



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7005 0390 0006 1222 1620

May 10, 2006

Ahmed Ugas, Administrator
Home Health Care Service
2200 2nd Street SW #203
Rochester, MN 55902

Re: Licensing Follow Up visit

Dear Mr. Ugas:

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 April 24, 25, and 26, 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

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.

Feel free to call our office if you have any questions at (651) 201-4301.

Sincerely,

Jean Johnston, Program Manager
Case Mix Review Program

Enclosure(s)

cc: Ron Drude, Minnesota Department of Human Services
Olmsted County Social Services
Arnie Rosenthal, VAA/Office of Health Facility Complaints
Jocelyn Olson, Assistant Attorney General
Mary Henderson, Program Assurance Unit
Case Mix Review File

10/04 FPC1000CMR



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7005 0390 0006 1222 1620

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

May 10, 2006

Ahmed Ugas, Administrator
Home Health Service
2200 2nd Street SW #203
Rochester, MN 55902

RE: QL23138001

Dear Mr. Ugas:

On April 24, 25, and 26, 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 October 3, 4, 5, and 7, 2005, with correction orders received by you on December 9, 2005.

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

2. MN Rule 4668.0065 Subp. 1

\$500.00

Based on record review and interview, the licensee failed to assure tuberculosis screening was completed for two of three employees' (B and C) records reviewed. The findings include:

Employee B was hired September 1, 2005, and did not have documentation of tuberculosis screening before providing direct care to clients. When interviewed October 5, 2005, employee B indicated she had been screened for tuberculosis approximately one year ago, however she was unable to obtain the results from her previous employer.

Employee C was hired November 12, 2004. Employee C's file contained a facsimile, dated January 19, 2004, which indicated she had a positive Mantoux test and a normal chest x-ray. There was no documentation of a subsequent chest x-ray.

TO COMPLY: No person who is contagious with tuberculosis may provide services that require direct contact with clients. All individual licensees and employees and contractors of licensees must document the following before providing services that require direct contact with clients:

- A. the person must provide documentation of having received a negative reaction to a Mantoux test administered within the 12 months before working in a position involving direct client contact, and no later than every 24 months after the most recent Mantoux test; or
- B. if the person has had a positive reaction to a Mantoux test upon employment or within the two years before working in a position involving direct client contact, or has a positive reaction to a Mantoux test in repeat testing during the course of employment, the person must provide:
 - (1) documentation of a negative chest x-ray administered within the three months before working in a position involving direct client contact; or
 - (2) documentation of a negative chest x-ray administered each 12 months, for two years after the positive reaction to a Mantoux test or documentation of completing or currently taking a course of tuberculosis preventative therapy; or
- C. if the person has had a positive reaction to a Mantoux test more than two years before working in a position involving direct client contact, the person must provide documentation of a negative chest x-ray taken within the previous 12 months or documentation of completing or currently taking a course of tuberculosis preventative therapy.

In this subpart, "Mantoux test" means a Mantoux tuberculin skin test.

Therefore, in accordance with Minnesota Statutes 144.653 and 144A.45, subdivision 2. (4), you are assessed in the amount of: \$500.00

4. MN Rule 4668.0075 Subp. 1

\$300.00

Based on record review and interview, the licensee failed to provide orientation to home care requirements for three of three employees' (A, B and C) records reviewed. The findings include:

Employee A, B, and C were hired April 10, 2005, September 1, 2005, and November 12, 2004, respectively. The employees' records lacked documentation that they had been provided orientation to home care. When interviewed October 4, 2005, employee B stated she had "looked at" the orientation material. When interviewed October 5, 2005, the director indicated he had not gotten around to providing all of the required training, and he does not have the employees sign when they receive training.

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

5. MN Rule 4668.0100 Subp. 5

\$300.00

Based on record review and interview, the licensee failed to assure that unlicensed persons who performed home health aide tasks met the required training requirements for two of three employees' (B and C) records reviewed. The findings include:

Employee B and C were hired as personal care attendants September 1, 2005, and November 12, 2004, respectively and provided cares such as bathing, grooming, dressing, feeding, toileting, transfers and medication administration. The records for employee B and C lacked documentation that the training and competency requirements to perform home health aide tasks had been completed. When interviewed October 4, 2005, employee B indicated she had neither met nor received training from the agency nurse.

TO COMPLY: For a class A or C licensee, a registered nurse may delegate medical or nursing services as tasks or a therapist may assign therapy services as tasks only to a person who satisfies the requirements of subpart 5. These delegated or assigned tasks, as set forth in this part, include home care aide tasks as set forth in part [4668.0110](#). Class A licensees providing home care aide tasks must satisfy the training and supervision requirements of this part, and not part [4668.0110](#). These tasks include:

- A. administration of medications, as provided by subpart 2;
- B. performing routine delegated medical or nursing or assigned therapy procedures, as provided by subpart 4, except items C to H;
- C. assisting with body positioning or transfers of clients who are not ambulatory;
- D. feeding of clients who, because of their condition, are at risk of choking;
- E. assistance with bowel and bladder control, devices, and training programs;
- F. assistance with therapeutic or passive range of motion exercises;
- G. providing skin care, including full or partial bathing and foot soaks; and
- H. during episodes of serious disease or acute illness, providing services performed for a client or to assist a client to maintain the hygiene of the client's body and immediate environment, to satisfy nutritional needs, and to assist with the client's mobility, including movement, change of location, and positioning, and bathing, oral hygiene, dressing, hair care, toileting, bedding changes, basic housekeeping, and meal preparation. Oral hygiene means care of teeth, gums, and oral prosthetic devices.

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 4668.0130 Subp. 1

\$300.00

Based on record review and interview, the licensee failed to assure that a registered nurse (RN) provided the training and competency evaluation for two of two unlicensed employees' (B and C) records reviewed. The findings include:

When interviewed by telephone October 4, 2005, the RN indicated he did not provide training to the unlicensed employees on specific procedures and that the director, an unlicensed person, did all of the training.

TO COMPLY: The training required by part [4668.0100](#), subpart 5, and by part [4668.0110](#), subpart 2, must:

- A. include the topics and course requirements specified in subpart 2 and use a curriculum approved by the commissioner;
- B. be taught by a registered nurse with experience or training in home care, except that specific topics required by subpart 2 may be taught by another instructor in conjunction with the registered nurse; and
- C. include a competency evaluation required by subpart 3.

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

7. MN Rule 4668.0140 Subp. 1

\$250.00

Based on record review and interview, the licensee failed to assure a service agreement was completed for two of two clients' (#1 and #2) records reviewed. The findings include:

Clients #1 and #2's records did not have service agreements. When interviewed October 4, 2005, the director indicated the information for client #1 was on a public health form, however there was no public health form in the client's record.

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

9. MN Rule 4668.0160 Subp. 6

\$100.00

Based on record review and interview, the licensee failed to have complete records for three of three clients' (#1, #2 and #3) records reviewed. The findings include:

Client #1, #2 and #3 received services from the personal care attendant (PCA). The cares were documented on the timecards of the PCA's, which were not part of the client's permanent record. When interviewed October 4, 2005, the director provided the employee time cards to verify that the cares were given.

TO COMPLY: The client record must contain:

- A. the following information about the client:
 - (1) name;
 - (2) address;
 - (3) telephone number;
 - (4) date of birth;
 - (5) dates of the beginning and end of services; and
 - (6) names, addresses, and telephone numbers of any responsible persons;
- B. a service agreement as required by part [4668.0140](#);
- C. medication and treatment orders, if any;
- D. notes summarizing each contact with the client in the client's residence, signed by each individual providing service including volunteers, and entered in the record no later than two weeks after the contact;
- E. names, addresses, and telephone numbers of the client's medical services providers and other home care providers, if known;
- F. a summary following the termination of services, which includes the reason for the initiation and termination of services, and the client's condition at the termination of services.

Class C licensees need only include the information required by items A, B, and E. Class E licensees need only include the information required by items A, B, D, and E.

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

10. MN Statute §144A.46 Subd. 5(b)

No Fine

Based on record review and interview, the licensee failed to have background studies performed for one of three employees' (A) records reviewed. The findings include:

Employee A was hired April 10, 2005. His record lacked documentation of a background study. When interviewed October 5, 2005, the director indicated he had sent the request for the background study to the Department of Human Services (DHS), however when he called DHS on October 5, 2005, he was told that they had not received the request.

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.

No assessment is due for this uncorrected order.

11. MN Statute §626.557 Subd. 14(b)

No Fine

Based on record review and interview, the licensee failed to ensure that an individualized abuse prevention plan was developed for two of two clients' (#1 and #2) records reviewed. The findings include:

Client #1 and #2 began receiving services September 1, 2005, and November 12, 2004, respectively. Their records did not contain an individualized assessment of the person's susceptibility to abuse. When interviewed October 5, 2005, the director shared a form titled "Reporting Abuse and Neglect, however the form did not include an assessment.

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.

No assessment is due for this uncorrected order.

Therefore, in accordance with Minnesota Statutes 144.653 and 144A.45, subdivision 2. (4), the total amount you are assessed is: \$1750.00. 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.

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.

**Home Health Service
2200 2nd Street SW #203
Rochester, MN 55902
May 10, 2006**

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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.

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.

Sincerely,

Jean Johnston
Program Manager
Case Mix Review Program

cc: Ron Drude, Minnesota Department of Human Services
Olmsted County Social Services
Arnie Rosenthal, VAA/Office of Health Facility Complaints
Jocelyn Olson, Assistant Attorney General
Mary Henderson, Program Assurance Unit
Case Mix Review File

12/04 FPCCMR 2697

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

INFORMATIONAL MEMORANDUM

PROVIDER: HOME HEALTH CARE SERVICE

DATE OF SURVEY: April 24, 25, and 26, 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

NAME (S) AND TITLE (S) OF PERSONS INTERVIEWED:

Ahmed Ugas, Director
Philip VanSteinburg, RN
Harun Noor, PCA
Theresa Hardin, PCA

SUBJECT: Licensing Survey _____ Licensing Order Follow Up #1

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 October 3, 4, 5, and 7, 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. 5 | Corrected | |
| 2. MN Rule 4668.0065 Subp. 1 | Not Corrected | Fine \$500.00 |

Based on record review and interview, the licensee failed to ensure tuberculosis screening before employees had direct contact with clients for two of three (E and F) employees reviewed. The findings include:

Employee E began employment as an unlicensed direct care staff January 28, 2006. Documentation of Mantoux testing for employee E indicated a positive Mantoux on September 14, 1999 and negative M tuberculosis by Quantiferon B on March 27, 2006.

There was no evidence of further tuberculosis screening or treatment information available.

Employee F began employment as an unlicensed direct care December 16, 2005. A negative Mantoux was documented for employee F on January 4, 2006. Time cards for employees E and F indicated both worked directly with clients prior to having negative tuberculosis screening results. When interviewed, April 25, 2006, the director confirmed employees were allowed to work with clients before all required tuberculosis-screening results were known.

- | | | |
|-------------------------------------|----------------------|----------------------|
| 3. MN Rule 4668.0070 Subp. 3 | Corrected | |
| 4. MN Rule 4668.0075 Subp. 1 | Not Corrected | Fine \$300.00 |

Based on record review and interview, the licensee failed to provide orientation to home care requirements prior to direct care staff providing care for four of four unlicensed personnel (C, D, E, and F) records reviewed. The findings include:

Employees' C, D, E, and F were hired November 12, 2004, January 20, 2006, January 28, 2006 and December 16, 2005 respectively. There was no evidence of orientation to home care in employees C, D, E, or Fs' records. When interviewed, April 24, 2006, the director indicated the registered nurse (RN) had done it but didn't know where it would be documented. The director provided a booklet titled the "Home Health Care Services Manual" that was used that did not contain an overview of the appropriate Minnesota rule or statutes and confirmed this is what was used for training. Employees' C, D, E, and F signed a Policy Statements and Training Guidelines that indicated they had read policies and procedures and training guidelines in the Home Health Care Services Manual, which contained HIPPA policies, and procedures, with respect to protected health information. Employees' C, D, E, and F records also had answer sheets for infection control quizzes #1, #2, #3 which were the basics of safe lifting, a safety module quiz, and a back safety worksheet that were not signed, corrected or dated by the RN. There was no further training or orientation information present. When interviewed, April 25, 2006, the RN indicated the booklet was used and that there was no documentation.

- | | | |
|-------------------------------------|----------------------|----------------------|
| 5. MN Rule 4668.0100 Subp. 5 | Not Corrected | Fine \$300.00 |
|-------------------------------------|----------------------|----------------------|

Based on record review and interview, the licensee failed to assure that unlicensed persons who performed home health aide tasks met the training required training requirements for four of four employees'(C, D, E, and F) records reviewed. The findings include:

Employees' C, D, E, and F began providing cares as personal care attendants November 10, 2004, January 20, 2006, January 28, 2006 and December 16, 2005 respectively. Cares provided included bathing, grooming, dressing, toileting, and transfers. The records for employees' C, D, E, and F lacked evidence that the training and competency requirements to perform home health aide tasks had been done. When interviewed, April 25, 2006, the registered nurse confirmed there was no evidence of training.

- | | | |
|-------------------------------------|----------------------|----------------------|
| 6. MN Rule 4668.0130 Subp. 1 | Not Corrected | Fine \$300.00 |
|-------------------------------------|----------------------|----------------------|

Based on record review and interview, the licensee failed to assure that a registered nurse (RN) provided the training and competency evaluation for four of four (C, D, E, and F) unlicensed employees' records reviewed. The findings include:

employee F was received from the agency via a web application on March 7, 2006. When interviewed, April 24, 2006 the director indicated he thought he sent it in right away.

11. MN Statute §626.557 Subd. 14(b) Not Corrected No Fine

Based on record review and interview the licensee failed to ensure that an individualized abuse prevention plan was developed for three of three (#2, #4, and #5) clients records reviewed. The findings include:

Clients' #2, #4, and #5 began receiving services October 22, 2004, July 28, 2005, and January 20, 2006 respectively.

The vulnerable adult assessment for client #2 indicated client #2 had no vulnerabilities, was a vulnerable adult, and required no intervention or plan at this time. Client #2's record indicated the client was blind, did not speak English, and had physical impairments from a stroke.

The vulnerable adult assessment for client #4 indicated client #4 had no vulnerabilities, was a vulnerable adult, and required no intervention or plan at this time. Client #4's record and a home visit April 24, 2005 by this reviewer identified that client #4 had diabetes, a left leg amputation, difficulty seeing, continuous oxygen use per nasal cannula, smoked, and had extensive wheelchair use as the client could only walk a short distance. The client lived in a basement level apartment that had ramp access at one multi-user entrance.

The vulnerable adult assessment for client #5 indicated client #5 had no vulnerabilities, was a vulnerable adult, and required no intervention or plan at this time. Client #5's record and visit and a home visit April 24, 2005 by this reviewer identified that client #5 had a impaired mentation, did not speak English, had a gait disorder, required assistance with transferring, and slept in a basement room with only stairs for access.

- 2) The following referral/s are being made:
 - i) OHFC- VAA
 - ii) Local County-MOM
 - iii) Attorney General-HWS



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7004 1160 0004 8711 7904

December 7, 2005

Ahmed Ugas, Administrator
Ahmed Ugas Home Health Care SV
22002nd Street SW #203
Rochester, MN 55902

Re: Results of State Licensing Survey

Dear Mr. Ugas:

The above agency was surveyed on October 3, 4, 5, and 7, 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: Ahmed Ugas, President Governing Body
Gloria Lehnertz, Minnesota Department of Human Services
Olmsted County Social Services
Sherilyn Moe, Office of the Ombudsman for Older Minnesotans
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: AHMED UGAS/HOME HEALTH CARE SV

HFID # (MDH internal use): 23138

Date(s) of Survey: October 3, 4, 5, and 7, 2005

Project # (MDH internal use): QL23138001

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 • MN Rule 4668.0040 	<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 Provided

Indicators of Compliance	Outcomes Observed	Comments
<p>Indicator of Compliance #2 continued:</p> <ul style="list-style-type: none"> MN Rule 4668.0170 		<p>Follow-up Survey # _____</p> <p>_____ Met</p> <p>_____ Not Met</p> <p>_____ New Correction Order(s) issued</p> <p>_____ Education Provided</p>
<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. 	<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>
<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. 	<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>
<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 	<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 	<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"> • 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>required.</p>	
<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"> • MN Rule 4668.0180 subpart 4 • 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. 	<p>Annual Licensing Survey</p> <p><u>X</u> Met</p> <p>___ 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
subpart 5 • MN Rule 4668.0180 subpart 6 • MN Rule 4668.0180 subpart 7 • MN Rule 4668.0180 subpart 9 • MN Statute 144A.47 [Note to MDH staff: Review 17 point contract if services provided in a Housing With Services]		

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 Subp. 5 Bill of Rights	X	Based on record review and interview, the licensee failed to have written acknowledgment of receipt of the Minnesota Home Care Bill of Rights for two of two clients' (#1 and #2) records reviewed. The findings include: Clients #1 and #2 began receiving services in September 2005, and December 2004, respectively. Client #1 and #2's records contained a copy of the Minnesota Home Care Bill of Rights, which was not signed or dated. When interviewed October 4, 2005, the director confirmed the preceding findings. <u>Education:</u> Provided

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Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
2.	5	MN Rule 4668.0065 Subp. 1 TB testing	X	<p>Based on record review and interview, the licensee failed to assure tuberculosis screening was completed for two of three employees' (B and C) records reviewed. The findings include:</p> <p>Employee B was hired in September 2005, and did not have documentation of tuberculosis screening before providing direct care to clients. When interviewed October 5, 2005, employee B indicated she had been screened for tuberculosis approximately one year ago, however she was unable to obtain the results from her previous employer.</p> <p>Employee C was hired in November 2004. Employee C's file contained a facsimile, dated January 19, 2004, which indicated she had a positive Mantoux test and a normal chest x-ray. There was no documentation of a subsequent chest x-ray.</p> <p><u>Education:</u> Provided</p>
3.	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 for one of one employee (A) record reviewed. The findings include:</p> <p>Employee A, a registered nurse, was hired in April 2005. There was no job description for a registered nurse available for review. When interviewed October 5, 2005, the director indicated he did not have job description for a registered nurse.</p> <p><u>Education:</u> Provided</p>
4.	5	MN Rule 4668.0075 Subp. 1 Orientation to home care	X	<p>Based on record review and interview, the licensee failed to provide orientation to home care requirements for three of three employees' (A, B and C) records</p>

Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				<p>reviewed. The findings include:</p> <p>Employee A, B, and C were hired in April 2005, September 2005, and November 2004, respectively. The employees' records lacked documentation that they had been provided orientation to home care. When interviewed October 4, 2005, employee B stated she had "looked at" the orientation material. When interviewed October 5, 2005, the director indicated he had not gotten around to providing all of the required training, and he does not have the employees sign when they receive training.</p> <p><u>Education:</u> Provided</p>
5.	5	MN Rule 4668.0100 Subp. 5 Home Health Aide qualifications	X	<p>Based on record review and interview, the licensee failed to assure that unlicensed persons who performed home health aide tasks met the required training requirements for two of three employees' (B and C) records reviewed. The findings include:</p> <p>Employee B and C were hired as personal care attendants in September 2005, and November 2004, respectively and provided cares such as bathing, grooming, dressing, feeding, toileting, transfers and medication administration. The records for employee B and C lacked documentation that the training and competency requirements to perform home health aide tasks had been completed. When interviewed October 4, 2005, employee B indicated she had neither met nor received training from the agency nurse.</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:
6.	5	MN Rule 4668.0130 Subp. 1 Training and competency evaluations	X	<p>Based on record review and interview, the licensee failed to assure that a registered nurse (RN) provided the training and competency evaluation for two of two unlicensed employees' (B and C) records reviewed. The findings include:</p> <p>When interviewed by telephone October 4, 2005, the RN indicated he did not provide training to the unlicensed employees on specific procedures and that the director, an unlicensed person, did all of the training.</p> <p><u>Education:</u> Provided</p>
7.	1	MN Rule 4668.0140 Subp. 1 Service agreements	X	<p>Based on record review and interview, the licensee failed to assure a service agreement was completed for two of two clients' (#1 and #2) records reviewed. The findings include:</p> <p>Clients #1 and #2's records did not have service agreements. When interviewed October 4, 2005, the director indicated the information for client #1 was on a public health form, however there was no public health form in the client's record.</p> <p><u>Education:</u> Provided</p>
8.	6	MN Rule 4668.0150 Subp. 3 Medication orders	X	<p>Based on record review and interview, the licensee failed to have prescriber's orders for medications for one of two clients' (#1) records reviewed. The findings include:</p> <p>Client #1 received assistance with medication administration. The client's record indicated he received six scheduled medications on a daily basis and four medications on an as needed basis. There were no prescriber's orders for the medications in the client's</p>

Correction Order Number	Indicator of Compliance Number	Rule/ Statute Referenced	Education provided	Statement(s) of Deficient Practice/Education:
				<p>record. On October 4, 2005, the personal care attendant confirmed that the client was receiving the medications.</p> <p><u>Education:</u> Provided</p>
9.	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 records for three of three clients' (#1, #2 and #3) records reviewed. The findings include:</p> <p>Client #1, #2 and #3 received services from the personal care attendant (PCA). The cares were documented on the timecards of the PCA's, which were not part of the client's permanent record. When interviewed October 4, 2005, the director provided the employee time cards to verify that the cares were given.</p> <p><u>Education:</u> Provided</p>
10.	3	MN Statute §144A.46 Subd. 5 (b) Background checks	X	<p>Based on record review and interview, the licensee failed to have background studies performed for one of three employees' (A) records reviewed. The findings include:</p> <p>Employee A was hired in April 2005. His record lacked documentation of a background study. When interviewed October 5, 2005, the director indicated he had sent the request for the background study to the Department of Human Services (DHS), however when he called DHS on October 5, 2005, he was told that they had not received the request.</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:
11.	3	MN Statute §626.557 Subd. 14 (b) VA assessment and abuse prevention plan	X	Based on record review and interview, the licensee failed to ensure that an individualized abuse prevention plan was developed for two of two clients' (#1 and #2) records reviewed. The findings include: Client #1 and #2 began receiving services in September 2005, and November 2004, respectively. Their records did not contain an individualized assessment of the person's susceptibility to abuse. When interviewed October 5, 2005, the director shared a form titled "Reporting Abuse and Neglect, however the form did not include an assessment. <u>Education:</u> Provided
	6	MN Rule 4668.0003 Subp. 21 Medication administration	X	<u>Education:</u> Provided
	2.	MN Rule 4668.0040 Subp. 2 Complaint procedure	X	<u>Education:</u> Provided
	5	MN Rule 4668.0060 Subp. 6 Availability of contact person	X	<u>Education:</u> Provided
	4	MN Rule 4668.0160 Subp. 2 Security of records	X	<u>Education:</u> Provided
	4	MN Rule 4668.0160 Subp. 5 Forms of entries	X	<u>Education:</u> Provided
	7	MN Rule 4668.0180 Subp. 9 Quality assurance	X	<u>Education:</u> Provided

A draft copy of this completed form was left with Ahmed Ugas at an exit conference on October 07, 2005. Any correction order(s) 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)