listed in the Indicators of Compliance boxes above, other rules and statutes may be cited depending on what system a provider has or fails to have in place and/or the severity of a violation. The findings of the focused licensing survey may result in an expanded survey.

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 4668.0030 Subp. 2

INDICATOR OF COMPLIANCE: # 2

Based on record review and interview the licensee failed to provide the bill of rights for one of one client (#1) record reviewed. The findings include:

Client #1 began receiving services November 2006, including bathing, range of motion exercises and medication administration. Client #1’s record lacked evidence of receiving the Home Care Bill of Rights. When interviewed, July 16, 2008, client #1 stated that she didn’t remember receiving the bill of rights. When interviewed, July 16, 2008, the administrator provided the Bill of Rights being given to clients which lacked the complete text for number 16 and lacked contact information for the Office of Health Facility Complaints and the Office of Ombudsman for Older Minnesotans.

2. MN Rule 4668.0065 Subp. 3

INDICATOR OF COMPLIANCE: # 5

Based on record review and interview, the licensee failed to ensure infection control in-service training was completed for one of one licensed employee (A) record reviewed. The findings include:

Employee A began providing direct care on September 9, 2006, when the first client began receiving services. Employee A's record lacked evidence of any infection control in-service. When interviewed July 16, 2008, employee A stated he had not been aware of the requirement for infection control in-service and verified he had not attended an infection control in-service.

3. MN Rule 4668.0070 Subp. 3

INDICATOR OF COMPLIANCE: # 5

Based on record review and interview, the licensee failed to ensure there was a current job description for one of one licensed employee (A) record reviewed. The findings include:

There was no evidence of a job description for licensed employees. When interviewed, July 16, 2008, employee A provided a document titled "Job Skills Training: Interview Skills" as the job description. This document appeared to be a guide to interviewing potential unlicensed personnel and lacked the qualifications and responsibilities for the position of licensed employee.

4. MN Rule 4668.0810 Subp. 5

INDICATOR OF COMPLIANCE: # 4

Based on record review and interview, the licensee failed to ensure entries in the client record were legible and authenticated with the name and title of the person making the entry for one of one client (#1) record reviewed. The findings include:

Client #1 began receiving services November 2006, including bathing, range of motion exercises and medication administration. Client #1's nursing notes on November 26, 28 and 29, 2007, and May 19, 2008, lacked the title of the person(s) who made the entries. Client #1's nursing notes of June 22, 23, 27 and July 2, 2008, lacked a legible name and title for the person(s) who made the entries.

When interviewed, July 17, 2008, the administrator verified the names and titles were difficult to read or absent in entries in the client's nursing notes.

5. MN Rule 4668.0810 Subp. 6

INDICATOR OF COMPLIANCE: # 4

Based on record review and interview the licensee failed to ensure the client's status was documented for one of one client (#1) record reviewed who had an incident with injury. The findings include:

Client #1 record included documentation of an incident "May 18, 2008 at 8:30" in which client #1 "spilled coffee on the bed and it went down to her buttock.....The buttock looks okay except there are some redness. The next morning there are blisters start forming. In case further information is needed I can be reached on.... ." The documentation lacked indication of whether this was morning or evening, which buttock had blisters and stated the first name only of the staff person and "CNA" (certified nurses aide). Nurses notes at 5:30 p.m., May 18, 2008, describe the incident and include "family made aware, call will be placed to MD in a.m." May 19, 2008 nurses' note includes "the area now with multiple

blister, some open and some intact measure 24 x 6 cm. call placed to MD ask ostomy wound nurse to come out and eval. Wound nurse came out and eval with some orders. Will continue to monitor closely.” The wound treatment of cleansing, applying medication and covering “until healed” is documented on the medication administration record twice daily from May 19, 2008, through July 16, 2008. The record lacked evidence of an assessment of the wound or the healing process after May 19, 2008.

When interviewed July 16, 2008, employee B, an unlicensed person, stated that client #1’s skin “looks fine” and that the right buttock was “healing, pinkish six inches long by four inches wide”. When interviewed, July 17, 2008, the RN/administrator agreed there was no documentation of ongoing evaluation of the status of client #1’s wound but stated that it “was almost healed.”

6. MN Rule 4668.0815 Subp. 1

INDICATOR OF COMPLIANCE: # 1

Based on record review and interview, the licensee failed to provide a service plan for one of one client record (#1) reviewed. The findings include:

Client #1 began receiving services November 2006, which included bathing, range of motion exercises and medication administration. Client #1’s record included a form titled “Service Plan” which was totally blank in all areas.

When interviewed July 16, 2008, client #1 stated that she could not remember if she had a service plan. When interviewed, July 16, 2008, the administrator verified that client #1 did not have a service plan.

7. MN Rule 4668.0825 Subp. 4

INDICATOR OF COMPLIANCE: # 5

Based on record review and interview, the licensee failed to ensure unlicensed personnel were trained and competency tested for delegated nursing procedures for one of one employee (B) record reviewed. The findings include:

Client #1 began receiving services November 2006 which included dressing, bathing, catheter care, range of motion exercises, bowel program including digital stimulation and medication administration for client receiving central storage and medication administration records for client #1. There was no evidence that employee B had been trained for assisting with dressing, bathing, catheter care, range of motion exercises, or the bowel program including digital stimulation.

When interviewed July 16, 2008, employee B stated that she received training from the registered nurse before she performed these cares for client #1. There was no evidence of procedures for these services with the exception of ROM.

When interviewed July 16, 2008 the registered nurse agreed client #1 did not have client specific instructions written and documented in the client record.

8. MN Rule 4668.0845 Subp. 2**INDICATOR OF COMPLIANCE: # 1**

Based on record review and interview the licensee failed to provide supervision of services provided by unlicensed personnel for one of one client (#1) record reviewed. The findings include:

Client #1 began receiving services November 2006, including bathing, range of motion exercises and medication administration. When interviewed, July 16, 2008, client #1 stated that unlicensed staff give her medications, exercise her legs daily and help her bathe twice a week and that a nurse comes daily.

Client #1's record included a form titled "Supervisory Visits" which stated there was a supervisory visit October 1, 2006, (prior to admission) and no other supervision was documented. When interviewed, July 16, 2008, the administrator agreed client #1 did not have supervision of unlicensed personnel documented but stated they supervised regularly.

9. MN Rule 4668.0855 Subp. 2**INDICATOR OF COMPLIANCE: # 6**

Based on record review and interview the licensee failed to provide a nursing assessment of the client's functional status and need for medication administration for one of one client (#1) record reviewed. The findings include:

Client #1 began receiving services November 2006, including medication administration. Client #1's record included a form titled "Service Plan" which was totally blank in all areas. There was no evidence of an assessment of functional status and the need for medication administration.

When interviewed July 16, 2008 the administrator agreed client #1 did not have an assessment of her need for medication administration and verified there was no service plan.

10. MN Rule 4668.0865 Subp. 2**INDICATOR OF COMPLIANCE: # 6**

Based on record review and interview the licensee failed to provide a nursing assessment of the client's functional status and need for central medication storage for one of one client (#1) reviewed. The findings include:

Client #1 began receiving services in November 2006 which included central storage of medications. Client #1's record included a form titled "Service Plan" which was totally blank in all areas.

The tour of the establishment, July 16, 2008, included the central storage of medications system in the kitchen cabinets. When interviewed July 16, 2008, the administrator verified that client #1's medications were centrally stored and agreed client #1 did not have an assessment of her need for central medication storage and there was no service plan that included central storage of medications.

11. MN Statute §144A.44 Subd. 1(2)**INDICATOR OF COMPLIANCE: # 2**

Based on record review and interview the licensee failed to provide nursing services according to nursing standards for one of one client (#1) record reviewed. The findings include:

Client #1 record included documentation of an incident “May 18, 2008 at 8:30” in which client #1 “spilled coffee on the bed and it went down to her buttock.....The buttock looks okay except there are some redness. The next morning there are blisters start forming. In case further information is needed I can be reached on.... .” The documentation lacked indication of whether this was morning or evening, which buttock had blisters and stated the first name only of the staff person and “CNA” (certified nurses aide). Nurses notes at 5:30 p.m., May 18, 2008, describe the incident and include “family made aware, call will be placed to MD in a.m.” May 19, 2008 nurses’ note includes “the area now with multiple blister, some open and some intact measure 24 x 6 cm. call placed to MD ask ostomy wound nurse to come out and eval. Wound nurse came out and eval with some orders. Will continue to monitor closely.” The wound treatment of cleansing, applying medication and covering “until healed” is documented on the medication administration record twice daily from May 19, 2008, through July 16, 2008. The record lacked evidence of an assessment of the wound or the healing process after May 19, 2008.

When interviewed July 16, 2008, employee B, an unlicensed person, stated that client#1 skin “looks fine” and that the right buttock was “healing, pinkish six inches long by four inches wide”. When interviewed, July 17, 2008, the RN/administrator agreed there was no evidence of ongoing evaluation of the status of client #1’s wound but stated that it “was almost healed.”

12. MN Statute §626.557 Subd. 14(b)**INDICATOR OF COMPLIANCE: # 3**

Based on record review and interview the licensee failed to provide an individualized assessment of the client’s susceptibility to abuse for one of one client reviewed. The findings include:

Client #1 began receiving home care services in November 2006. Client #1’s record included nursing and vulnerability assessments which lacked an individualized assessment of the client’s susceptibility to abuse others, to be abused by others or potential for self-abuse.

When interviewed July 16, 2008 the administrator agreed client #1 did not have vulnerability assessments of these areas.

A draft copy of this completed form was left with James Imasuen, Administrator, at an exit conference on July 17, 2008. Any correction order(s) issued as a result of the on-site visit and the final Licensing Survey Form will be sent 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 review, this form will be posted on the MDH website. Class F Home Care Provider general information is available by going to the following web address and clicking on the Class F Home Care Provider link:

<http://www.health.state.mn.us/divs/fpc/profinfo/cms/casemix.html>

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).