



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7005 0390 0006 1222 1422

April 4, 2006

Larry Lindberg, Administrator
Midwest Medical Holdings LLC
8400 Coral Sea St Suite 100
Blaine, MN 55449

Re: Licensing Follow Up Revisit

Dear Mr. Lindberg:

This is to inform you of the results of a facility visit conducted by staff of the Minnesota Department of Health, Case Mix Review Program, on March 14 and 15, 2006.

The documents checked below are enclosed.

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

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

Sincerely,

Jean Johnston, Program Manager
Case Mix Review Program

Enclosure(s)

cc: Steven Peterson, PGB
Anoka County Social Services
Ron Drude, Minnesota Department of Human Services
Sherilyn Moe, Office of the Ombudsman
Jocelyn Olson, Office of Attorney General
Paul Civello, Office of Attorney General
Mary Henderson, Program Assurance
CMR File

10/04 FPC1000CMR



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7005 0390 0006 1222 1422

NOTICE OF ASSESSMENT FOR NONCOMPLIANCE WITH CORRECTION ORDERS FOR HOME CARE PROVIDERS

April 4, 2006

Larry Lindberg, Administrator
Midwest Medical Holdings LLC
8400 Coral Sea St Suite 100
Blaine, MN 55449

RE: QL02851011

Dear Mr. Lindberg:

On March 14 and 15, 2006, a reinspection of the above provider was made by the survey staff of the Minnesota Department of Health, to determine the status of correction orders found during an inspection completed on May 25, 26, 27, and June 2, 2005 with correction orders received by you on October 6, 2005.

The following correction orders were not corrected in the time period allowed for correction:

1. MN Rule 4668.0030 Subp. 2 \$250.00

Based on record reviews and interviews, the licensee failed to ensure two of five clients [#4 and #5] received a copy of the home care bill of rights. The findings include:

Interviews with employee (B) on May 27, 2005 and employees (D), (E), and (F) on May 26, 2005 and a review of the clinical records for clients #4 and #5 indicated that employee (B) provided blood transfusion home care services for client #4 on May 12, 2005 and client #5 on May 24, 2005. Client #4 and #5s' records did not contain any documentation to reflect that the clients had received a copy of the Home Care Bill of Rights. When interviewed on May 26, 2005, employee (B) stated that she had not given client #4 and #5 a copy of the Home Care Bill of Rights. Employees (D) and (F) stated that they were not aware that home care clients who received blood transfusions were to receive a copy of the Home Care Bill of Rights.

April 4, 2006

TO COMPLY: The provider shall give a written copy of the home care bill of rights, as required by Minnesota Statutes, section [144A.44](#), to each client or each client's responsible person.

Therefore, in accordance with Minnesota Statutes 144.653 and 144A.45, subdivision 2. (4), you are assessed in the amount of: \$250.00.

2. MN Rule 4668.0040 Subp. 2

\$50.00

Based on record reviews and interviews, the licensee failed to ensure that two of five clients [#4 and #5] were given a written notice of the licensee's complaint procedure and failed to assure that three of three clients (#1, #2 and #3) received the complete complaint procedure. The findings include:

Interviews with employee (B) on May 27, 2005 and employees (D), (E), and (F) on May 26, 2005 and a review of the clinical records for clients #4 and #5 indicated that employee (B) had provided blood transfusion home care services for client #4 on May 12, 2005 and client #5 on May 24, 2005. When interviewed on May 26, 2005, employee (B) stated that she did not give client #4 and #5 a copy of the complaint procedure. Employees (D) and (F) stated that they were not aware that home care clients who received blood transfusions were to receive a copy of the licensee's complaint procedure.

Client #1 was admitted on January 4, 2001, client # 2 was admitted on March 9, 2004 and client #3 was admitted on May 12, 2003. All three clients record contained a signed Client Consent Form, which acknowledged receipt of a "grievance" form. A copy of this form, titled "PATIENT CONCERNS/ GRIEVANCES FORM," was reviewed during an interview with employee D on May 26, 2005. This form did not include the right to complain to the Minnesota Department of Health's Office of Health Facilities Complaints.

TO COMPLY: The system required by subpart 1 must provide written notice to each client that includes:

- A. the client's right to complain to the licensee about the services received;
- B. the name or title of the person or persons to contact with complaints;
- C. the method of submitting a complaint to the licensee;
- D. the right to complain to the Minnesota Department of Health, Office of Health Facility Complaints; and
- E. a statement that the provider will in no way retaliate because of a complaint.

Therefore, in accordance with Minnesota Statutes 144.653 and 144A.45, subdivision 2. (4), you are assessed in the amount of: \$50.00.

4. MN Rule 4668.0075 Subp. 1

\$300.00

Based on record review and interview the licensee failed to provide orientation to the home care requirements for one of four employees (D) reviewed. The findings include:

Employee D began employment at the agency on December 11, 2000. Employee D's record lacked

April 4, 2006

documentation of orientation to the home care requirements. When interviewed, employee D stated she did not have an orientation to the home care requirements since start of employment in 2000.

TO COMPLY: Every individual applicant for a license, and every person who provides direct care, supervision of direct care, or management of services for a licensee, shall complete an orientation to home care requirements before providing home care services to clients. This orientation may be incorporated into the training required of paraprofessionals under part [4668.0130](#). This orientation need only be completed once.

Therefore, in accordance with Minnesota Statutes 144.653 and 144A.45, subdivision 2. (4), you are assessed in the amount of: \$300.00.

6. MN Rule 4668.0140 Subp. 1 \$250.00

Based on record review and interview, the licensee failed to enter into a written service agreement with the client in three of five clients' (#1, #4, #5) records reviewed. The findings include:

Client #1 was admitted to the agency on January 4, 2001. The client's record contained an unsigned service agreement and letter, dated April 9, 2004, to the client stating to sign and return the service agreement to Midwest IV. The record did not contain a signed Service Agreement. Employee E stated, on May 27, 2005, that there wasn't any other service agreement in this client's record. On May 26, 2005 employee C stated that the service agreement had been sent to the client for signature and apparently had not been returned.

Interviews with employee (B) on May 27, 2005 and employees (D), (E), and (F) on May 26, 2005 and a review of the clinical records for clients #4 and #5 indicated that employee (B) had provided blood transfusion home care services for client #4 on May 12, 2005 and client #5 on May 24, 2005. The clinical record, when reviewed on May 26, 2005, did not contain service agreements. When interviewed on May 26, 2005, employee (B) stated that service agreements were not done for client's #4 and #5. Employees (D) and (F) stated that they were not aware that service agreements were required for home care clients who received blood transfusions.

TO COMPLY: No later than the second visit to a client, a licensee shall enter into a written service agreement with the client or the client's responsible person. Any modifications of the service agreement must be in writing and agreed to by the client or the client's responsible person.

Therefore, in accordance with Minnesota Statutes 144.653 and 144A.45, subdivision 2. (4), you are assessed in the amount of: \$250.00.

7. MN Rule 4668.0140 Subp. 2 \$50.00

Based on record review and interview, the licensee failed to include all the required parts to the service agreement for two of two (#2, #3) clients reviewed. The findings include:

April 4, 2006

Client #3's service agreement, dated June 11, 2003 lacked the identification of the persons or categories of persons who were to provide the services in addition to a plan for contingency action for non-essential services. Interview of the agency's registered nurse on May 26, 2005, confirmed the above items were left blank on the Service Agreement.

Client # 2's service agreement dated March 25, 2005 listed "RN (registered nurse) visits" as a service. The area to indicate the frequency of visits was noted to be blank. The area for the contingency plan for non-essential services was noted to be blank. Interview with the licensee's registered nurse confirmed the above items were left blank on the service agreement.

TO COMPLY: The service agreement required by subpart 1 must include:

- A. a description of the services to be provided, and their frequency;
- B. identification of the persons or categories of persons who are to provide the services;
- C. the schedule or frequency of sessions of supervision or monitoring required, if any;
- D. fees for services;
- E. a plan for contingency action that includes:

(1) the action to be taken by the licensee, client, and responsible persons, if scheduled services cannot be provided;

(2) the method for a client or responsible person to contact a representative of the licensee whenever staff are providing services;

(3) who to contact in case of an emergency or significant adverse change in the client's condition;

(4) the method for the licensee to contact a responsible person of the client, if any; and

(5) circumstances in which emergency medical services are not to be summoned, consistent with the Adult Health Care Decisions Act, Minnesota Statutes, chapter 145B, and declarations made by the client under that act.

Class C licensees need not comply with items B and C and this item, subitems (2) and (5). Subitems (3) and (5) are not required for clients receiving only home management services.

Therefore, in accordance with Minnesota Statutes 144.653 and 144A.45, subdivision 2. (4), you are assessed in the amount of: \$50.00.

9. MN Rule 4668.0150 Subp. 6

\$350.00

Based on record review, and interview, the licensee failed to ensure that all orders were renewed at least

April 4, 2006

every three months for three of three clients' (#1, #2, and #3) records reviewed. The findings include:

Client #1 was admitted to the agency on January 4, 2001. The last treatment orders, signed by the physician was March 24, 2004. The treatment orders were to include a skilled nursing visit one time a week for dressing changes and monitoring of client's cardiopulmonary status, nutritional status, temperature, pulse, respiration and blood pressure, response to therapy and administration of infusion therapy as ordered. On May 26, 2005, the registered nurse stated she was unaware that treatment orders needed to be renewed every three months.

Client #2 was admitted on March 9, 2004. The client record included treatment orders signed on June 15, 2004 by a physician. There were no physician signed orders in the client's record after June 15, 2004. The record contained orders for home care that were electronically signed on October 22, 2004 and May 13, 2005 by a registered nurse (RN). When interviewed on May 26, 2005, employee C stated she was unaware of the need to renew treatment orders every three months.

Client #3 was admitted to home care May 12, 2003 and discharged October 4, 2004. The physician signed the last treatment order April 4, 2004. The record did not contain any further treatment orders by the physician. When interviewed on May 26, 2005 employee (C) stated she was unaware of the need to renew orders every three months.

TO COMPLY: All orders must be renewed at least every three months.

Therefore, in accordance with Minnesota Statutes 144.653 and 144A.45, subdivision 2. (4), you are assessed in the amount of: \$350.00.

10. MN Rule 4668.0160 Subp. 5

\$50.00

Based on record review, and interview, the licensee failed to have entries in the client records that were dated and authenticated with the name and title of the person making the entry in two of two clients' (#1, #2) records reviewed. The findings include:

Client #1 was admitted to the agency on January 4, 2001. The record contained a "Nutrition Screening Form" which indicated that the client should be referred to the dietitian within 72 hours if any of the areas were checked. The screening form contained several areas that were checked. The form lacked the date and authentication of the person making the entry. On May 31, 2005, the registered nurse stated she did not know the date or the person who made the entry in the record.

Client #2's record had a nutritional screening form that was completed but without a date or the name and title of the person completing the form.

TO COMPLY: All entries in the client record must be:

A. legible, permanently recorded in ink, dated, and authenticated with the name and title of the person making the entry; or

April 4, 2006

B. recorded in an electronic media in a secure manner.

Therefore, in accordance with Minnesota Statutes 144.653 and 144A.45, subdivision 2. (4), you are assessed in the amount of: \$50.00.

11. MN Rule 4668.0180 Subp. 9

\$100.00

Based on interview, the licensee failed to establish and implement a quality assurance plan. The findings include:

On May 27, 2005, employee D stated she was the Quality Assurance Coordinator for the Midwest Holdings Company. She stated that she does not have a Quality Assurance Plan for the Class A Home Care division of the company.

TO COMPLY: The licensee shall establish and implement a quality assurance plan, described in writing, in which the licensee must:

A. monitor and evaluate two or more selected components of its services at least once every 12 months; and

B. document the collection and analysis of data and the action taken as a result.

Therefore, in accordance with Minnesota Statutes 144.653 and 144A.45, subdivision 2. (4), you are assessed in the amount of: \$100.00.

12. MN Statute §144A.46 Subd. 5(b)

No Fine

Based on record review, and interview, the licensee failed to perform a criminal background study for three of four clients' (A, B, and D) records reviewed. The findings include:

Employee D began employment at the agency on December 11, 2000. Employee D's record lacked evidence of a criminal background check. When interviewed, on May 25, 2005, employee D confirmed she had not had a criminal background check since start of employment in 2000.

Personnel file review indicated that employee A was hired on April 30, 2000 and employee B was hired on February 2, 2005. The personnel files did not contain criminal background studies. When interviewed on May 25, 2005, employee D verified that criminal background studies had not been done on employees A and B.

TO COMPLY: Employees, contractors, and volunteers of a home care provider are subject to the background study required by section [144.057](#). These individuals shall be disqualified under the provisions of chapter 245C. Nothing in this section shall be construed to prohibit a home care provider from requiring self-disclosure of criminal conviction information.

April 4, 2006

13. MN Statute § 626.557 Subd. 14(b)

No Fine

Based on record review, and interview, the licensee failed to develop an individual abuse prevention plan for five of five clients' (#1, #2, #3, #4, and #5) records reviewed. The findings include:

Client #1 was admitted to the agency on January 4, 2001. The Initial Patient Assessment dated January 8, 2001 had "no" for the "Abuse/Neglect Assessment." The Initial Patient Assessment, dated March 16, 2004, lacked evidence of a vulnerable adult assessment. When interviewed on May 26, 2005, the registered nurse stated she did not understand the vulnerable adult assessment since most of her clients were elderly and stated she had not completed the form.

Client #3's start of care was May 12, 2003 and was discharged from the agency on October 4, 2004. The client's record lacked documentation of a vulnerable adult assessment and plan. Interview with the agency's registered nurse indicated that she did not understand this assessment since most of her clients were alert. The registered nurse directed the reviewer to the initial patient assessment form dated March 12, 2004, which lacked an abuse/prevention plan. The abuse neglect assessment item on the monthly visit log was left blank for the dates of May 11, 2004, June 14, 2004 and July 15, 2004.

Interviews with employee (B) on May 27, 2005 and employees (D), (E) and (F) on May 26, 2005 and a review of the clinical records for clients #4 and #5 indicated that employee (B) had provided blood transfusion home care services for client #4 on May 12, 2005 and client #5 on May 24, 2005. The clinical record, when reviewed on May 26, 2005, had an area for Vulnerable Adult [VA] assessment but was noted to be blank. When interviewed on May 26, 2005, employee (B) verified that she did not do a VA assessment.

Client #2 was admitted on March 9, 2004 and had an initial assessment done on "2/03" [unclear if this was February 3, 2004] in which the area for the required Vulnerable Adult (VA) assessment was noted to be blank. The weekly visit logs dated October 13, 2004 to April 29, 2005 were also noted to have an area for the VA assessment and were observed to be blank. The infusion nursing care plan dated March 9, 2004 did not contain any abuse prevention plans.

TO COMPLY: Each facility, including a home health care agency and personal care attendant services providers, shall develop an individual abuse prevention plan for each vulnerable adult residing there or receiving services from them. The plan shall contain an individualized assessment of the person's susceptibility to abuse by other individuals, including other vulnerable adults, and a statement of the specific measures to be taken to minimize the risk of abuse to that person. For the purposes of this clause, the term "abuse" includes self-abuse.

Therefore, in accordance with Minnesota Statutes 144.653 and 144A.45, subdivision 2. (4), the total amount you are assessed is: \$1400.00. This amount is to be paid by check made payable to the **Commissioner of Finance, Treasury Division MN Department of Health**, and sent to the MN Department of Health P.O. Box 64900 St Paul, MN 55164-0900 within 15 days of this notice.

April 4, 2006

You may request a hearing on the above assessment provided that a written request is made to the Department of Health, Facility and Provider Compliance Division, within 15 days of the receipt of this notice.

FAILURE TO CORRECT: In accordance with Minnesota Rule 4668.0800, Subp.7, if, upon subsequent re-inspection after a fine has been imposed under MN Rule 4668.0800 Subp. 6, the (correction order has/the correction orders have) not been corrected, another fine may be assessed. This fine shall be double the amount of the previous fine.

Determination of whether a violation has been corrected requires compliance with all requirements of the rule provided in the section entitled "TO COMPLY." Where a rule contains several items, failure to comply with any of the items will be considered lack of compliance. Lack of compliance on re-inspection with any item of a multi-part rule will result in the assessment of a fine even if the item that was violated during the initial inspection has been corrected.

Sincerely,

Jean Johnston
Program Manager
Case Mix Review Program

cc: Steven Peterson, PGB
Anoka County Social Services
Ron Drude, Minnesota Department of Human Services
Sherilyn Moe, Office of the Ombudsman
Jocelyn Olson, Office of Attorney General
Paul Civello, Office of Attorney General
Mary Henderson, Program Assurance
CMR File

12/04 FPCCMR 2697

Minnesota Department Of Health
Division of Compliance Monitoring
Case Mix Review Section

INFORMATIONAL MEMORANDUM

PROVIDER: MIDWEST MEDICAL HOLDINGS LLC

DATES OF SURVEY: March 14, and 15, 2006

BEDS LICENSED:

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

CENSUS:

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

BEDS CERTIFIED:

SNF/18: _____ SNF 18/19: _____ NFI: _____ NFII: _____ ICF/MR: _____ OTHER:
Class A

NAMES AND TITLES OF PERSONS INTERVIEWED:

Larry Lindberg, Chief Executive Officer
Craig Sanders, Quality Assurance Coordinator
Sue Kritinich, Registered Nurse
Joanne Schecker, Clerical Support

SUBJECT: Licensing Survey _____ Licensing Order Follow Up X

ITEMS NOTED AND DISCUSSED:

- 1) An unannounced visit was made to follow-up on the status of state licensing orders issued as a result of a visit made on May 25, 26, 27, and June 2, 2005. The results of the survey were delineated during the exit conference. Refer to Exit Conference Attendance Sheet for the names of individuals attending the exit conference. The status of the Correction orders is as follows:

1. MN Rule 4668.0030 Subp. 2 Not Corrected Fine \$250.00

Based on record review and interview, the agency failed to ensure that clients received a copy of the home care bill of rights for two of five clients' (#5 and #7) records reviewed. The findings include:

Clients #5 and #7 received blood transfusions from the licensee on November 30, 2005 and January 25, 2006 respectively. Their records did not contain any documentation to reflect that they had received a copy of the Home Care Bill of Rights. When interviewed, March 15, 2006, the registered nurse stated she was unaware that clients' needed to be provided with a copy of the Home Care Bill of Rights, as they were nursing home

residents and the licensee had provided this service under a contract with another company.

2. MN Rule 4668.0040 Subp. 2 Not Corrected Fine \$50.00

Based on record review and interview the licensee failed to provide clients with a written notice of the licensee's complaint procedure for three of five clients' (#5, #6 and #7) records reviewed. The findings include:

Clients #5, and #7 received blood transfusions from the licensee November 30, 2005 and January 25, 2006 respectively. Their records did not include evidence of having received the agency's complaint procedure. When interviewed, March 15, 2006, registered nurse stated she was unaware that transfusion clients residing in nursing homes needed to be given the agency's complaint procedure.

Client #6 began receiving services November 23, 2006. There was no evidence in the client record of the client receiving a copy of the agency's complaint procedure.

The registered nurse provided the materials given to clients on admission for review. The complaint procedure given to clients, and provided to this reviewer, did not include information regarding the right to contact the Office of Health Facility Complaints. When interviewed, March 15, 2006, the Quality Assurance Coordinator, stated that the complaint procedure had been updated to include all needed information but stated that staff had continued to utilize the old forms for new clients.

3. MN Rule 4668.0065 Subp. 1 Corrected

4. MN Rule 4668.0075 Subp. 1 Not corrected Fine \$300.00

Based on record review and interview the licensee failed to ensure orientation to the home care requirements for one of two employees' (G) records reviewed. The findings include:

Employee G began employment at the agency February 13, 2006, as the Quality Assurance Coordinator for the company. Employee G's record lacked documentation of orientation to the home care requirements. When interviewed, March 14, 2006, employee G verified he had not received this orientation.

5. MN Rule 4668.0075 Subp. 2 Corrected

6. MN Rule 4668.0140 Subp. 1 Not corrected Fine \$250.00

Based on record review and interview, the agency failed to enter into a written service agreement with the client for two of five clients' (#5 and #7) records reviewed. The findings include:

Clients #5, and #7 received blood transfusions from the licensee November 30, 2005 and January 25, 2006 respectively. The client records did not contain service agreements. When interviewed, March 15, 2006, the registered nurse confirmed that service agreements were not done for client's #5 and #7. She stated she was unaware that the

clients who resided in the nursing home and were provided with blood transfusion by the licensee required service agreements as the licensee was providing this service to the clients through a contract with another agency.

7. MN Rule 4668.0140 Subp. 2 Not corrected Fine \$50.00

Based on record review and interview, the licensee failed to provide a complete service agreement for one of five clients' (#6) records reviewed. The findings include:

Client #6 began receiving services including insertion of peripheral intravenous lines and dressings changes November 23, 2005. The record did not include a complete service agreement. The form used as a service agreement was not signed by either the client or the nurse and was lacking the last name of the client, the date it was completed, the contingency plan if services could not be provided, whom to contact in an emergency, the method for the client to contact a representative of the licensee when staff are providing services and the circumstances under which care should not be provided.

When interviewed, March 15, 2006, the registered nurse, confirmed the service agreement was not complete. She stated that she had not had a service agreement form with her the day of her first visit with client #6 so had utilized a service agreement modification form which did not contain all required areas.

8. MN Rule 4668.0150 Subp. 2 Corrected

9. MN Rule 4668.0150 Subp. 6 Not corrected Fine \$350.00

Based on record review, and interview, the licensee failed to ensure that treatment orders were renewed every three months for one of five client's (#1) records reviewed. The findings include:

Client #1 began receiving services from the agency, January 4, 2001. The last treatment orders signed by the physician were dated November 3, 2005. The treatment orders included a nursing visit 0-1 times per week. Client #4 had documented nursing visits December 7, and 12, 2005, January 4, 16, and 22, 2006, February 2, and 3, 2006 and March 14, 2006. When interviewed, March 15, 2006, the quality assurance coordinator, who had consulted with client #1's registered nurse, indicated that the registered nurse stated she had not renewed the orders at the last visit in March; however, she was planning on having them renewed March 17, 2006.

10. MN Rule 4668.0160 Subp. 5 Not corrected Fine \$50.00

Based on record review and interview, the licensee failed to ensure that all entries in the client record were complete for one of five client's (#6) records reviewed. The findings include:

Client #6 began receiving services November 23, 2005. There was a form in client #6's record titled "Client Consent Form" which included acknowledgment of the bill of rights, advanced directives information as well as insurance and release of information. The form was signed by both the client and the registered nurse but was not dated. When interviewed, March 15, 2006 the registered nurse stated that she had completed the form on the first home visit, November 23, 2005.

11. MN Rule 4668.0180 Subp. 9 Not corrected

Fine \$100.00

Based on interview, the licensee failed to establish and implement a quality assurance plan. The findings include:

During an interview, March 15, 2006, the quality assurance coordinator indicated that the licensee had a plan for quality assurance; however, they did not have any documentation of implementation of the plan.

12. MN Statute §144A.46 Subd. 5 Not corrected

No Fine

Based on record review and interview, the licensee failed to ensure a criminal background study was completed for one of five employees' (G) records reviewed. The findings include:

Employee G began employment at the agency February 13, 2006 as the quality assurance coordinator. Employee G's record lacked evidence of a criminal background study. When interviewed, March 14, 2006, employee G confirmed he had not had a criminal background study completed.

13. MN Statute §626.557 Subd. 14(b) Not corrected

No Fine

Based on record review and interview, the licensee failed to develop an individual abuse prevention plan for four of five clients' (#5, #6, and #7) records reviewed. The findings include:

Clients #5 and #7 received blood transfusions from the licensee November 30, 2005 and January 25, 2006 respectively. The records lacked individual abuse prevention plans. When interviewed, March 15, 2006, the registered nurse, stated individual abuse prevention plans had not done for these clients as they were short-term clients receiving only blood transfusions and were residents of nursing homes.

Client #6 began receiving services November 23, 2005. There was no evidence of an assessment for abuse in the client record. When interviewed, March 15, 2006, the registered nurse verified an assessment of vulnerabilities on client #6 had not been done.

- 3) Although a State licensing survey was not due at this time, correction orders were issued.
- 4) The following referrals are being made:
 - i) Anoka County
 - ii) Jocelyn Olson, Office of Attorney General
 - iii) Paul Civello, Office of Attorney General



Class A Licensed-Only 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 A Licensed-Only Home Care Providers. Class A 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 with MDH nurses during an on-site regulatory visit.

During on-site visit/s, MDH nurses will interview staff, talk with clients and/or their representatives and make observations during home visits, 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 A Licensed-Only Home Care services. Completing this Licensing Survey Form in advance would 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. This form must be used in conjunction with a copy of the Class A Licensed-Only Home Care regulations. Any violations of the Class A licensing requirements are noted at the end of the survey form.

Name of Class A Licensee: MIDWEST MEDICAL HOLDINGS LLC
 HFID # (MDH internal use): 02851
 Date(s) of Survey: March 14, and 15, 2006
 Project # (MDH internal use): QL02851011

| Indicators of Compliance | Outcomes Observed | Comments |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. The Provider accepts and retains clients for whom it can meet the needs. <ul style="list-style-type: none"> • MN Rules 4668.0050 • MN Rule 4668.0060 Subpart 3 • MN Rule 4668.0060 Subpart 4 • MN Rule 4668.0060 Subpart 5 • MN Rule 4668.0140 • MN Rule 4668.0180 Subpart 8 | <ul style="list-style-type: none"> • Clients are accepted based on the availability of staff, sufficient in qualifications and numbers, to adequately provide the services agreed to in the service agreement. • Service plans accurately describe the needs and services and contains all the required information. • Services agreed to are provided • Clients are provided referral assistance. | Annual Licensing Survey <input type="checkbox"/> Met <input type="checkbox"/> Correction <input type="checkbox"/> Order(s) issued <input type="checkbox"/> Education <input type="checkbox"/> Provided Follow-up Survey # _____ <input type="checkbox"/> Met <input type="checkbox"/> Not Met <input type="checkbox"/> New Correction <input type="checkbox"/> Order(s) issued <input type="checkbox"/> Education <input type="checkbox"/> Provided |
| 2. The Provider promotes client rights. <ul style="list-style-type: none"> • MN Statute §144A.44 • MN Rule 4668.0030 • MN Rule 4668.0040 Indicator of Compliance #2 continued: | <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. | Annual Licensing Survey <input type="checkbox"/> Met <input type="checkbox"/> Correction <input type="checkbox"/> Order(s) issued <input type="checkbox"/> Education <input type="checkbox"/> Provided Follow-up Survey # _____ <input type="checkbox"/> Met <input type="checkbox"/> Not Met |

| Indicators of Compliance | Outcomes Observed | Comments |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> MN Rule 4668.0170 | | ___ New Correction ___ Order(s) issued ___ Education ___ Provided |
| <p>3. The Provider promotes and protects each client's safety, property, and well-being.</p> <ul style="list-style-type: none"> MN Rule 4668.0035 MN Statutes §144A.46 Subdivision 5 MN Statute §626.556 MN Statutes §626.557 MN Statute §626.5572 | <ul style="list-style-type: none"> Client's person, finances and property are safe and secure. All criminal background checks are performed as required. Clients are free from maltreatment. There is a system for reporting and investigating any incidents of maltreatment. Maltreatment assessments and prevention plans are accurate and current. | Annual Licensing Survey ___ Met ___ Correction ___ Order(s) issued ___ Education ___ Provided Follow-up Survey # _____ ___ Met ___ Not Met ___ New Correction ___ Order(s) issued ___ Education ___ Provided |
| <p>4. The Provider maintains and protects client records.</p> <ul style="list-style-type: none"> MN Rule 4668.0160 <p>[Note to MDH staff: See Informational Bulletin 99-11 for Class A variance for Electronically Transmitted Orders]</p> | <ul style="list-style-type: none"> Client records are maintained and retained securely. Client records contain all required documentation. Client information is released only to appropriate parties. Discharge summaries are available upon request. | Annual Licensing Survey ___ Met ___ Correction ___ Order(s) issued ___ Education ___ Provided Follow-up Survey # <u>1</u> _____ ___ Met ___ Not Met <u>X</u> New Correction ___ Order(s) issued <u>X</u> Education ___ Provided |
| <p>5. The Provider employs and/or contracts with qualified and trained staff.</p> <ul style="list-style-type: none"> MN Rule 4668.0060 subpart 1 MN Rule 4668.0065 MN Rule 4668.0070 MN Rule 4668.0075 MN Rule 4668.0080 MN Rule 4668.0100 <p>[For subpart 2 see indicator #6]</p> <p>Indicator of Compliance #5 continued:</p> <ul style="list-style-type: none"> MN Rule 4668.0120 MN Rule 4668.0130 MN Statute 144A.45 | <ul style="list-style-type: none"> Staff, employed or contracted, have received all the required training. Staff, employed or contracted, meet the Tuberculosis and all other infection control guidelines. Personnel records are maintained and retained. Licensee and all staff have received the required Orientation to Home Care. Staff, employed or contracted, are registered and licensed as required by law. Documentation of medication administration procedures are available. Supervision is provided as required. | Annual Licensing Survey ___ Met ___ Correction ___ Order(s) issued ___ Education ___ Provided Follow-up Survey # _____ ___ Met ___ Not Met ___ New Correction ___ Order(s) issued ___ Education ___ Provided |

| Indicators of Compliance | Outcomes Observed | Comments |
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| Subdivision 5 <ul style="list-style-type: none"> • MN Statute 144A.461 <p>[Note to MDH staff: See Informational Bulletin 99-7 for Class A variance in a Housing With Services setting]</p> | | |
| 6. The Provider obtains and keeps current all medication and treatment orders [if applicable]. <ul style="list-style-type: none"> • MN Rule 4668.0150 • MN Rule 4668.0100 [Subpart 2] <p>[Note to MDH staff: See Informational Bulletin 99-7 and 04-12 for Class A variance in a Housing With Services setting with regards to medication administration, storage and disposition.]</p> | <ul style="list-style-type: none"> • Medications and treatments administered are ordered by a prescriber. • Medications are properly labeled. • Medications and treatments are administered as prescribed. • Medications and treatments administered are documented. • Medications and treatments are renewed at least every three months. | Annual Licensing Survey <input type="checkbox"/> Not Applicable <input type="checkbox"/> Met <input type="checkbox"/> Correction Order(s) issued <input type="checkbox"/> Education Provided Follow-up Survey # <u>1</u> <input type="checkbox"/> Not Applicable <input type="checkbox"/> Met <input type="checkbox"/> Not Met <input checked="" type="checkbox"/> New Correction Order(s) issued <input checked="" type="checkbox"/> Education Provided |
| 7. The Provider is licensed and provides services in accordance with the license. <ul style="list-style-type: none"> • MN Rule 4668.0008 subpart 3 • MN Rule 4668.0012 subpart 8 • MN Rule 4668.0012 Subpart 17 • MN Rule 4668.0019 • MN Rule 4668.0060 subpart 2 • MN Rule 4668.0060 subpart 6 • MN Rule 4668.0180 subpart 2 • MN Rule 4668.0180 subpart 3 <p>Indicator of Compliance #7 continued:</p> <ul style="list-style-type: none"> • MN Rule 4668.0180 subpart 4 • MN Rule 4668.0180 subpart 5 • MN Rule 4668.0180 | <ul style="list-style-type: none"> • Language requiring compliance with Home Care statutes and rules is included in contracts for contracted services. • License is obtained, displayed, and renewed. • Licensee's advertisements accurately reflects services available. • Licensee provides services within the scope of the license. • Licensee has a contact person available when a para-professional is working. | Annual Licensing Survey <input type="checkbox"/> Met <input type="checkbox"/> Correction Order(s) issued <input type="checkbox"/> Education Provided Follow-up Survey # _____ <input type="checkbox"/> Met <input type="checkbox"/> Not Met <input type="checkbox"/> New Correction Order(s) issued <input type="checkbox"/> Education Provided |

| Indicators of Compliance | Outcomes Observed | Comments |
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| subpart 6 • MN Rule 4668.0180 subpart 7 • MN Rule 4668.0180 subpart 9 • MN Statute 144A.47 | | |

Please note: Although the focus of the licensing survey is the regulations listed in the Indicators of Compliance boxes above, other violations may be cited depending on what systems a provider has or fails to have in place and/or the severity of a violation. Also, the results of the focused licensing survey may result in an expanded survey where additional interviews, observations, and documentation reviews are conducted.

SURVEY RESULTS:

For Indicators of Compliance not met and/or education provided, list the number, regulation number, and example(s) of deficient practice noted:

| Correction Order Number | Indicator of Compliance Number | Rule/ Statute Referenced | Education provided | Statement(s) of Deficient Practice/Education: |
|-------------------------|--------------------------------|-----------------------------------------------------------------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| #1 | 6 | MN Rule 4668.0150 Subp. 3 Medication and treatment orders | X | <p>Based on record review and interview, the licensee failed to have prescriber orders for treatments for one of five clients' (#6) records reviewed. The findings include:</p> <p>Client #6 began receiving services including restarting of peripheral intravenous lines November of 2005. The record did not include evidence of physician orders or a plan of treatment. When interviewed, March 15, 2006, the registered nurse stated she had spoken to the physician and gotten orders but was uncertain what had happened to the orders.</p> <p><u>Education:</u> Provided</p> |
| #2 | #4 | MN Rule 4668.0160 Subp. 6 Content of Client Record | X | <p>Based on record review and interview, the licensee failed to have complete client records for one of five clients' (#4) records reviewed. The findings include:</p> <p>Client #4's record contained physician orders dated November of 2005 for a blood transfusion. The record lacked</p> |

Class A (Licensed Only) Licensing Survey Form
Page 5 of 5

| Correction Order Number | Indicator of Compliance Number | Rule/ Statute Referenced | Education provided | Statement(s) of Deficient Practice/Education: |
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| | | | | <p>documentation that the order had been completed. When interviewed by phone, March 20, 2006, a registered nurse from the nursing home where client #4 resided during November 2005, indicated the transfusion had occurred. She faxed nursing home record documentation indicating that according to their records, client #4 had received the ordered blood transfusion three days after it was ordered in November of 2005 by a nurse from Midwest IV. Client #4's record with the licensee lacked evidence of the transfusion on November of 2005. When interviewed, March 16, 2005, the quality assurance coordinator, stated that the registered nurse had informed him that she had completed the transfusion and the documentation of the transfusion had brought the documentation into the office. However, client #4's record lacked this documentation and the documentation was unavailable for review.</p> <p><u>Education:</u> Provided</p> |

A draft copy of this completed form was left with Craig Sanders at an exit conference on March 15, 2006. Any correction orders issued as a result of the on-site visit and the final Licensing Survey Form will arrive by certified mail to the licensee within 3 weeks of this exit conference (see Correction Order form HE-01239-03). If you have any questions about the Licensing Survey Form or the survey results, please contact the Minnesota Department of Health, (651) 215-8703. After supervisory review, this form will be posted on the MDH website. General information about CLASS A Licensed-only Home Care Provider is also available on the MDH website: <http://www.health.state.mn.us>

Regulations can be viewed on the Internet: <http://www.revisor.leg.state.mn.us>

(Form Revision 5/05)



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7004 1160 0004 8714 3286

October 5, 2005

Larry Lindberg, Administrator
Midwest IV and Home Care Inc.
8400 Coral Sea St. Suite 100
Blaine, MN 55449

Re: Results of State Licensing Survey

Dear Mr. Lindberg:

The above agency was surveyed on May 25, 26, 27 and June 2, 2005 for the purpose of assessing compliance with state licensing regulations. State licensing deficiencies, if found, are delineated on the attached Minnesota Department of Health (MDH) correction order form. The correction order form should be signed and returned to this office when all orders are corrected. We urge you to review these orders carefully, item by item, and if you find that any of the orders are not in accordance with your understanding at the time of the exit conference following the survey, you should immediately contact me, or the RN Program Coordinator. If further clarification is necessary, I can arrange for an informal conference at which time your questions relating to the order(s) can be discussed.

A final version of the Licensing Survey Form is enclosed. This document will be posted on the MDH website.

Also attached is an optional Provider questionnaire, which is a self-mailer, which affords the provider with an opportunity to give feedback on the survey experience.

Please feel free to call our office with any questions at (651) 215-8703.

Sincerely,

Jean Johnston, Program Manager
Case Mix Review Program

cc: Steven Peterson, President Governing Body
Kelly Crawford, Minnesota Department of Human Services
Anoka County Social Services
Sherilyn Moe, Office of the Ombudsman
CMR File

CMR 3199 6/04



Class A Licensed-Only 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 A Licensed-Only Home Care Providers. Class A 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 with MDH nurses during an on-site regulatory visit.

During on-site visit/s, MDH nurses will interview staff, talk with clients and/or their representatives and make observations during home visits, 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 A Licensed-Only Home Care services. Completing this Licensing Survey Form in advance would 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. This form must be used in conjunction with a copy of the Class A Licensed-Only Home Care regulations. Any violations of the Class A licensing requirements are noted at the end of the survey form. **[This form is NOT intended to be used for Class A Licensees who are also certified to participate in the Medicare program].**

Name of Class A Licensee: MIDWEST IV AND HOME CARE INC
 HFID # (MDH internal use): 02851
 Date(s) of Survey: May 25, 26, 27, and June 2, 2005
 Project # (MDH internal use): QL02851011

| Indicators of Compliance | Outcomes Observed | Comments |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. The Provider accepts and retains clients for whom it can meet the needs. <ul style="list-style-type: none"> • MN Rules 4668.0050 • MN Rule 4668.0060 Subpart 3 • MN Rule 4668.0060 Subpart 4 • MN Rule 4668.0060 Subpart 5 • MN Rule 4668.0140 • MN Rule 4668.0180 Subpart 8 | <ul style="list-style-type: none"> • Clients are accepted based on the availability of staff, sufficient in qualifications and numbers, to adequately provide the services agreed to in the service agreement. • Service plans accurately describe the needs and services and contains all the required information. • Services agreed to are provided • Clients are provided referral assistance. | Annual Licensing Survey <input type="checkbox"/> Met <input checked="" type="checkbox"/> Correction Order(s) issued <input checked="" type="checkbox"/> Education Provided Follow-up Survey # _____ <input type="checkbox"/> Met <input type="checkbox"/> Not Met <input type="checkbox"/> New Correction Order(s) issued <input type="checkbox"/> Education Provided |
| 2. The Provider promotes client rights. <ul style="list-style-type: none"> • MN Statute §144A.44 • MN Rule 4668.0030 | <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. | Annual Licensing Survey <input type="checkbox"/> Met <input checked="" type="checkbox"/> Correction Order(s) issued <input checked="" type="checkbox"/> Education |

| Indicators of Compliance | Outcomes Observed | Comments |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> • MN Rule 4668.0040 Indicator of Compliance #2 continued: <ul style="list-style-type: none"> • MN Rule 4668.0170 | | Provided Follow-up Survey # _____ <input type="checkbox"/> Met <input type="checkbox"/> Not Met <input type="checkbox"/> New Correction Order(s) issued <input type="checkbox"/> Education Provided |
| 3. The Provider promotes and protects each client's safety, property, and well-being. <ul style="list-style-type: none"> • MN Rule 4668.0035 • MN Statutes §144A.46 Subdivision 5 • MN Statute §626.556 • MN Statutes §626.557 • MN Statute §626.5572 | <ul style="list-style-type: none"> • Client's person, finances and property are safe and secure. • All criminal background checks are performed as required. • Clients are free from maltreatment. • There is a system for reporting and investigating any incidents of maltreatment. • Maltreatment assessments and prevention plans are accurate and current. | Annual Licensing Survey <input type="checkbox"/> Met <input checked="" type="checkbox"/> Correction Order(s) issued <input checked="" type="checkbox"/> Education Provided Follow-up Survey # _____ <input type="checkbox"/> Met <input type="checkbox"/> Not Met <input type="checkbox"/> New Correction Order(s) issued <input type="checkbox"/> Education Provided |
| 4. The Provider maintains and protects client records. <ul style="list-style-type: none"> • MN Rule 4668.0160 [Note to MDH staff: See Informational Bulletin 99-11 for Class A variance for Electronically Transmitted Orders] | <ul style="list-style-type: none"> • Client records are maintained and retained securely. • Client records contain all required documentation. • Client information is released only to appropriate parties. • Discharge summaries are available upon request. | Annual Licensing Survey <input type="checkbox"/> Met <input checked="" type="checkbox"/> Correction Order(s) issued <input checked="" type="checkbox"/> Education Provided Follow-up Survey # _____ <input type="checkbox"/> Met <input type="checkbox"/> Not Met <input type="checkbox"/> New Correction Order(s) issued <input type="checkbox"/> Education Provided |
| 5. The Provider employs and/or contracts with qualified and trained staff. <ul style="list-style-type: none"> • MN Rule 4668.0060 subpart 1 • MN Rule 4668.0065 • MN Rule 4668.0070 • MN Rule 4668.0075 • MN Rule 4668.0080 • MN Rule 4668.0100 [For subpart 2 see indicator #6] Indicator of Compliance #5 | <ul style="list-style-type: none"> • Staff, employed or contracted, have received all the required training. • Staff, employed or contracted, meet the Tuberculosis and all other infection control guidelines. • Personnel records are maintained and retained. • Licensee and all staff have received the required Orientation to Home Care. • Staff, employed or contracted, are registered and licensed as required by law. • Documentation of medication | Annual Licensing Survey <input type="checkbox"/> Met <input checked="" type="checkbox"/> Correction Order(s) issued <input checked="" type="checkbox"/> Education Provided Follow-up Survey # _____ <input type="checkbox"/> Met <input type="checkbox"/> Not Met <input type="checkbox"/> New Correction Order(s) issued <input type="checkbox"/> Education Provided |

| Indicators of Compliance | Outcomes Observed | Comments |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>continued:</p> <ul style="list-style-type: none"> • MN Rule 4668.0120 • MN Rule 4668.0130 • MN Statute 144A.45 Subdivision 5 • MN Statute 144A.461 <p>[Note to MDH staff: See Informational Bulletin 99-7 for Class A variance in a Housing With Services setting]</p> | <p>administration procedures are available.</p> <ul style="list-style-type: none"> • Supervision is provided as required. | |
| <p>6. The Provider obtains and keeps current all medication and treatment orders [if applicable].</p> <ul style="list-style-type: none"> • MN Rule 4668.0150 • MN Rule 4668.0100 [Subpart 2] <p>[Note to MDH staff: See Informational Bulletin 99-7 and 04-12 for Class A variance in a Housing With Services setting with regards to medication administration, storage and disposition.]</p> | <ul style="list-style-type: none"> • Medications and treatments administered are ordered by a prescriber. • Medications are properly labeled. • Medications and treatments are administered as prescribed. • Medications and treatments administered are documented. • Medications and treatments are renewed at least every three months. | <p>Annual Licensing Survey</p> <p>___ Not Applicable</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>___ Not Applicable</p> <p>___ Met</p> <p>___ Not Met</p> <p>___ New Correction Order(s) issued</p> <p>___ Education Provided</p> |
| <p>7. The Provider is licensed and provides services in accordance with the license.</p> <ul style="list-style-type: none"> • MN Rule 4668.0008 subpart 3 • MN Rule 4668.0012 subpart 8 • MN Rule 4668.0012 Subpart 17 • MN Rule 4668.0019 • MN Rule 4668.0060 subpart 2 • MN Rule 4668.0060 subpart 6 • MN Rule 4668.0180 subpart 2 • MN Rule 4668.0180 subpart 3 <p>Indicator of Compliance #7 continued:</p> | <ul style="list-style-type: none"> • Language requiring compliance with Home Care statutes and rules is included in contracts for contracted services. • License is obtained, displayed, and renewed. • Licensee’s advertisements accurately reflects services available. • Licensee provides services within the scope of the license. • Licensee has a contact person available when a para-professional is working. | <p>Annual Licensing Survey</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>___ Met</p> <p>___ Not Met</p> <p>___ New Correction Order(s) issued</p> <p>___ Education Provided</p> |

| Indicators of Compliance | Outcomes Observed | Comments |
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| <ul style="list-style-type: none"> • MN Rule 4668.0180 subpart 4 • MN Rule 4668.0180 subpart 5 • MN Rule 4668.0180 subpart 6 • MN Rule 4668.0180 subpart 7 • MN Rule 4668.0180 subpart 9 • MN Statute 144A.47 <p>[Note to MDH staff: Review 17 point contract if services provided in a Housing With Services]</p> | | |

Please note: Although the focus of the licensing survey is the regulations listed in the Indicators of Compliance boxes above, other violations may be cited depending on what systems a provider has or fails to have in place and/or the severity of a violation. Also, the results of the focused licensing survey may result in an expanded survey where additional interviews, observations, and documentation reviews are conducted.

SURVEY RESULTS:

For Indicators of Compliance not met and/or education provided, list the number, regulation number, and example(s) of deficient practice noted:

| Correction Order Number | Indicator of Compliance Number | Rule/ Statute Referenced | Education provided | Statement(s) of Deficient Practice/Education: |
|-------------------------|--------------------------------|-----------------------------------------------------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | 2 | MN Rule 4668.0030 Subpart 2, Notification of Client | X | <p>Based on record reviews, and interviews, the licensee failed to ensure two of five clients [#4 and #5] received a copy of the home care bill of rights. The findings include:</p> <p>Interviews with employee (B) on May 27, 2005 and employees (D), (E), and (F) on May 26, 2005 and a review of the clinical records for clients #4 and #5 indicated that employee (B) provided home care services to client #4 on May 12, 2005 and client #5 on May 24, 2005. Client #4 and #5s' records did not contain any documentation to reflect that the clients had received a copy of the Home Care Bill of Rights. When interviewed on May 26, 2005, employee (B) stated that she had not given client #4 and #5 a copy of the Home Care Bill of Rights. Employees (D) and (F) stated that they were not aware that home care</p> |

Class A Licensed-Only Survey Report
Page 5 of 14

| Correction Order Number | Indicator of Compliance Number | Rule/ Statute Referenced | Education provided | Statement(s) of Deficient Practice/Education: |
|-------------------------|--------------------------------|---------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | | | <p>clients who received home care services were to receive a copy of the Home Care Bill of Rights.</p> <p><u>Education:</u> Provided</p> |
| 2 | 2 | MN Rule 4668.0040 Subp. 2 Informing clients | X | <p>Based on record reviews, and interviews, the licensee failed to ensure that two of five clients [#4 and #5] were given a written notice of the licensee's complaint procedure and failed to assure that three of three clients (#1, #2 and #3) received the complete complaint procedure. The findings include:</p> <p>Interviews with employee (B) on May 27, 2005 and employees (D), (E), and (F) on May 26, 2005 and a review of the clinical records for clients #4 and #5 indicated that employee (B) had provided home care services to client #4 on May 12, 2005 and client #5 on May 24, 2005. When interviewed on May 26, 2005, employee (B) stated that she did not give client #4 and #5 a copy of the complaint procedure. Employees (D) and (F) stated that they were not aware that home care clients who received home care services were to receive a copy of the licensee's complaint procedure.</p> <p>Client #1 was admitted in January 2001, client # 2 was admitted in March 2004 and client #3 was admitted in May 2003. All three clients record contained a signed Client Consent Form, which acknowledged receipt of a "grievance" form. A copy of this form, titled "PATIENT CONCERNS/ GRIEVANCES FORM," was reviewed during an interview with employee #D on May 26, 2005. This form did not include the right to complain to the Minnesota Department of Health's Office of Health Facilities Complaints.</p> <p><u>Education:</u> Provided</p> |

| Correction Order Number | Indicator of Compliance Number | Rule/ Statute Referenced | Education provided | Statement(s) of Deficient Practice/Education: |
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| 3 | 5 | MN Rule 4668.0065 Subp. 1 Tuberculosis screening | X | <p>Based on personnel file review, and staff interview, the licensee failed to ensure that one of two employees (Employee B) who provide direct care had Tuberculosis (TB) screening prior to working with clients. Findings include:</p> <p>Employee B's personnel file indicated that she was employed on February 5, 2005 and had been providing direct care to clients. When reviewed, employee B's personnel file did not contain evidence of a Mantoux test. When interviewed on May 25, 2005 at 3:40 p.m., employee D stated that TB screening had not been done on employee B.</p> <p><u>Education:</u> Provided</p> |
| 4 | 5 | MN Rule 4668.0075 Subp. 1 Orientation | X | <p>Based on record review and interview the licensee failed to provide orientation to the home care requirements for one of four employees (D) reviewed. The findings include:</p> <p>Employee D began employment at the agency on December 11, 2000. Employee D's record lacked documentation of orientation to the home care requirements. When interviewed, employee D stated she did not have an orientation to the home care requirements since start of employment in 2000.</p> <p><u>Education:</u> Provided</p> |
| 5 | 5 | MN Rule 4668.0075 Subp. 2 Content | X | <p>Based on review of personnel file, and staff interview, the licensee failed to ensure that one of four employees (employee A) received all required areas in the orientation to the home care requirements. The findings include:</p> <p>Employee A's personnel file indicated a hire date of April 30, 2000 and that she received orientation to the Home Care Bill of Rights and the Vulnerable Adults Act. Employee</p> |

Class A Licensed-Only Survey Report
Page 7 of 14

| Correction Order Number | Indicator of Compliance Number | Rule/ Statute Referenced | Education provided | Statement(s) of Deficient Practice/Education: |
|-------------------------|--------------------------------|----------------------------------------------|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | | | <p>A's file did not include evidence of the following required orientation to home care areas: overview of the Home Care Rule and statutes, handling of emergencies and use of emergency services; handling of clients' complaints and reporting of complaints to the Office of Health Facility Complaints; and services of the Ombudsman for Older Minnesotans. When interviewed on June 2, 2005, employee (D) verified that employee (A) had not completed all of the orientation to home care requirements.</p> <p><u>Education:</u> Provided</p> |
| 6 | 1 | MN Rule 4668.0140 Subp. 1 Service agreements | X | <p>Based on record review, and interview, the licensee failed to enter into a written service agreement with the client in three of five clients' (#1, #4, #5) records reviewed. The findings include:</p> <p>Client #1 was admitted to the agency in January 2001. The client's record contained an unsigned service agreement and letter, dated April 9, 2004 to the client stating to sign and return the service agreement to Midwest IV. The record did not contain a signed Service Agreement. Employee E stated, on May 27, 2005, that there wasn't any other service agreement in this client's record. On May 26, 2005 employee C stated that the service agreement had been sent to the client for signature and apparently had not been returned.</p> <p>Interviews with employee (B) on May 27, 2005 and employees (D), (E), and (F) on May 26, 2005 and a review of the clinical records for clients #4 and #5 indicated that employee (B) had provided home care services to client #4 on May 12, 2005 and client #5 on May 24, 2005. The clinical record, when reviewed on May 26, 2005, did not contain service agreements. When interviewed on May 26, 2005, employee (B) stated that service agreements were not done for client's #4 and</p> |

| Correction Order Number | Indicator of Compliance Number | Rule/ Statute Referenced | Education provided | Statement(s) of Deficient Practice/Education: |
|-------------------------|--------------------------------|----------------------------------------------------------|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | | | <p>#5. Employees (D) and (F) stated that they were not aware that service agreements were required for home care clients who received home care services.</p> <p><u>Education:</u> Provided</p> |
| 7 | 1 | MN Rule 4668.0140 Subp. 2 Content of Service Agreement | X | <p>Based on record review, and interview, the licensee failed to include all the required parts to the service agreement for two of two (#2, #3) clients reviewed. The findings include:</p> <p>Client #3's service agreement, dated June 11, 2003 lacked the identification of the persons or categories of persons who were to provide the services in addition to a plan for contingency action for non-essential services. Interview of the agency's registered nurse on May 26, 2005, confirmed the above items were left blank on the Service Agreement.</p> <p>Client # 2's service agreement dated March 25, 2005 listed "RN (registered nurse) visits" as a service. The area to indicate the frequency of visits was noted to be blank. The area for the contingency plan for non-essential services was noted to be blank. Interview with the licensee's registered nurse confirmed the above items were left blank on the service agreement.</p> <p><u>Education:</u> Provided</p> |
| 8 | 6 | MN Rule 4668.0150 Subp. 2 Medication and treatment order | X | <p>Based on record review, and interview, the licensee failed to ensure that the registered nurse administered treatments as ordered by the physician for two of four clients' (#2) (#3) records reviewed. The findings include:</p> <p>Client #3 was admitted in May 2003 with physician's orders dated April 4, 2004 which indicated that client #3 was to receive skilled nursing visits once a month for infusion therapy, monitoring of temperature, pulse, respirations (TPR) and blood pressure (BP), assessment of the client's response to therapy,</p> |

| Correction Order Number | Indicator of Compliance Number | Rule/ Statute Referenced | Education provided | Statement(s) of Deficient Practice/Education: |
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| | | | | <p>and removal of the catheter when the medication dose was completed. The order indicated that client #3 could self-administer the medication. Prescription orders dated June 14, 2004 stated, “ Infuse (medication) entire contents (1gm/1000ml) IV (intravenous) every four weeks” and estimated the approximate infusion time as 120 minutes. Review of client #3’s patient visit log, dated June 14, 2004 and July 15, 2004, indicated that the area to document the TPR and BP, on both dates were left blank and the response to treatment was not addressed on patient visit log dated June 14, 2004. Interview with employee (C) on May 26 and June 2, 2005, indicated that she started the peripheral IV of the (medication) infusion, left forty-five minutes after the infusion had been started and stated “the client would disconnect the IV by himself.” Employee (C) indicated that client #3 often refused vital signs and employee (C) would document “ REF or refuses.” When employee (C) was asked about her physician ordered assessment of client #3’s response to therapy, she stated “it takes up to a week for the medication to take effect” and she would document on the patient visit log if a change or increased weakness was noted.” However, employee (C) left before the infusion was completed and was not present to do an assessment of the IV site or how client #3 tolerated the infusion. When employee (C) was asked about removal of the catheter of the IV when the infusion was completed, she stated that the client discontinued the catheter, and verified that the physician’s order did not clearly state that the client could discontinue the IV catheter.</p> <p>Client #2 was admitted on March 9, 2004 and had a physician ordered Plan of Treatment signed and dated June 15, 2004, which included a weekly assessment of client #2’s temperature, pulse, respiration, blood pressure and weight. When reviewed, client #2’s</p> |

| Correction Order Number | Indicator of Compliance Number | Rule/ Statute Referenced | Education provided | Statement(s) of Deficient Practice/Education: |
|-------------------------|--------------------------------|------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | | | <p>record did not contain documentation to indicate that weights were done on October 10, 2004; October 26, 2004; October 26, November 19, 2004; November 23, 2004; December 21, 2004; January 3, 2005; January 12, 2005; January 18, 2005; January 26, 2005; February 2, 2005; February 8, 2005; February 11, 2005; February 22, 2005; March 11, 2005; March 16, 2005; March 23, 2005; and April 20, 2005.</p> <p>The record did not contain documentation that pulse was assessed on October 26, 2004; October 30, 2004; November 3, 2004; November 16, 2004; November 19, 2004; November 23, 2004; December 21, 2004; January 12, 2005; January 18, 2005; January 26, 2005; February 8, 2005; and February 22, 2005.</p> <p>The record did not contain documentation that blood pressure was assessed on October 24, 2004; November 23, 2004; December 21, 2004 and February 22, 2005. When interviewed on June 2, 2005, employee (C) verified that the assessments were lacking.</p> <p><u>Education:</u> Provided</p> |
| 9 | 6 | MN Rule 4668.0150 Subp. 6 Renewal of orders | X | <p>Based on record review, and interview, the licensee failed to ensure that all orders were renewed at least every three months for three of three clients' (#1, #2, and #3) records reviewed. The findings include:</p> <p>Client #1 was admitted to the agency on January 4, 2001. The last treatment orders, was signed by the physician were dated March 24, 2004. The treatment orders were to include a skilled nursing visit one time a week for dressing changes and monitoring of client's cardiopulmonary status, nutritional status, temperature, pulse, respiration and blood pressure, response to therapy and administration of infusion therapy as ordered. On May 26, 2005 the registered nurse stated</p> |

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| | | | | <p>she was unaware that the treatment orders needed to be renewed every three months.</p> <p>Client #2 was admitted in March 2004. The client record included treatment orders signed on June 15, 2004 by a physician. There were no physician signed orders in the client's record after June 15, 2004. The record contained orders for home care that were electronically signed on October 22, 2004 and May 13, 2005 by a registered nurse (RN). When interviewed on May 26, 2005, employee C stated she was unaware of the need to renew treatment orders every three months.</p> <p>Client #3 was admitted to home care in May 2003 and discharged in October 2004. The physician signed the last treatment order April 4, 2004. The record did not contain any further treatment orders by the physician. When interviewed on May 26, 2005 employee (C) stated she was unaware of the need to renew orders every three months.</p> <p><u>Education:</u> Provided</p> |
| 10 | 4 | MN Rule 4668.0160 Subp. 5 Form of entries | X | <p>Based on record review, and interview, the licensee failed to have entries in the client records that were dated and authenticated with the name and title of the person making the entry in two of two clients' (#1, #2) records reviewed. The findings include:</p> <p>Client #1 was admitted to the agency in January 2001. The record contained a "Nutrition Screening Form" which indicated that the client should be referred to the dietitian within 72 hours if any of the areas were checked. The screening form contained several areas that were checked. The form lacked the date and authentication of the person making the entry. On May 31, 2005, the registered nurse stated she did not know the date or the person who made the entry in the record.</p> |

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| | | | | <p>Client #2's record had a nutritional screening form that was completed but without a date or the name and title of the person completing the form.</p> <p><u>Education:</u> Provided</p> |
| 11 | 7 | MN Rule 4668.0180 Subp. 9 Quality Assurance | X | <p>Based on interview, the licensee failed to establish and implement a quality assurance plan. The findings include:</p> <p>On May 27, 2005, employee D stated she was the Quality Assurance Coordinator for the Midwest Holdings Company. She stated that she does not have a Quality Assurance Plan for the Class A Home Care division of the company.</p> <p><u>Education:</u> Provided</p> |
| 12 | 3 | MN Statute §144A.46, Subd. 5(b) Prior criminal conviction | X | <p>Based on record review, and interview, the licensee failed to perform a criminal background study for three of four clients' (A, B, and D) records reviewed. The findings include:</p> <p>Employee D began employment at the agency on December 11, 2000. Employee D's record lacked evidence of a criminal background check. When interviewed, on May 25, 2005, employee D confirmed she had not had a criminal background check since start of employment in 2000.</p> <p>Personnel file review indicated that employee A was hired on April 30, 2000 and employee B was hired on February 2, 2005. The personnel files did not contain criminal background studies. When interviewed on May 25, 2005, employee D verified that criminal background studies had not been done on employees A and B.</p> <p><u>Education:</u> Provided</p> |

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| 13 | 3 | MN Statute §626.557 Subd. 14 (b) Abuse prevention plans. | X | <p>Based on record review, and interview, the licensee failed to develop an individual abuse prevention plan for five of five clients' (#1, #2, #3, #4, and #5) records reviewed. The findings include:</p> <p>Client #1 was admitted to the agency in January 2001. The Initial Patient Assessment dated January 8, 2001 had "no" for the "Abuse/Neglect Assessment." The Initial Patient Assessment, dated March 16, 2004, lacked evidence of a vulnerable adult assessment. When interviewed on May 26, 2005, the registered nurse stated she did not understand the vulnerable adult assessment since most of her clients were elderly and stated she had not completed the form.</p> <p>Client #3's start of care was May 12, 2003 and was discharged from the agency on October 4, 2004. The client's record lacked documentation of a vulnerable adult assessment and plan. Interview with the agency's registered nurse indicated that she did not understand this assessment since most of her clients were alert and not elderly. The registered nurse directed the reviewer to the initial patient assessment form dated March 12, 2004, which lacked an abuse/prevention plan. The abuse neglect assessment item on the monthly visit log was left blank for the dates of May 11, 2004, June 14, 2004 and July 15, 2004.</p> <p>Interviews with employee (B) on May 27, 2005 and employees (D), (E), and (F) on May 26, 2005 and a review of the clinical records for clients #4 and #5 indicated that employee (B) had provided blood transfusion home care services for client #4 on May 12, 2005 and client #5 on May 24, 2005. The clinical record, when reviewed on May 26, 2005, had an area for Vulnerable Adult [VA] assessment but was noted to be blank. When interviewed on May 26, 2005, employee (B) verified that she did not do a VA assessment.</p> |

Class A Licensed-Only Survey Report
Page 14 of 14

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| | | | | <p>Client #2 was admitted in March 2004 and had an initial assessment done on “2/03” [unclear if this was February 3, 2004] in which the area for the required Vulnerable Adult (VA) assessment was noted to be blank. The weekly visit logs dated October 13, 2004 to April 29, 2005 were also noted to have an area for the VA assessment and were observed to be blank. The infusion nursing care plan dated March 9, 2004 did not contain any abuse prevention plans.</p> <p><u>Education:</u> Provided</p> |
| | 3 | MN Rule 4668.0070 Subp. 3 Job descriptions | X | <p><u>Education:</u> Provided</p> |

A draft copy of this completed form was left with Larry Lindberg, CEO; Jam Palmer, QA Coordinator; Jeff Thibault, Sue Krtinich, RN and Greg Beaudoin, RT at an exit conference on June 2, 2005. Any correction orders issued as a result of the on-site visit and the final Licensing Survey Form will arrive by certified mail to the licensee within 3 weeks of this exit conference (see Correction Order form HE-01239-03). If you have any questions about the Licensing Survey Form or the survey results, please contact the Minnesota Department of Health, (651) 215-8703. After supervisory review, this form will be posted on the MDH website. General information about CLASS A Licensed-Only Home Care Provider is also available on the MDH website: <http://www.health.state.mn.us>

Regulations can be viewed on the Internet: <http://www.revisor.leg.state.mn.us>

(Form Revision 5/05)