



*Protecting, Maintaining and Improving the Health of Minnesotans*

Certified Mail # 7004 1160 0004 8714 3569

October 4, 2005

Christian Rivard, Administrator  
Adult Help & Companion Care  
4584 Cedar Lake Rd Suite 5  
St. Louis Park, MN 55416

Re: Results of State Licensing Survey

Dear Mr. Rivard:

The above agency was surveyed on June 16, 17, 20 and 22, 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

Enclosures

cc: Christian Rivard, President Governing Body  
Kelly Crawford, Minnesota Department of Human Services  
Hennepin 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: ADULT HELP & COMPANION CARE  
 HFID # (MDH internal use): 03855  
 Date(s) of Survey: June 16, 17, 20 and 22, 2005  
 Project # (MDH internal use): QL03855008

Indicators of Compliance	Outcomes Observed	Comments
1. The Provider accepts and retains clients for whom it can meet the needs.  • 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"> <li>• 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.</li> <li>• Service plans accurately describe the needs and services and contains all the required information.</li> <li>• Services agreed to are provided</li> <li>• Clients are provided referral assistance.</li> </ul>	Annual Licensing Survey ___ Met <u>X</u> Correction Order(s) issued <u>X</u> Education Provided  Follow-up Survey # _____ ___ Met ___ Not Met ___ New Correction Order(s) issued ___ Education Provided
2. The Provider promotes client rights.  • MN Statute §144A.44 • MN Rule 4668.0030	<ul style="list-style-type: none"> <li>• Clients' are aware of and have their rights honored.</li> <li>• Clients' are informed of and afforded the right to file a complaint.</li> </ul>	Annual Licensing Survey ___ Met <u>X</u> Correction Order(s) issued <u>X</u> Education

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

Indicators of Compliance	Outcomes Observed	Comments
<p>continued:</p> <ul style="list-style-type: none"> <li>• MN Rule 4668.0120</li> <li>• MN Rule 4668.0130</li> <li>• MN Statute 144A.45 Subdivision 5</li> <li>• MN Statute 144A.461</li> </ul> <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"> <li>• Supervision is provided as required.</li> </ul>	
<p>6. The Provider obtains and keeps current all medication and treatment orders [if applicable].</p> <ul style="list-style-type: none"> <li>• MN Rule 4668.0150</li> <li>• MN Rule 4668.0100 [Subpart 2]</li> </ul> <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"> <li>• Medications and treatments administered are ordered by a prescriber.</li> <li>• Medications are properly labeled.</li> <li>• Medications and treatments are administered as prescribed.</li> <li>• Medications and treatments administered are documented.</li> <li>• Medications and treatments are renewed at least every three months.</li> </ul>	<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"> <li>• MN Rule 4668.0008 subpart 3</li> <li>• MN Rule 4668.0012 subpart 8</li> <li>• MN Rule 4668.0012 Subpart 17</li> <li>• MN Rule 4668.0019</li> <li>• MN Rule 4668.0060 subpart 2</li> <li>• MN Rule 4668.0060 subpart 6</li> <li>• MN Rule 4668.0180 subpart 2</li> <li>• MN Rule 4668.0180 subpart 3</li> </ul> <p>Indicator of Compliance #7 continued:</p>	<ul style="list-style-type: none"> <li>• Language requiring compliance with Home Care statutes and rules is included in contracts for contracted services.</li> <li>• License is obtained, displayed, and renewed.</li> <li>• Licensee’s advertisements accurately reflects services available.</li> <li>• Licensee provides services within the scope of the license.</li> <li>• Licensee has a contact person available when a para-professional is working.</li> </ul>	<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
<ul style="list-style-type: none"> <li>• MN Rule 4668.0180 subpart 4</li> <li>• MN Rule 4668.0180 subpart 5</li> <li>• MN Rule 4668.0180 subpart 6</li> <li>• MN Rule 4668.0180 subpart 7</li> <li>• MN Rule 4668.0180 subpart 9</li> <li>• MN Statute 144A.47</li> </ul> <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 4668.0040 Subp. 1 Complaint procedure	X	<p>Based on record review and interview, the licensee failed to establish in writing a system for receiving, investigating and resolving complaints for three of three clients (#1, #2 and #3) reviewed. The findings include:</p> <p>Client #1 was admitted September 1, 2004, client #2 was admitted June 01, 2002, and client # 3 was admitted on December 1, 2003. During a review of these clients' records there was no evidence of the client or family receiving a written complaint procedure. During interview on June 17, 2005 the owner stated he was not aware of the need to have a separate complaint procedure. The owner indicated that he</p>

Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				<p>thought the information on the Home Care Bill of Rights was adequate.</p> <p><b><u>Education:</u></b> Provided</p>
2	5	MN Rule 4668.0065 Subp. 1 Tuberculosis screening	X	<p>Based on record review and interview, the licensee failed to ensure that all employees had a screening for tuberculosis before having direct contact with clients for five of five employees (#1, #2, #3, #4 and #5) reviewed. The findings include:</p> <p>Employee #1 was hired August 2001, employee #2 started the business in February 2001, employee #3 was hired May 2001, employee #4 was hired June 2002 and employee #5 was hired May 12, 2005. There was no evidence that tuberculin testing had been completed for any of the above-mentioned employees. When interviewed on June 17, 2005 the owner verified that tuberculosis screening had not been completed for him or any of the employees mentioned above, prior to direct contact with clients. The owner verified that he performed home health aide tasks in the clients' homes when other home health aides were unable to work.</p> <p><b><u>Education:</u></b> Provided</p>
3	5	MN Rule 4668.0065 Subp. 3 Infection control in-service training	X	<p>Based on record review and interview, the licensee failed to ensure that for each twelve months of employment, employees who have contact with clients completed training about infection control techniques used in the home for five of five (#1, #2, #3, #4 and #5) employees reviewed. The findings include:</p> <p>Employee #1 was hired August 2001, employee #2 started the business in February 2001, employee #3 was hired</p>

Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				<p>May 2001, employee #4 was hired June 2002 and employee #5 was hired May 12, 2005. There was no evidence that infection control in-services had been completed. When interviewed on June 17, 2005, the owner verified that infection control in-services had not been completed within the past 12 months for him, or any of the employees reviewed who had direct client contact.</p> <p><b><u>Education:</u></b> Provided</p>
4	5	MN Rule 4668.0070 Subp. 2 Personnel records	X	<p>Based on record review and interview, the licensee failed to maintain a record for five of five (#1, #2, #3, #4 and #5) employees reviewed. The findings include:</p> <p>Employee #1 was hired August 2001, employee #2 started the business in February 2001, employee #3 was hired May 2001, employee #4 was hired June 2002 and employee #5 was hired May 12, 2005. During review of records there were no individual employee files for the above-mentioned employees. When interviewed on June 17, 2005, the owner verified that he did not keep a separate file for each employee.</p> <p><b><u>Education:</u></b> Provided</p>
5	5	MN Rule 4668.0070 Subp. 3 Job descriptions	X	<p>Based on record review and interview, the licensee failed to maintain a current job description, including qualifications, responsibilities, and identification of supervisors for five of five (#1, #2, #3, #4 and #5) employees reviewed. The findings include:</p> <p>Employee #1, a licensed practical nurse was hired August 2001, employee #2, owner/home health aide started the business in February 2001, employee #3, a registered nurse was hired May</p>

Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				<p>2001, employee #4, a home health aide was hired June 2002 and employee #5, a home health aide was hired May 12, 2005. There were no individual employee job descriptions for any of the above-mentioned employees. When interviewed on June 17, 2005, the owner verified that he did not have job descriptions for the different positions.</p> <p><b><u>Education:</u></b> Provided</p>
6	5	MN Rule 4668.0075 Subp. 1 Orientation	X	<p>Based on record review and interview, the licensee failed to ensure that two of five employees (#4 and #5) who provided direct care to clients completed an orientation to the home care requirements. The findings include:</p> <p>Employee #4 was hired on June 2002 and employee #5 was hired on May 12, 2005 to provide direct care to clients. There was no evidence that employees #4 and #5 had completed an orientation to home care requirements. When interviewed on June 17, 2005, the owner verified that employees #4 and #5 had not completed an orientation to the home care requirements as required.</p> <p><b><u>Education:</u></b> Provided</p>
7	5	MN Rule 4668.0075 Subp. 4 Verification and documentation	X	<p>Based on record review and interview, the licensee failed to ensure documentation of orientation to the home care requirements was retained for three of three employees (#1, #2, #3) reviewed. The findings include:</p> <p>Employee #1 was hired August 2001, employee #2 started the business in February 2001, and employee #3 was hired May 2001. There was no evidence that they had completed an orientation to the home care requirements prior to providing direct care. When</p>



Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				<p>interviewed on June 17, 2005, the owner stated that he had orientation to home care by reading the Guide to Home Care and that two of his nurses, employees #1 and #3 had worked for other home care agencies and likely had completed an orientation to home care at these agencies. The owner was unable to produce documentation to verify this training.</p> <p><b><u>Education:</u></b> Provided</p>
8	5	MN Rule 4668.0100 Subp. 2 Administration of medications	X	<p>Based on record review and interview, the licensee failed to ensure that each home health aide who administered medications had been instructed by a registered nurse in the procedure for medication administration prior to administering medications; failed to ensure there was a procedure written by a registered nurse for each medication being administered by a home health aide; and did not have evidence of home health aide competency evaluation for following the client specific written procedures for three of three (#2, #4, and #5) home health aides who administered medications to clients. The findings include:</p> <p>The records for clients #1, #2 and #3 indicated that the home health aides were administering medications. Employee #2 started the business in February 2001 and stated that he provided cares when employees were unable to work; employee #4 was hired June 2002 and provided cares including medication administration to client #2; and employee #5 was hired May 12, 2005 and provided cares including medication administration to client #1. There was no evidence that the home health aides were instructed by the registered nurse on medication</p>

Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				<p>administration. There was a procedure, written by the licensed practical nurse, for medication administration in the record for client #1 and a procedure, written by the owner, a home health aide, for medication administration, in the records for clients #2 and #3. There was no evidence of competency evaluations for medication administration for employees #2, #4, and #5. During an interview with the owner on June 17, 2005, he confirmed that the medication administration procedures had not been written by a registered nurse nor was there a demonstration of competency to the registered nurse of the home health aides' ability to perform medication administration.</p> <p><b><u>Education:</u></b> Provided</p>
9	5	MN Rule 4668.0100 Subp. 5 Qualifications for persons who perform home health aide tasks	X	<p>Based on record review and interview, the licensee failed to ensure that three of three (#2, #4 and #5) home health aides were qualified to perform home health aide tasks. The findings include:</p> <p>Employees #2, #4, and #5 performed home health aide tasks. There was no evidence of training and competency evaluations for these employees. During interview on June 17, 2005 the owner stated that employees #2, #4, and #5 had not received the required training and competency evaluation.</p> <p><b><u>Education:</u></b> Provided</p>
10	5	MN Rule 4668.0100 Subp. 6 In-service training and demonstration of competence	X	<p>Based on record review and interview, the licensee failed to ensure that for each twelve months of employment, each person who performed home health aide tasks completed at least eight hours of inservice training in topics relevant to the provision of home care services for</p>

Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				<p>three of three (#2, #4, #5) home health aides reviewed. The findings include:</p> <p>Employee #1 was hired August 2001, employee #2 started the business in February 2001, employee #3 was hired May 2001, employee #4 was hired June 2002 and employee #5 was hired May 12, 2005. There was no documentation of eight hours of inservice training for each 12 twelve months of employment for the above-mentioned employees. When interviewed on June 17, 2005 the owner stated that he had no inservice records for any of his employees or himself.</p> <p><b><u>Education:</u></b> Provided</p>
11	5	MN Rule 4668.0100 Subp. 9 Periodic supervision of home health aide tasks	X	<p>Based on record review and staff interview the licensee failed to have a registered nurse (RN) supervise home health aides to assure work was being performed adequately for three of three (#1, #2 and #3) clients' records reviewed. The findings include:</p> <p>Client #1 was admitted September 1, 2004, client #2 was admitted June 01, 2002, and client #3 was admitted on December 1, 2003. During record review there was no documentation in any of the clients records that established an initial 14 day supervisory visit was made nor was there documentation that the 60 day supervisory visits were made. During interview with the owner on June 17, 2005 he agreed that the registered nurse was not making supervisory visits of the home health aides. He stated that the licensed practical nurse visited client #1 every two weeks and that the registered nurse visited client #2 every week but these visits were not supervisory visits of the home health aides.</p>

Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				<b><u>Education:</u></b> Provided
12	5	MN Rule 4668.0130 Subp. 3 Competency evaluation	X	<p>Based on record review and interview, the licensee failed to have a registered nurse administer competency evaluation tests on three of three (#2, #4, #5) employees providing home health aide tasks.</p> <p>Findings include:</p> <p>Employee #2 started the business in February 2001 and stated that he provided cares when employees were unable to work; employee #4 was hired June 2002 and provided cares including medication administration to client # 2; and employee #5 was hired May 12, 2005 and provided cares including medication administration to client #1. During review of employee files it was determined that competency evaluation tests were not completed on any of the employees reviewed. During interview with owner on June 17, 2005 he verified that there was no documentation of competency evaluation tests.</p> <p><b><u>Education:</u></b> Provided</p>
13	1	MN Rule 4668.0140 Subp. 1 Service agreements	X	<p>Based on record review and interview, the licensee failed to have written service agreements for three of three (#1, #2 and #3) clients' records reviewed. The findings include:</p> <p>Client #1 was admitted September 1, 2004, client #2 was admitted June 01, 2002, and client # 3 was admitted on December 1, 2003. A review of client #1, #2, and #3s' records did not include service agreements. During interview on June 17, 2005, the owner verified that there were no written service agreements for the above-mentioned clients. During a home visit with client</p>

Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				<p>#1, employee #1 stated that there was no written service agreement kept at the client's home, but stated that she had written a care plan that did not contain all components of a service agreement and was not signed by the client or their representative. During a home visit with client #2, employee #4 stated there was no written service agreement at the home indicating what services the client was to receive.</p> <p><b><u>Education:</u></b> Provided</p>
14	6	MN Rule 4668.0150 Subp. 6 Renewal of orders	X	<p>Based on record review and interview, the licensee failed to obtain a renewal of physician orders at least every three months for two of two (#1 and #3) clients reviewed. Findings include:</p> <p>During review of client #1's record, there were physician orders for medications to be given dated November 05, 2004, but no evidence of renewal of these orders every three months. Client record #2 had physician's orders for medications to be given dated September 21, 2004. There was no evidence of a renewal of these orders every three months. During an interview on June 17, 2005, the owner stated that they usually tried to have physician's orders for medications and treatments that agency staff were to provide. The owner confirmed that they had not been making sure to have renewals by the physician every three months.</p> <p><b><u>Education:</u></b> Provided</p>
15	4	MN Rule 4668.0160 Subp. 1 Maintenance of client record	X	<p>Based on record review and interview, the licensee failed to maintain a record for each client for three of three (#1, #2, #3) clients reviewed. The findings include:</p>

Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				<p>Client #1 was admitted September 1, 2004, client #2 was admitted June 01, 2002, and client # 3 was admitted on December 1, 2003. During review of these clients' information, several different file folders containing documents for each client were noted. Some of these folders were at the office and others were in the clients' home. Additional records for client #1 and #2 were in the possession of the nurse. Client #3, who had been discharged, had documents pertaining to him, in with another client's information. During an interview on June 17, 2005 the owner stated he did not have one place where the complete file for each client was kept.</p> <p><b><u>Education:</u></b> Provided</p>
16	4	MN Rule 4668.0160 Subp. 6 Content of client record	X	<p>Based on record review and interview, the licensee failed to maintain clients' records containing name, address, telephone number, date of birth, dates of the beginning and end of services, names addresses and telephone numbers of any responsible persons, a service agreement, medication and treatment orders, if any, notes summarizing each contact with the client, names addresses and telephone numbers of the clients medical providers, and a summary following the termination of services. The findings include:</p> <p>Client #1 was admitted September 1, 2004, client #2 was admitted June 01, 2002, and client # 3 was admitted on December 1, 2003. During review of these clients' records, we were unable to locate a definitive date for the beginning of service for any of these clients and on the discharge record (#3) the exact discharge date was not noted. There was</p>

Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				<p>no evidence of a service plan in any of these records, there were no notes summarizing each visit to the client and the discharge record did not have a discharge summary. During interview on June 17, 2005 the owner agreed that he did not have an individualized client record for each of these clients containing the start of service dates, a service agreement or notes summarizing each client visit. He stated that there is a sheet at each client's home where the home health aides are to initial by each service provided each day. During home visit to client #1 it was noted that the sheets to document services provided were rarely filled in by the home health aides. The licensed practical nurse interviewed at the home of client #1 verified that this was a problem to get the home health aides to document consistently. The owner also agreed there was no discharge summary documented for client #3.</p> <p><b><u>Education:</u></b> Provided</p>
17	3	MN Statute §144A.46 Subd. 5 Prior criminal convictions	X	<p>Based on record review and interview, the licensee failed to conduct criminal background studies for four of five (#1, #3, #4 and #5) employees who had direct client contact. The findings include:</p> <p>Employee #1 was hired August 2001, employee #3 was hired May 2001, employee #4 was hired June 2002 and employee #5 was hired May 12, 2005. There was no evidence of a required criminal background study having been completed for the above-mentioned employees by the Department of Human Services. During an interview with the owner on June 17, 2005, he stated that he had been using a private agency to do his background checks and had thought</p>

Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				that was acceptable.  <b><u>Education:</u></b> Provided
18	3	MN Statute §626.557 Subd. 14 (b) Abuse prevention plans	X	Based on record review and interview, the licensee failed to develop an individual abuse prevention plan for three of three (#1, #2 and #3) vulnerable adults receiving services. The findings include:  Client #1 was admitted June 9, 2004, client #2 was admitted June 01, 2002 and client # 3 was admitted on December 1, 2003. A review of client records indicated that client #3 had a vulnerable adult assessment done by a registered nurse on September 24, 2004 but there was no specific measures documented that were to be taken to minimize the risk of abuse to this client. There was no assessment of clients #1 and #3's susceptibility to abuse by others noted in their records. When interviewed on June 17, 2005 the owner agreed that there were no vulnerable adult assessments for clients #1 and #2 and that he did not have written abuse prevention plans in place.  <b><u>Education:</u></b> Provided
	2	MN Statute §144A.44 Subd. 1 Home Care Bill of Rights	X	<b><u>Education:</u></b> Provided
	4	MN Rule 4668.0160 Subp. 2 Security of client records	X	<b><u>Education:</u></b> Provided
	7	MN Rule 4668.0012 Subp. 17 Display of license	X	<b><u>Education:</u></b> Provided



A draft copy of this completed form was left with Christian Rivard at an exit conference on June 22, 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)