



*Protecting, Maintaining and Improving the Health of Minnesotans*

Certified Mail # 7004 1350 0003 0567 0087

August 2, 2007

Linda Degriselles, Administrator  
Valin Senior Care LLC  
5024 Highview Drive SW  
Montevideo, MN 56265

Re: Results of State Licensing Survey

Dear Ms. Degriselles:

The above agency was surveyed on July 3, 5, and 9, 2007, 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".

Jean Johnston, Program Manager  
Case Mix Review Program

Enclosures

cc: Chippewa 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: VALIN SENIOR CARE LLC

HFID #: 24410

Date(s) of Survey: July 3, 5, and 9, 2007

Project #: QL24410002

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><b>Focus Survey</b></p> <ul style="list-style-type: none"> <li>MN Rule 4668.0815</li> </ul> <p><b>Expanded Survey</b></p> <ul style="list-style-type: none"> <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>	<ul style="list-style-type: none"> <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>	<p><b>Focus Survey</b></p> <p><input type="checkbox"/> Met</p> <p><input type="checkbox"/> Correction Order(s) issued</p> <p><input type="checkbox"/> Education Provided</p> <p><b>Expanded Survey</b></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 # <input type="text"/></p> <p><input type="checkbox"/> New Correction Order issued</p> <p><input type="checkbox"/> Education Provided</p>

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

<p>4. The clients' confidentiality is maintained.</p> <p><b>Expanded Survey</b></p> <ul style="list-style-type: none"> <li>• MN Rule 4668.0810</li> </ul>	<ul style="list-style-type: none"> <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>	<p><i>This area does not apply to a Focus Survey</i></p> <p><b>Expanded Survey</b></p> <p>___ Survey not Expanded ___ 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>___ New Correction Order issued</p> <p>___ Education Provided</p>
<p>5. The provider employs (or contracts with) qualified staff.</p> <p><b>Focus Survey</b></p> <ul style="list-style-type: none"> <li>• MN Rule 4668.0065</li> <li>• MN Rule 4668.0835</li> </ul> <p><b>Expanded Survey</b></p> <ul style="list-style-type: none"> <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>	<ul style="list-style-type: none"> <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>	<p><b>Focus Survey</b></p> <p>___ Met</p> <p>___ Correction Order(s) issued</p> <p>___ Education Provided</p> <p><b>Expanded Survey</b></p> <p>___ Survey not Expanded ___ 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>___ New Correction Order issued</p> <p>___ Education Provided</p>

<p>6. Changes in a client’s condition are recognized and acted upon. Medications are stored and administered safely.</p> <p><b>Focus Survey</b></p> <ul style="list-style-type: none"> <li>• MN Rule 4668.0855</li> <li>• MN Rule 4668.0860</li> </ul> <p><b>Expanded Survey</b></p> <ul style="list-style-type: none"> <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>	<ul style="list-style-type: none"> <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>	<p><b>Focus Survey</b></p> <p><input type="checkbox"/> Met</p> <p><input type="checkbox"/> Correction Order(s) issued</p> <p><input type="checkbox"/> Education Provided</p> <p><b>Expanded Survey</b></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 # <input type="text"/></p> <p><input type="checkbox"/> New Correction Order issued</p> <p><input type="checkbox"/> Education Provided</p>
<p>7. The provider has a current license.</p> <p><b>Focus Survey</b></p> <ul style="list-style-type: none"> <li>• MN Rule 4668.0019</li> </ul> <p><b>Expanded Survey</b></p> <ul style="list-style-type: none"> <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> <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"> <li>• 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.</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>	<p><b>Focus Survey</b></p> <p><input checked="" type="checkbox"/> Met</p> <p><input type="checkbox"/> Correction Order(s) issued</p> <p><input type="checkbox"/> Education Provided</p> <p><b>Expanded Survey</b></p> <p><input checked="" type="checkbox"/> Survey not Expanded</p> <p><input type="checkbox"/> Met</p> <p><input type="checkbox"/> Correction Order(s) issued</p> <p><input type="checkbox"/> Education Provided</p> <p>Follow-up Survey # <input type="text"/></p> <p><input type="checkbox"/> New Correction Order issued</p> <p><input type="checkbox"/> Education Provided</p>

<p>8. The provider is in compliance with MDH waivers and variances</p> <p><b>Expanded Survey</b></p> <ul style="list-style-type: none"> <li>MN Rule 4668.0016</li> </ul>	<ul style="list-style-type: none"> <li>Licensee provides services within the scope of applicable MDH waivers and variances</li> </ul>	<p><i>This area does not apply to a Focus Survey.</i></p> <p><b>Expanded Survey</b></p> <p><input checked="" type="checkbox"/> Survey not Expanded</p> <p><input type="checkbox"/> Met</p> <p><input type="checkbox"/> Correction Order(s) issued</p> <p><input type="checkbox"/> Education Provided</p> <p>Follow-up Survey # <input type="text"/></p> <p><input type="checkbox"/> New Correction Order issued</p> <p><input type="checkbox"/> Education Provided</p>
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***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 4668.0810 Subp. 6**

**INDICATOR OF COMPLIANCE: # 4**

Based on record review and interview, the licensee failed to maintain a complete record for three of three clients' (#1, #2, and #3) records reviewed. The findings include:

Client #1's service plan, dated March 14, 2007, included weekly medication set up by the licensed practical nurse (LPN), assistance of one with walking to and from meals, transfer, toileting, applying and removing leg brace, dressing, applying hearing aid and bed mobility daily.

Client #2 's service plan dated June 13, 2007, included weekly medication set up by the LPN, and assistance with dressing and bed mobility daily.

Client #3's service plan dated February 15, 2007, included medication management and set up weekly by the LPN and assistance with shower every other day and shampoo weekly.

There was no documentation in clients #1, #2, and #3's records regarding the name, date, time and quantity of dosage of each medication that was set-up by the LPN. There was no documentation by the unlicensed staff that the services on the service plan were performed for the clients.

When interviewed, July 5, 2007, the LPN managing director indicated she set-up the client's medication weekly by checking the label on the pill bottle and putting the number of pills in the pill box as indicated by the label. She indicated she did not document what medications she had set-up for the client. The LPN also verified that the records for client #1, #2, and #3 lacked documentation that services were provided.

When interviewed, July 5, 2007, both client #1 and #2 stated that services were provided by the staff and each stated they were very satisfied with the cares received.

## **2. MN Rule 4668.0815 Subp. 1**

### **INDICATOR OF COMPLIANCE: # 1**

Based on record review and interview, the licensee failed to ensure that a registered nurse (RN) completed an individualized evaluation of the client's needs and establish a service plan no later than two weeks after initiation of home care services for three of three clients' (#1, #2, and #3) records reviewed. The findings include:

Client #1 began receiving services in February 2007. The nursing evaluation baseline data was done by the managing director, a licensed practical nurse (LPN) on February 28, 2007. The service plan was also done by the managing director, an LPN, on March 14, 2007.

Client #2 began receiving services in May 2007. The baseline nursing assessment data was done by the managing director, an LPN, on May 31, 2007. The service plan was also done by the managing director, an LPN, on June 13, 2007.

Client #3 began receiving services in February 2007. The nursing assessment baseline data was completed by the managing director, an LPN. The service plan was done by the administrator who was not a registered nurse.

When interviewed July 3, 2007, the registered nurse (RN) verified she did not do the baseline data nursing assessment or the service plan for each client. She stated that these were done by the managing director. She stated that she did the care plan for each client.

## **3. MN Rule 4668.0840 Subp. 3**

### **INDICATOR OF COMPLIANCE: # 5**

Based on record review and interview, the licensee failed to ensure that the core training of unlicensed personnel was taught by a registered nurse for one of one unlicensed employee (A) record reviewed. The findings include:

Employee A was hired April 17, 2007, as a care support specialist who performed Class F home care services. The training record dated April 17, and 18, 2007 were signed by the registered nurse. When interviewed July 3, 2007, employee A indicated that she was trained by the managing director, an LPN, including hand washing techniques and administration of medications.

When interviewed, July 3, 2007, the registered nurse stated she came later that afternoon and did some

of the training for employee A. The RN's time record did not have evidence she was at the facility on April 17 or 18, 2007.

#### **4. MN Rule 4668.0845 Subp. 2**

##### **INDICATOR OF COMPLIANCE: # 1**

Based on record review and interview, the licensee failed to have a registered nurse (RN) supervise unlicensed personnel who perform services that require supervision for three of three clients' (#1, #2 and #3) records reviewed. The findings include:

Client's #1, #2 and #3 began receiving services requiring supervision including medication administration in February 2007, May 2007, and February 2007, respectively. There was no documentation in any of the client records of any RN supervisory visits or licensed practice nurse (LPN) monitoring visits.

When interviewed July 3, 2007, the RN stated she did not do a supervisory visit documentation every 62 days. She was at the facility at least every 62 days to check on the clients and the staff but she did not document it in the clients' records.

#### **5. MN Rule 4668.0855 Subp. 5**

##### **INDICATOR OF COMPLIANCE: # 6**

staff interview and record review, the licensee failed to ensure the registered nurse (RN) was notified when an unlicensed person administered a pro re nata (PRN, as needed) medication for three of three clients' (#1, #2, and #3) records reviewed. The findings include:

Client #1 received an ointment and cream to affected areas in June 2007 on a PRN basis. There was no evidence in the record that the RN was informed when the unlicensed staff administered the medications.

t # received an analgesic medication and an antiflatulent tablet on a PRN basis in June 2007. There was no evidence in the record that the RN was informed when the unlicensed staff administered these medications to client #2.

3 received a cough and cold syrup on a PRN basis in June 2007. There was no evidence in the record that the RN was informed when the PRN medication was given by the unlicensed staff.

When interviewed, July 3, 2007, employee A, an unlicensed person who administered medications to clients, stated that she would notify the managing director when she gave a PRN Medication. When interviewed, July 3, 2007, the RN stated that she conferred with the managing director on a regular basis on what was going on at the facility. The PRN medications were all ordered by the doctor so she felt it was ok to be given by the unlicensed staff. She verified there was no system in place for unlicensed personnel to follow when administering PRN medications.



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

Based on record review and interview, the licensee failed to ensure medication administration records were complete for three of three current clients (#1, #2, and #3) records reviewed. The findings include:

Clients #1, #2, and #3 all received medication administration. Staff initialed the medication administration records (MAR) when assisting or administering medications to these clients. The signature legend in the records of clients #1, #2, and #3 did not have the titles of all staff administering medications. When interviewed July 5, 2007, the managing director indicated that the staff initialed the MAR and they signed their full name on the back of the first page of the MAR but verified they did not include their title.

**7. MN Rule 4668.0860 Subp. 7****INDICATOR OF COMPLIANCE: # 6**

Based on record review and interview, the licensee failed to ensure that an order received by telephone was communicated to the supervising registered nurse (RN) within one hour of receipt for three of three clients' (#1, #2, and #3) records reviewed. The findings include:

Client #1's record contained orders by telephone dated April of 2007. The record lacked documentation that the RN was notified of the order. Client #2's record contained telephone order dated June of 2007, with no evidence the RN was notified. Client #3's record indicated telephone orders were received on three different dates in February of 2007. There was no evidence that the RN was notified of the orders. When interviewed July 5, 2007, the managing director verified that she had not notified the RN of these telephone orders.

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

Based on record review and interview, the licensee failed to have the registered nurse conduct an assessment of the client's functional status and need for central medication storage and develop a service plan for the provision of central storage of medications for three of three clients' (#1, #2, and #3) who received central storage of medications. The findings include:

The service plans for clients #1, #2, and #3 dated March 2007, June 2007, and February 2007, respectively, did not include central storage of medications. During the tour on July 5, 2007, clients #1, #2 and #3 medications were observed to be centrally stored in a locked cabinet in the living room. The licensee provided central storage of medications for all the clients. When interviewed, July 3, 2007, the registered nurse (RN) stated that the clients were happy to relinquish their right to self administer their medications and not keep medications in their room. She did not document this in the client's record. When interviewed July 5, 2007, the managing director stated that they provide central storage of medications as part of the package.

**9. MN Rule 4668.0865 Subp. 9****INDICATOR OF COMPLIANCE: # 6**

Based on observation and interview, the licensee failed to provide a separate locked compartment that was permanently affixed to the physical plant or medication cart for storage of schedule II drugs. The findings include:

During a tour of the medication storage area on July 5, 2007, it was observed that the schedule II drugs were placed in a separate locked metal box inside a locked cupboard. Client #2's schedule II analgesic drug was observed in this container. This box was not permanently affixed inside the locked medication cupboard. When interviewed July 5, 2007 the managing director confirmed the preceding findings.

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

Based on record review and interview, the licensee failed to ensure that an individualized assessment and abuse prevention plan was developed for three of three active clients' (#1, #2 and #3) records review. The findings include:

Clients #1, #2 and #3's records did not include a vulnerable adult assessment or an abuse prevention plan developed by a registered nurse.

When interviewed July 3, 2007, the administrator stated that they have a vulnerable adult policy but did not have a vulnerable adult assessment form.

When interviewed, July 9, 2007, the registered nurse stated that during the pre-admission assessment she did talk about some vulnerability of each client but verified that she did not establish a plan to address these vulnerabilities.

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A draft copy of this completed form was left with Linda DeGriselles at an exit conference on July 9, 2007. 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).