

Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7003 2260 0000 9971 7780

December 30, 2008

Eh Vue, Administrator Hope Home Health Care Services 749 Milton Street North St Paul, MN 55104

Re: Results of State Licensing Survey

Dear Mr. Vue:

The above agency was surveyed on October 22, 23, and 27, 2008, for the purpose of assessing compliance with state licensing regulations. State licensing deficiencies, if found, are delineated on the attached Minnesota Department of Health (MDH) correction order form. The correction order form should be signed and returned to this office when all orders are corrected. We urge you to review these orders carefully, item by item, and if you find that any of the orders are not in accordance with your understanding at the time of the exit conference following the survey, you should immediately contact me, or the RN Program Coordinator. If further clarification is necessary, I can arrange for an informal conference at which time your questions relating to the order(s) can be discussed.

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

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

Please note, it is your responsibility to share the information contained in this letter and the results of this visit with the President of your facility's Governing Body.

Please feel free to call our office with any questions at (651) 201-4301.

Sincerely,

Jean Johnston, Program Manager

Jean M. Johnston

Case Mix Review Program

**Enclosures** 

cc: Ramsey County Social Services

Ron Drude, Minnesota Department of Human Services

Sherilyn Moe, Office of the Ombudsman

01/07 CMR3199



Class 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 an on-site visit, MDH nurses will interview staff, clients and/or their representatives, make observations and review documentation. The survey is an opportunity for the licensee to describe 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 may facilitate the survey process.

Licensing requirements listed below are reviewed during a survey. A determination is made whether the requirements are met or not met for each Indicator of Compliance. 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: HOPE HOME HEALTH CARE SERVICES

HFID #: 21961

Date(s) of Survey: October 22, 23, and 27, 2008

Project #: QL21961005

<ul> <li>1. The provider accepts and retains clients for whom it can meet the needs.</li> <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 contain all the required information.</li> <li>Services agreed to are provided Clients are provided referral assistance.</li> <li>MN Rule 4668.0180 Subp. 8</li> <li>MN Rule 4668.0180 Subp. 8</li> </ul>	Indicators of Compliance	Outcomes Observed	Comments
New Correction Order issued	1. The provider accepts and retains clients for whom it can meet the needs.  Focus Survey  MN Rule 4668.0140  Expanded Survey  MN Rule 4668.0050  MN Rule 4668.0060 Subp. 3, 4 and 5	<ul> <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 contain all the required information.</li> <li>Services agreed to are provided Clients are provided referral</li> </ul>	Focus Survey MetCorrection Order(s)     issuedEducation Provided  Expanded SurveySurvey not ExpandedMetX_Correction Order(s)     issuedX_Education Provided  Follow-up Survey #New Correction

<b>Indicators of Compliance</b>	<b>Outcomes Observed</b>	Comments
<ul> <li>2. The provider promotes client rights.</li> <li>Focus Survey <ul> <li>MN Rule 4668.0030</li> <li>MN Statute §144A.44</li> </ul> </li> <li>Expanded Survey <ul> <li>MN Rule 4668.0040</li> <li>MN Rule 4668.0170</li> </ul> </li> <li>3. The provider promotes and</li> </ul>	<ul> <li>Clients' are aware of and have their rights honored.</li> <li>Clients' are informed of and afforded the right to file a complaint.</li> <li>Client's person, finances and</li> </ul>	Focus Survey MetCorrection Order(s)     issuedEducation Provided  Expanded SurveySurvey not ExpandedMet _X_Correction Order(s)     issued _X_Education Provided  Follow-up Survey #New Correction     Order issuedEducation Provided  Focus Survey
protects each client's safety, property, and well-being.  Focus Survey  MN Statutes §144A.46 Subd. 5(b)  MN Statute §626.556  MN Statutes §626.557  Expanded Survey  MN Rule 4668.0035	<ul> <li>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>	Met XCorrection Order(s)     issued XEducation Provided  Expanded Survey X_Survey not ExpandedMetCorrection Order(s)     issuedEducation Provided  Follow-up Survey #New Correction     Order issuedEducation Provided
<ul> <li>4. The provider maintains and protects client records.</li> <li>Focus Survey <ul> <li>MN Rule 4668.0160</li> </ul> </li> <li>Expanded Survey <ul> <li>[Note: See Informational Bulletin 99-11 for Class A variance for Electronically Transmitted Orders.</li> </ul> </li> </ul>	<ul> <li>Client records are maintained and retained securely.</li> <li>Client records contain all required documentation.</li> <li>Client information is released only to appropriate parties.</li> <li>Discharge summaries are available upon request.</li> </ul>	Focus Survey MetCorrection Order(s)     issued     XEducation Provided  Expanded Survey     XSurvey not Expanded    Met

Indicators of Compliance	Outcomes Observed	Comments
Non-compliance with this variance will result in a correction order issued under 4668.0016.]		Correction Order(s)     issued    Education Provided  Follow-up Survey # New Correction     Order issued    Education Provided
5. The provider employs and/or contracts with qualified and trained staff.  Focus Survey  • MN Rule 4668.0100  • [Except Subp. 2]  • MN Rule 4668.0065  Expanded Survey  • MN Rule 4668.0060 Subp. 1  • MN Rule 4668.0070  • MN Rule 4668.0075  • MN Rule 4668.0080  • MN Rule 4668.0130  • MN Statute §144A.45 Subd. 5  [Note: See Informational Bulletin 99-7 for Class A variance in a Housing With Services Setting. Non-compliance with this variance will result in a correction order issued under 4668.0016.]	<ul> <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 administration procedures are available.</li> <li>Supervision is provided as required.</li> </ul>	Focus Survey MetCorrection Order(s)     issuedEducation Provided  Expanded SurveySurvey not ExpandedMetX_Correction Order(s)     issuedX_Education Provided  Follow-up Survey #New Correction     Order issuedEducation Provided
<ul> <li>6. The provider obtains and keeps current all medication and treatment orders [if applicable].</li> <li>Focus Survey <ul> <li>MN Rule 4668.0150</li> </ul> </li> <li>Expanded Survey <ul> <li>MN Rule 4668.0100</li> <li>Subp. 2</li> </ul> </li> <li>[Note: See Informational Bulletin 99-7 and 04-12 for Class A variance in a Housing With Services setting with regards to medication administration, storage</li> </ul>	<ul> <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>	Focus Survey  X Met Correction Order(s) issued Education Provided  Expanded Survey X Survey not Expanded Met Correction Order(s) issued Education Provided  Follow-up Survey # New Correction

Indicators of Compliance	Outcomes Observed	Comments
and disposition. Non-compliance with this variance will result in a correction order issued under 4668.0016.]		Order issuedEducation Provided
<ul> <li>7. The provider is licensed and provides services in accordance with the license.</li> <li>Focus Survey <ul> <li>MN Rule 4668.0019</li> </ul> </li> <li>Expanded Survey</li> <li>MN Rule 4668.0008 Subp. 3</li> <li>MN Rule 4668.0012</li> <li>MN Rule 4668.0060</li></ul>	<ul> <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 reflect 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>	Focus Survey  X_MetCorrection Order(s)     issuedEducation Provided  Expanded Survey  X_Survey not ExpandedMetCorrection Order(s)     issuedEducation Provided  Follow-up Survey #New Correction     Order issuedEducation Provided
<ul> <li>8. The provider is in compliance with MDH waivers and variances.</li> <li>Expanded Survey</li> <li>MN Rule 4668.0016</li> </ul>	Licensee provides services within the scope of applicable MDH waivers and variances	This area does not apply to a Focus Survey.  Expanded Survey  X Survey not Expanded  Met  Correction Order(s) issued Education Provided  Follow-up Survey #  New Correction Order issued Education Provided

<u>Please note</u>: Although the focus of the licensing survey is the regulations listed in the Indicators of Compliance boxes above, other rules and statutes may be cited depending on what system a provider has or fails to have in place and/or the severity of a violation. The findings, of the focused survey may result in an expanded survey.

# **SURVEY RESULTS:**

For Indicators of Compliance not met, the rule or statute numbers and the findings of deficient practice are noted below.

## 1. MN Rule 4668.0030 Subp. 2

# **INDICATOR OF COMPLIANCE: #2**

Based on record review and interview, the licensee failed to provide the Minnesota Home Care Bill of Rights to one of one client (#1) record reviewed. The findings include:

Client #1 was admitted August 29, 2006. Client #1's records did not contain documentation that he had received the Minnesota Home Care Bill of Rights. When interviewed, October 23, 2008, the administrative assistant stated client #1 should have received the home care bill of rights but she could not find it in the record or anywhere else. Client #1 could not remember that he got the home care bill of rights.

## 2. MN Rule 4668.0040 Subp. 2

## INDICATOR OF COMPLIANCE: #2

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

The complaints section that was part of the client welcome document for the licensee lacked contact information for the Office of Health Facility Complaints and did not include a statement that the provider would not retaliate because of a complaint. When interviewed October 23, 2008, the administrative assistant stated she was not aware that those items were required in the complaint procedure.

## 3. MN Rule 4668.0065 Subp. 1

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

Based on record review and interview, the licensee failed to ensure that tuberculosis (TB) screening was completed for two of two employee's (A and B) records reviewed. The findings include:

Employees A and B were hired on April 24, 2008, and November 2003, respectively, as direct caregivers. There was no documentation of TB screening for employees A and B. When interviewed October 23, 2008, the administrative assistant confirmed employees A and B did not have TB screening.

#### 4. MN Rule 4668.0070 Subp. 3

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

Based on interview the licensee failed to provide job descriptions for two of two employees' (A and B) records reviewed. The findings include:

Employees A and B were hired on April 24, 2008, and November 2003, respectively, as direct caregivers. There was no evidence of job descriptions for employees A and B. When interviewed October 23, 2008, the administrative assistant stated they did not have job descriptions for employees as everything was done verbally.

## 5. MN Rule 4668.0075 Subp. 1

# **INDICATOR OF COMPLIANCE: #5**

Based on record review and interview the licensee failed to ensure that each employee received orientation to home care requirements before providing home care services to clients for one of one unlicensed employee (A) record reviewed. The findings include:

Employee A's personnel file did not include documentation of orientation to home care. When interviewed October 23, 2008, the administrative assistant stated the registered nurse did the training and it should be in the records. She confirmed it was not in the records. She also did not know there were Class A rules to follow. When interviewed October 30, 2008, employee A stated he had not received any training at this agency. He stated he had worked for another agency and had some training there which was working with a co-worker to show him how to do the tasks that needed to be done.

# 6. MN Rule 4668.0100 Subp. 5

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

Based on record review and interview, the licensee failed to ensure that unlicensed persons performing delegated nursing services were qualified to perform the services for one of one unlicensed employee (A) record reviewed. The findings include:

Employee A was hired April 24, 2008, as a direct caregiver. There was no evidence that employee A had completed training. When interviewed, October 23, 2008, the administrative assistant confirmed there was no evidence of the training and competency evaluation. When interviewed October 30, 2008, employee A stated he had not received any training at this agency. He stated he had worked for another agency and had some training there which was working with a co-worker to show him how to do the tasks that needed to be done.

#### 7. MN Rule 4668.0100 Subp. 8

# **INDICATOR OF COMPLIANCE: #5**

Based on record review and interview, the licensee failed to have the registered nurse (RN) orient unlicensed personnel to each client and their services for one of one unlicensed employee's (A) reviewed. The findings include:

When interviewed October 23, 2008, the administrative assistant indicated that the client could direct his own cares. When interviewed, October 30, 2008, employee A stated the client told him what cares he needed to have done and when to do the cares and stated that he had not seen the registered nurse (RN) from this agency.

## 8. MN Rule 4668.0100 Subp. 9

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

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

Client #1 began receiving services on August 29, 2006. Client #1 received services that required supervision including assistance with activities of daily living, transferring, and bathing. There was documentation of only one RN supervisory visit after initiation of services which was October 9, 2008. That visit was really an evaluation to attest that Client #1 still required personal care services. When interviewed, October 23, 2008, the administrative assistant confirmed October 9, 2008, was the only supervisory visit that was documented in the records.

## 9. MN Rule 4668.0140 Subp. 2

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

Based on record review and interview, the licensee failed to provide a complete service agreement for one of one client (#1) record reviewed. The findings include:

Client #1 began receiving services August 29, 2006. There was no service agreement in the record. The "PCA Care Plan" dated October 9, 2008, indicated client #1 received assistance with activities of daily living, assistance with transferring, and assistance with bathing. The document did not include the frequency of services, the identification of those persons providing the services, the frequency of supervision or monitoring, fees for services, and a plan for contingency action. When interviewed October 23, 2008, the administrative assistant stated she was not aware that all that information needed to be included in the plan.

## 10. MN Statute §144A.46 Subd. 5(b)

## **INDICATOR OF COMPLIANCE: #3**

Based on record review and interview, the agency failed to have a background study done for one of two employee's (B) records reviewed. The findings include:

Employee B was hired in November 2003 as a direct caregiver. There was no evidence of a background study. When interviewed October 23, 2008, the administrative assistant was not aware that a background check had not been done.

#### 11. MN Statute §626.557 Subd. 14(b)

## **INDICATOR OF COMPLIANCE: #3**

Based on record review and interview, the agency failed to ensure an assessment of vulnerability and plan to address vulnerabilities was completed for one of one client (#1) record reviewed. The findings include:

Client #1 began receiving services August 29, 2006. The record did not include evidence of an assessment of the client's vulnerability or an individual abuse prevention plan. When interviewed, October 23, 2008, the administrative assistant was not aware of the need for an assessment of vulnerability and an individual abuse prevention plan.

A draft copy of this completed form was left with <u>Sue Thao</u>, <u>Administrative Assistant</u>, at an exit conference on <u>October 27, 2008</u>. Any correction order(s) issued as a result of the on-site visit and the final Licensing Survey Form will be sent to the licensee. If you have any questions about the Licensing Survey Form or the survey results, please contact the Minnesota Department of Health, (651) 201-4301. After review, this form will be posted on the MDH website. CLASS A Licensed-only Home Care Provider general information is available by going to the following web address and clicking on the Class A Home Care Provider link:

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

Regulations can be viewed on the Internet: <a href="http://www.revisor.leg.state.mn.us/stats">http://www.revisor.leg.state.mn.us/stats</a> (for MN statutes) <a href="http://www.revisor.leg.state.mn.us/arule/">http://www.revisor.leg.state.mn.us/arule/</a> (for MN Rules).