

Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7004 1350 0003 0567 0186

August 14, 2007

Brian Winges, Administrator White Bear Lake COH Care LLC 1235 Gun Club Road White Bear Lake, MN 55110

Re: Results of State Licensing Survey

Dear Mr. Winges:

The above agency was surveyed on August 1, 2, and 3, 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, Juan M. Johnston Jean Johnston, Program Manager

Case Mix Review Program

Enclosures

cc: Ramsey 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: WHITE BEAR LAKE COH CARE LLC

HFID #: 24613
Date(s) of Survey: August 1, 2, and 3, 2007
Project #: QL24613002

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 4668.0050 MN Rule 4668.0800 Subp. 3 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 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 <u>#</u> New Correction Order issued Education Provided

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 Met XCorrection Order(s) issued XEducation Provided Expanded Survey XSurvey 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 XSurvey not Expanded Met Correction Order(s) issued Education Provided Follow-up Survey #
 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 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
 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 4668.0800 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 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 <u>#</u> New Correction Order issued Education 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 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. 	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 #

Indicators of Compliance	Outcomes Observed	Comments
 8. The provider is in compliance with MDH waivers and variances Expanded Survey MN Rule 4668.0016 	• Licensee provides services within the scope of applicable MDH waivers and variances	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 # 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 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 4668.0845 Subp. 2

INDICATOR OF COMPLIANCE: #1

Based on record review and interview, the licensee failed to ensure that a registered nurse (RN) supervised unlicensed personnel who performed services that required supervision for one of two current clients' (#1) records reviewed. Findings include:

Client #1 began receiving services February of 2007, which included medication administration by unlicensed personnel. A fourteen day supervisory visit by the RN was conducted February of 2007 with the unlicensed personnel present. Notations titled, "supervisory visits" dated April of 2007, and June of 2007, were in the record, although the notes indicated that no unlicensed staff person were present to supervise when these visits occurred. During an interview August 1, 2007, the RN confirmed that supervisory visits were not always conducted when the unlicensed personnel were present.

2. 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 August 2, 2007, it was observed that the schedule II drugs were placed in a separate locked container inside a locked cabinet. Several medication bubble cards and bottles containing Hydrocodone (a narcotic analgesic schedule II drug) were observed in this container. The container was not permanently affixed inside the locked medication cabinet. The findings were reviewed with the registered nurse during the tour of the medication storage area on August 2, 2007 and she confirmed the findings.

3. MN Statute §626.557 Subd. 14(b)

INDICATOR OF COMPLIANCE: #3

Based on record review and interview, the licensee failed to ensure that when areas of a client's susceptibility to abuse were identified, that specific measures to be taken to minimize the risk of abuse were noted for three of three clients' (#1, #2, and #3) records reviewed. Findings include:

Client #1's Assessment for Vulnerability and Safety dated February of 2007 identified that the client was vulnerable in the areas of orientation to person, place and time, inability to give accurate information consistently, inability to ambulate safely, and was susceptible to abuse by others. There were no specific measures identified to assist in minimizing the risk of abuse to this client.

Client #2's Assessment for Vulnerability and Safety dated March of 2007 identified that the client was vulnerable in the areas of orientation to person, place and time, inability to give accurate information consistently, anxiety and depression, inability to use the telephone, not able to report abuse and neglect, behavior issues, and susceptible to abuse by others. There were no specific measures identified to assist in minimizing the risk of abuse to this client.

Client #3's Assessment for Vulnerability and Safety dated January of 2007 identified that the client was vulnerable in the areas of orientation to person, place and time, inability to give accurate information consistently, inability to report abuse and neglect, and was susceptible to abuse by other individuals. There were no specific measures identified to assist in minimizing the risk of abuse to this client.

During an interview on August 2, 2007, the registered nurse confirmed there were no specific measures identified for the clients' assessed areas of vulnerability.

A draft copy of this completed form was left with <u>Patti Frisco and Kelli Oman</u> at an exit conference on <u>August 3, 2007</u>. 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: <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).