



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7008 1830 0003 8091 0648

May 28, 2009

Charie Devolites, Administrator
PRNSC LLC
83 Marcin Hill
Burnsville, MN 55337

Re: Results of State Licensing Survey

Dear Ms. Devolites:

The above agency was surveyed on March 30 and 31, and April 1, 3, and 7, 2009, 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, flowing style.

Jean Johnston, Program Manager
Case Mix Review Program

Enclosures

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

01/07 CMR3199

Division of Compliance Monitoring • Case Mix Review
85 East 7th Place Suite, 220 • PO Box 64938 • St. Paul, MN 55164-0938 • 651-201-4301
General Information: 651-201-5000 or 888-345-0823 • TTY: 651-201-5797 • Minnesota Relay Service: 800-627-3529

<http://www.health.state.mn.us>

An equal opportunity employer



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: PRNSC LLC

HFID #: 25220

Dates of Survey: March 30, 31 and April 1, 3, 7, 2009

Project #: QL25220003

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>___ Met</p> <p><input checked="" type="checkbox"/> Correction Order issued</p> <p><input checked="" type="checkbox"/> Education Provided</p> <p>Expanded Survey</p> <p><input checked="" type="checkbox"/> 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>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 issued</p> <p><input checked="" type="checkbox"/> Education Provided</p> <p>Expanded Survey</p> <p><input checked="" type="checkbox"/> 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 issued</p> <p><input checked="" type="checkbox"/> Education Provided</p> <p>Expanded Survey</p> <p><input checked="" type="checkbox"/> 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><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 # _____</p> <p><input type="checkbox"/> New Correction Order issued</p> <p><input type="checkbox"/> 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><input type="checkbox"/> Met</p> <p><input checked="" type="checkbox"/> Correction Order issued</p> <p><input checked="" type="checkbox"/> Education Provided</p> <p>Expanded Survey</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 # _____</p> <p><input type="checkbox"/> New Correction Order issued</p> <p><input type="checkbox"/> 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 Orders 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>___ Education Provided</p> <p>Expanded Survey</p> <p><u>X</u> 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><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>

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 4668.0040 Subp. 2

INDICATOR OF COMPLIANCE: # 2

Based on record review and interview, the licensee failed to provide clients with a complete notice related to the procedure for making a complaint for three of three client (1, 2, and 3) records reviewed. The findings include:

The agency’s “Client Complaint or Grievance Policy” did not contain a method for submitting a complaint to the licensee. The complaint policy indicated a client receiving services may REGISTER a complaint, but the policy did not indicate how this was to occur.

When interviewed March 31, 2009, the nurse manager stated clients could register a complaint with the licensee in any manner, such as verbally or in writing, but agreed the notice provided to clients did not outline a method for submitting a complaint.

2. MN Rule 4668.0825 Subp. 4**INDICATOR OF COMPLIANCE: # 5**

Based on record review and interview, the licensee failed to retain documentation of the demonstration of competency for delegated nursing tasks performed for two of two unlicensed employee (C and D) records reviewed. The findings include:

Client #2's weekly service plan chart documentation indicated unlicensed employees provided daily cares for the client's suprapubic catheter. Client #3's weekly service plan chart documentation indicated unlicensed employees provided daily cares for the client's Foley catheter.

When interviewed March 31, 2009, unlicensed employee C stated she provided cares for the suprapubic for client #2 and the Foley catheter for client #3. She indicated she was instructed and observed for the care of the catheters, by registered nurse B. When interviewed April 1, 2009, unlicensed employee D stated she provided cares for the suprapubic for client #2 and the Foley catheter for client #3. She stated she was instructed and observed for the care of the catheters by registered nurse B. There was no documentation of competency for these tasks for employee C or D.

When interviewed March 31, 2009, registered nurse B stated she competency tested both unlicensed employees C and D in the care of suprapubic and Foley catheters, but did not document the competency testing. She indicated she was not aware of the requirement to maintain documentation of an unlicensed staff demonstrated competency.

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

Based on record review and interview the registered nurse failed to timely supervise unlicensed personnel who performed services that required supervision for one of two clients' (#3) records reviewed. The findings include:

Client #3 began receiving services July 2008, which included Foley catheter care and a bowel management program with the administration of enemas. Supervisory visits by the registered nurse were documented August 14, 2008, and November 21, 2008. There was documentation of a 'supervisory' visit on October 7, 2008; however the registered nurse supervised a *licensed* practical nurse rather than an *unlicensed* staff member.

When interviewed April 1, 2009, the nurse manager verified the supervisory visit for an unlicensed staff member did not occur in October.

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

Based on record review and interview, the licensee failed to administer medication as prescribed for two of two client (1 and 2) records reviewed that received central storage and medication administration from the licensee. The findings include:

Client 1's record contained a physician's order dated March 2009, for tizanidine 2 mg. three times daily. The medication administration report for March 2009 indicated the medication was not administered at 1:45 pm on March 30, 31, and at 7:55 pm on March 31, 2009. There was no documentation in the client's record as to why the medication was not administered as ordered or that any follow up procedures were provided.

When interviewed March 31, 2009, the nurse manager verified the documentation indicated the medication had not been administered as prescribed.

Client #3's record contained a physician order dated February 2009, for senna 8.6 mg, two tablets daily. It was not documented on the medication setup chart or medication administration record for February and March 2009. There was no documentation in the client's record as to why the medication was not administered as ordered or that any follow up procedures were provided.

When interviewed March 31, 2009, the nurse manager noted that docusate sodium was administered during the months of February and March 2009, however, there was not a physician's order for the docusate sodium. She verified the docusate sodium was administered in error and the omission of the senna was also an error.

5. MN Rule 4668.0865 Subp. 3

INDICATOR OF COMPLIANCE: # 6

Based on record review and interview, the facility failed to maintain a system for the control of medications for two of two client (1 and 2) records reviewed that received central storage and medication administration from the licensee. The findings include:

Client #1 had a physician order dated February 2009, for metoprolol 25 mg. twice daily. The client's medication setup chart for February and March 2009 did not reflect the February 3, 2009, order but rather documented that metoprolol 50 mg. had been set up in the client's mediset twice daily.

When interviewed April 3, 2009, employee A, a licensed direct care staff stated she followed the physician orders and set up 25 mg. of metoprolol in the 8:00 a.m. and 8 p.m. time slots by cutting a 50 mg tablet in half. The client's previous order for metoprolol was 50 mg so there were 50 mg tablets already available when the order for 25 mg. was received. She stated she failed to change the 50 mg. entry on the medication setup chart to reflect the 25 mg. of metoprolol she set up in the client's mediset.

Client #1's physician's order dated February 2009, also ordered tramadol 50mg. two tablets *twice* daily. The space on the medication setup chart for February 25, 2009, a.m. time slot was filled in, but the p.m. time slot was blank indicating the medication was set up for once daily at 8 a.m. and not twice daily as ordered. However, the actual medication administration report completed by the home health aides after they administer a medication from the mediset container, indicated tramadol 50 mg, two tablets, was administered at 8 am and 8pm for the seven day period after February 25, 2009.

When interviewed March 31, 2009, the nurse manager stated each medication to be set up for a seven day period and each set up is documented on the medication setup chart per the licensee policy for medications. She further indicated it was an oversight of licensed staff setting up the medications in the

mediset containers on February 25, 2009, when the licensed staff failed to document she set up the Tramadol 50 mg two tablets at 8 p.m. for the seven day time period starting February 25, 2009.

Client #1's record also contained a physician's order dated March 2009, for fish oil capsules 1200 mg, two capsules, twice daily. The order was a change from the previous physician order for the fish oil capsules which was 1000 mg three capsules twice per day. The March 2009 medication setup chart listed fish oil 1000 mg three capsules twice daily and "1200-2caps." The medication setup chart noted the fish oil was set up for a seven day time period on March 4, 11, 18 and 25, 2009. It could not be determined what dosage of fish oil capsules was set up in the mediset containers. However, the actual medication administration report completed by the home health aides after they administered a medication from the mediset container, indicated two capsules of 1200 mg. fish oil was administered starting on March 9, 2009.

When interviewed March 31, 2009, the nurse manager stated it was the policy of the licensee to use a yellow highlighter to strike out the old physician's order on the medication setup chart when there was a dosage change in a medication. The new medication orders were to be written on the last page of the medication setup chart under "handwritten additions." She indicated following the policy would have made it clear on the medication setup chart when the new dosage was actually set up in the client's mediset container.

Client #1's record contained a physician's order dated March 2009, for tizanidine 2 mg. three times daily. The March 2009 medication setup chart failed to document any entries indicating the tizanidine was set up in the mediset container for the home health aides to administer. The medication administration report completed by the home health aides after they administered medications indicated the medication was not administered as ordered at 1:45 pm on March 30, 31 and at 7:55 pm on March 31, 2009.

When interviewed March 31, 2009, the nurse manager stated it was the policy of the licensee to set up and document the setup of each physician ordered medication on the client's individual medication setup chart. The nurse manager verified the tizanidine was not documented as set up per the licensee policy nor administered as ordered.

Client #3's record contained a physician's order dated March 2009, for amoxicillin 500 mg. three times per day. The March 2009, medication setup chart failed to document any entries indicating the Amoxicillin was set up by a licensed staff member in the mediset container for the home health aides to administer. However, the medication administration report, completed by the home health aides after they administer a medication, indicated the amoxicillin was administered in March 2009, as ordered.

When interviewed on March 31, 2009, the nurse manager stated it was the policy of the licensee to set up and document each setup for every physician ordered medication on the client's individual medication setup chart. The nurse manager verified the amoxicillin was not documented as set up per the licensee policy.

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

Based on record review and interview, the licensee failed to develop a complete vulnerability plan for three of three client (1, 2 and 3) records reviewed. The findings include:

Client #1 had a vulnerability assessment completed by the nurse manager July 2008. The vulnerability assessment did not assess the client's susceptibility for abuse by other individuals and for the client's risk of abusing other vulnerable adults. Clients #2 and #3 had the same vulnerability assessment completed and lacked assessment in the aforementioned areas.

When interviewed March 31, 2009, the nurse manager stated she was not aware the vulnerability assessment for each client was to contain an assessment of each client's abuse by other individuals and the client's risk of abusing other vulnerable adults.

A draft copy of this completed form was faxed to Vicki Rorie, Nurse Manger, prior to a telephone exit conference held on April 7, 2009. 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).



Protecting, Maintaining and Improving the Health of Minnesotans

October 2, 2008

Charlie Devolites, Administrator
PRNSC LLC
83 Marcin Hill
Burnsville, Mn 55337

Re: Telephone Interview

Dear Mr. Devolites:

The information discussed during a telephone interview conducted by staff of the Minnesota Department of Health, Case Mix Review Program, on September 15, 2008, is summarized in the enclosed documents listed below:

Telephone Interview and Education Assessment form

A summary of the items discussed during the phone interview and a listing of the education provided during the interview

Resource Sheet for Home Care Providers

A listing of web-sites and documents useful to home care providers in assuring compliance with home care regulations

Please note, it is your responsibility to share the information contained in this letter and the information from this interview with your direct care staff and the President of your facility's Governing Body.

If you have any questions, please feel free to call our office 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 initial "J".

Jean Johnston, Program Manager
Case Mix Review Program

Enclosure(s)

CMR TELEPHONE 03/08



Class A and Class F Home Care
Telephone Interview and Education Assessment

Registered nurses from the Minnesota Department of Health (MDH) use this form to document telephone interviews and education of newly licensed Class F and Class A (licensed only) Home Care Providers as well as other providers who have not been surveyed by Case Mix Review staff.

Licensing requirements listed below were reviewed during a telephone interview. Information from this interview along with other data will be considered when making decisions regarding the timing of an on site survey. The noted topics were discussed during the telephone interview and education was provided in the checked areas.

Name of Home Care Licensee: PRNSC LLC

HFID #: 25220

Type of License: Class F Home Care

Date of Interview: September 15, 2008

Interview Topic	Item Discussed	Education Provided
Access to information	<input checked="" type="checkbox"/> Home Care Rules and Statutes	<input type="checkbox"/> Web address for Home Care Rules and Statutes was sent (MN Statute §144A and MN Rule 4668) <input type="checkbox"/> Web address for Vulnerable Adult Act was sent (MN Statute §626.557) <input type="checkbox"/> Web address for Maltreatment of Minors Act was sent (MN Statute §626.556) <input type="checkbox"/> Board of Nursing web address was sent Sent via: <u>E-mail</u> <input checked="" type="checkbox"/> Basic Education Provided
Client Needs	<input checked="" type="checkbox"/> Care needs of clients	<input type="checkbox"/> Home Care licensee is required to have staff sufficient in qualifications and numbers to meet client needs (MN Rule 4668.0050) <input checked="" type="checkbox"/> Basic Education Provided



Interview Topic	Item Discussed	Education Provided
Home Care Bill of Rights	<input checked="" type="checkbox"/> Bill of Rights given to clients	<input checked="" type="checkbox"/> Current and appropriate version of home care bill of rights required Minnesota Dept. of Health web-site <input checked="" type="checkbox"/> Basic Education Provided
Advertising	<input checked="" type="checkbox"/> Advertising should reflect services provided	<input type="checkbox"/> Includes all forms of advertising MN Rule 4668.0019 <input checked="" type="checkbox"/> Basic Education Provided
Unlicensed personnel (ULP) who provide direct care	<input checked="" type="checkbox"/> Training needed for ULP to be qualified to provide direct care <input checked="" type="checkbox"/> Ongoing education needed for unlicensed personnel	<input type="checkbox"/> Initial training needed MN Rule 4668.0835 Subp. 2 (Class F) <input type="checkbox"/> Competency testing required MN Rule 4668.0835 Subp. 3 (Class F) <input type="checkbox"/> Inservice training MN Rule 4668.0835 Subp. 3 (Class F) <input type="checkbox"/> Ongoing infection control training needed MN Rule 4668.0065 Subp. 3 <input checked="" type="checkbox"/> Basic Education Provided
Unlicensed personnel (ULP) and medication administration	<input checked="" type="checkbox"/> Training required <input type="checkbox"/> Insulin administration by unlicensed personnel	<input checked="" type="checkbox"/> Difference between medication administration and assistance with medication administration. MN Rule 4668.0003 Subp. 2a and Subp. 21a <input checked="" type="checkbox"/> Medication reminders – a visual or verbal cue only. MN Rule 4668.0003 Subp. 21b <input type="checkbox"/> ULP limitations with insulin administration MN Rule 4668.0855 Subp. 6 (Class F) <input type="checkbox"/> Prescriber orders required MN Rule 4668.0860 Subp. 2 (Class F) <input type="checkbox"/> Basic Education Provided

Interview Topic	Item Discussed	Education Provided
Role of registered nurse (RN) and licensed practical nurse (LPN)	<input checked="" type="checkbox"/> Need to verify licenses of nurses <input checked="" type="checkbox"/> RN does assessments <input checked="" type="checkbox"/> LPN does monitoring	<input type="checkbox"/> Difference between RN and LPN role MN Rule 4668.0820 Subp. 2 (Class F) and Minnesota Nurse Practice Act <input type="checkbox"/> Points at which RN assessment is needed - Class F requirements <input type="checkbox"/> RN assessment and change in condition MN Rule 4668.0845 Subp. 2 (Class F) <input checked="" type="checkbox"/> Basic Education Provided
Supervision of unlicensed personnel (ULP)	<input checked="" type="checkbox"/> Requirements for supervision and monitoring of unlicensed personnel	<input type="checkbox"/> RN supervision and LPN monitoring of unlicensed personnel <input type="checkbox"/> Timing of supervision and monitoring MN Rule 4668.0845 (Class F) <input checked="" type="checkbox"/> Basic Education Provided
Service plan or agreement	<input checked="" type="checkbox"/> Contents of Service Plan or Agreement <input type="checkbox"/> Person who prepares service plan	<input checked="" type="checkbox"/> Differentiate between licensee service plan and county service plan <input type="checkbox"/> Required components of service plan <input type="checkbox"/> Need to review service plan <input checked="" type="checkbox"/> Basic Education Provided MN Rule 4668.0815 (Class F)
Protection of health, safety and well being of clients	<input checked="" type="checkbox"/> Background studies for all staff <input checked="" type="checkbox"/> Assessment of vulnerability for all clients	<input type="checkbox"/> Background studies not transferable <input type="checkbox"/> Only DHS background study accepted MN Statute §144A.46 Subd. 5 <input type="checkbox"/> Plan to address identified vulnerabilities required MN Statute §626.557 Subd. 14b <input checked="" type="checkbox"/> Basic Education Provided
Infection control	<input checked="" type="checkbox"/> Tuberculosis screening prior to direct client contact	<input type="checkbox"/> System for follow up on TB status after hire MN Rule 4668.0065 Subps. 1 & 2 <input type="checkbox"/> Yearly infection control inservice required for all staff including nurses MN Rule 4668.0065 Subp. 3 <input checked="" type="checkbox"/> Basic Education Provided

Interview Topic	Item Discussed	Education Provided
Assisted Living	<input type="checkbox"/> Arranged providers for assisted living required to follow 144G	<input checked="" type="checkbox"/> Uniform Consumer Information Guide must be given to all prospective clients MN Statute 144G.03 Subd. 2b9 <input checked="" type="checkbox"/> Basic Education Provided

The data used to complete this form was reviewed with Vickie Rorie, RN, Nurse Manager during a telephone interview on September 15, 2008. A copy of this Telephone Interview and Education Assessment form will be sent to the licensee. Any questions about this Telephone Interview and Education Assessment form should be directed to the Minnesota Department of Health, (651) 201-4301. This form will be posted on the MDH web-site. Home care provider general information is available by going to the following web address and clicking on the appropriate home care provider link:

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

Statutes and rules can be viewed on the internet:

<http://www.revisor.leg.state.mn.us/stats> - for Minnesota Statutes

<http://www.revisor.leg.state.mn.us/arule/> - for Minnesota Rules