



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7008 1830 0003 8091 0457

April 23, 2009

Dennis Eichinger, Administrator
Senior Helpers
171 Lake Street N
Big Lake, MN 55371

Re: Results of State Licensing Survey

Dear Mr. Eichinger:

The above agency was surveyed on March 5, 6, and 9, 2009, for the purpose of assessing compliance with state licensing regulations. State licensing deficiencies, if found, are delineated on the attached Minnesota Department of Health (MDH) correction order form. The correction order form should be signed and returned to this office when all orders are corrected. We urge you to review these orders carefully, item by item, and if you find that any of the orders are not in accordance with your understanding at the time of the exit conference following the survey, you should immediately contact me, or the RN Program Coordinator. If further clarification is necessary, I can arrange for an informal conference at which time your questions relating to the order(s) can be discussed.

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

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

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

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

Sincerely,

A handwritten signature in black ink that reads "Jean M. Johnston". The signature is written in a cursive style with a large, looped "J" and "N".

Jean Johnston, Program Manager
Case Mix Review Program

Enclosures

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

01/07 CMR3199

Division of Compliance Monitoring • Case Mix Review
85 East 7th Place Suite, 220 • PO Box 64938 • St. Paul, MN 55164-0938 • 651-201-4301
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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: SENIOR HELPERS

HFID #: 24954

Date(s) of Survey: March 5, 6 and 9, 2009

Project #: QL24954002

Indicators of Compliance	Outcomes Observed	Comments
<p>1. The provider accepts and retains clients for whom it can meet the needs.</p> <p>Focus Survey</p> <ul style="list-style-type: none"> MN Rule 4668.0140 <p>Expanded Survey</p> <ul style="list-style-type: none"> MN Rule 4668.0050 MN Rule 4668.0060 Subp. 3, 4 and 5 MN Rule 4668.0180 Subp. 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 contain all the required information. Services agreed to are provided Clients are provided referral assistance. 	<p>Focus Survey</p> <p><input type="checkbox"/> Met</p> <p><input checked="" type="checkbox"/> Correction Order(s) issued</p> <p><input checked="" type="checkbox"/> Education Provided</p> <p>Expanded Survey</p> <p><input checked="" type="checkbox"/> Survey not Expanded</p> <p><input type="checkbox"/> Met</p> <p><input type="checkbox"/> Correction Order(s) issued</p> <p><input type="checkbox"/> Education Provided</p> <p>Follow-up Survey # _____</p> <p><input type="checkbox"/> New Correction Order issued</p> <p><input type="checkbox"/> Education Provided</p>

Indicators of Compliance	Outcomes Observed	Comments
<p>2. The provider promotes client rights.</p> <p>Focus Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0030 • MN Statute §144A.44 <p>Expanded Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0040 • MN Rule 4668.0170 	<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. 	<p>Focus Survey</p> <p>___ Met</p> <p><u>X</u> Correction Order(s) issued</p> <p><u>X</u> Education Provided</p> <p>Expanded Survey</p> <p><u>X</u> Survey not Expanded</p> <p>___ Met</p> <p>___ Correction Order(s) issued</p> <p>___ Education Provided</p> <p>Follow-up Survey # ___</p> <p>___ New Correction Order issued</p> <p>___ Education Provided</p>
<p>3. The provider promotes and protects each client’s safety, property, and well-being.</p> <p>Focus Survey</p> <ul style="list-style-type: none"> • MN Statutes §144A.46 Subd. 5(b) • MN Statute §626.556 • MN Statutes §626.557 <p>Expanded Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0035 	<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>Focus Survey</p> <p>___ Met</p> <p><u>X</u> Correction Order(s) issued</p> <p><u>X</u> Education Provided</p> <p>Expanded Survey</p> <p><u>X</u> Survey not Expanded</p> <p>___ Met</p> <p>___ Correction Order(s) issued</p> <p>___ Education Provided</p> <p>Follow-up Survey # ___</p> <p>___ New Correction Order issued</p> <p>___ Education Provided</p>
<p>4. The provider maintains and protects client records.</p> <p>Focus Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0160 <p>Expanded Survey</p> <p>[Note: 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>Focus Survey</p> <p><u>x</u> Met</p> <p>___ Correction Order(s) issued</p> <p>___ Education Provided</p> <p>Expanded Survey</p> <p>___ Survey not Expanded</p> <p><u>X</u> Met</p>

Indicators of Compliance	Outcomes Observed	Comments
<p>Non-compliance with this variance will result in a correction order issued under 4668.0016.]</p>		<p>___ Correction Order(s) issued ___ Education Provided Follow-up Survey # ___ ___ New Correction Order issued ___ Education Provided</p>
<p>5. The provider employs and/or contracts with qualified and trained staff.</p> <p>Focus Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0100 • [Except Subp. 2] • MN Rule 4668.0065 <p>Expanded Survey</p> <ul style="list-style-type: none"> • 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 <p>[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.]</p>	<ul style="list-style-type: none"> • Staff, employed or contracted, have received all the required training. • Staff, employed or contracted, meet the Tuberculosis and all other infection control guidelines. • Personnel records are maintained and retained. • Licensee and all staff have received the required Orientation to Home Care. • Staff, employed or contracted, are registered and licensed as required by law. • Documentation of medication administration procedures are available. • Supervision is provided as required. 	<p>Focus Survey</p> <p>___ Met <u>X</u> Correction Order(s) issued <u>X</u> Education Provided</p> <p>Expanded Survey</p> <p><u>X</u> Survey not Expanded ___ Met ___ Correction Order(s) issued ___ Education Provided</p> <p>Follow-up Survey # ___ ___ New Correction Order issued ___ Education Provided</p>
<p>6. The provider obtains and keeps current all medication and treatment orders [if applicable].</p> <p>Focus Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0150 <p>Expanded Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0100 Subp. 2 <p>[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</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>Focus Survey</p> <p>___ Met <u>X</u> Correction Order(s) issued <u>X</u> Education Provided</p> <p>Expanded Survey</p> <p>___ Survey not Expanded ___ Met <u>X</u> Correction Order(s) issued <u>X</u> Education Provided</p> <p>Follow-up Survey # ___ ___ New Correction</p>

Indicators of Compliance	Outcomes Observed	Comments
and disposition. Non-compliance with this variance will result in a correction order issued under 4668.0016.]		Order issued ___ Education Provided
<p>7. The provider is licensed and provides services in accordance with the license.</p> <p>Focus Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0019 <p>Expanded Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0008 Subp. 3 • MN Rule 4668.0012 • MN Rule 4668.0060 Subp. 2 and 6 • MN Rule 4668.0180 • MN Rule 4668.0220 <p><small>Note: MDH will make referrals to the Attorney General's office for violations of MN Statutes 144D or 325F.72; and make other referrals, as needed.</small></p>	<ul style="list-style-type: none"> • Language requiring compliance with Home Care statutes and rules is included in contracts for contracted services. • License is obtained, displayed, and renewed. • Licensee's advertisements accurately reflect services available. • Licensee provides services within the scope of the license. • Licensee has a contact person available when a para-professional is working. 	<p>Focus Survey</p> <p><input checked="" type="checkbox"/> Met</p> <p>___ Correction Order(s) issued</p> <p><input checked="" type="checkbox"/> Education Provided</p> <p>Expanded Survey</p> <p><input checked="" type="checkbox"/> Survey not Expanded</p> <p>___ Met</p> <p>___ Correction Order(s) issued</p> <p>___ Education Provided</p> <p>Follow-up Survey # ___</p> <p>___ New Correction Order issued</p> <p>___ Education Provided</p>
<p>8. The provider is in compliance with MDH waivers and variances.</p> <p>Expanded Survey</p> <ul style="list-style-type: none"> • MN Rule 4668.0016 	<ul style="list-style-type: none"> • Licensee provides services within the scope of applicable MDH waivers and variances 	<p><i>This area does not apply to a Focus Survey.</i></p> <p>Expanded Survey</p> <p><input checked="" type="checkbox"/> Survey not Expanded</p> <p>___ Met</p> <p>___ Correction Order(s) issued</p> <p>___ Education Provided</p> <p>Follow-up Survey # ___</p> <p>___ New Correction Order issued</p> <p>___ Education Provided</p>

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

SURVEY RESULTS: ___ All Indicators of Compliance listed above were met.

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

1. MN Rule 4668.0030 Subp. 2**INDICATOR OF COMPLIANCE: # 2**

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

Client #1's power of attorney received a Client Bill of Rights February of 2008. The document did not contain the Home Care Bill of Rights as required by Minnesota Statute, section 144A.44.

When interviewed, March 5, 2009, the owner stated he did not know where he had obtained the document and was unaware it was not the correct home care bill of rights.

2. MN Rule 4668.0100 Subp. 2**INDICATOR OF COMPLIANCE: # 6**

Based on record review and interview, the licensee failed to ensure that unlicensed personnel who administered medications to clients were competent to administer medications for one of two unlicensed one employee (#1) record reviewed. The findings include:

During the home visit for client #1, March 6, 2009, the reviewer observed employee A opening a container, containing medications, taking out a pill and putting the medication into a medication cup. Employee A also reminded the client to take the medication and provided water for the client to use. It was also noted during the home visit that the client had medications set-up in daily dose boxes.

When interviewed, March 6, 2009, employee A, an unlicensed employee, stated she set-up client #1's medications into these dose boxes for the client to self administer during breakfast, which was completed prior to employee A's shift. Employee A also stated she had been putting client #1's eye drops into her eyes since February 24, 2009, as client #1 had had surgery on her hand and was having a difficult time self administering the eye drops. Employee A stated the prescriber discontinued the eye drops on March 5, 2009, until the client's next appointment in a month. Employee A stated she had not been instructed by the registered nurse (RN) in the procedures to set-up and administer these medications nor had she demonstrated to the RN her ability to competently follow the procedures for assistance with medication administration for client #1. When interviewed, March 9, 2009, the RN stated she was unaware that employee A was setting up and administering client #1's medications.

3. MN Rule 4668.0100 Subp. 5**INDICATOR OF COMPLIANCE: # 5**

Based on record review and interview, the licensee failed to ensure an unlicensed person who performed home health aide tasks met the training and competency requirements for one of one unlicensed employee (A) record reviewed. The findings include:

Employee A began working as an unlicensed direct care staff September of 2008. Employee A provided assistance to client #1 with bathing, transfers, ambulation, dressing, grooming, and incontinence cares.

Employee A's record did not contain evidence of home health aide task training or competency evaluation by a registered nurse (RN).

When interviewed March 6, 2009, employee A stated the facility nurse had not trained or performed competency evaluations for her for home health aide tasks. When interviewed March 6, 2009, the RN stated she was in the process of setting up competency evaluations. When interviewed, March 9, 2009, the registered nurse (RN) stated she was not aware that employee A was not trained as a home health aide and that employee A required the training and competency testing for this.

4. MN Rule 4668.0100 Subp. 9

INDICATOR OF COMPLIANCE: # 1

Based on record review and interview, the licensee failed to have a registered nurse (RN) supervise unlicensed personnel, who perform home health aide tasks, for one of one client (#1) record reviewed. The findings include:

Client #1's record indicated the client started services with the licensee February of 2008. Client #1's Care Plan, which was last revised November of 2008, indicated the client, received assistance with bathing, transfers, ambulation, dressing, grooming, and incontinence cares. The registered nurse (RN) documented supervisory visits on March 22, 2008; October 26, 2008; and January 5, 2009.

When interviewed, March 6, 2009, employee A stated she assisted client #1 with activities of daily living and with exercises, which the physical therapist had recently given client #1 to do. When interviewed, March 9, 2009, the RN stated she had been hired by the licensee on November 13, 2008. She had performed the supervisory visit on January 5, 2009, and had been scheduled to do another supervisory visit last week; however, the family requested that the visit be postponed until next week.

5. 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's service agreement, dated February of 2008 and modified October of 2008, lacked the identification of the persons or categories of persons who are to provide the services, the schedule or frequency of sessions of supervision by the registered nurse (RN), and the action by the licensee if scheduled services could not be provided.

When interviewed, March 5, 2009, the administrator stated he was unaware these items were not covered in the agreement, "change order" or care plan for client #1.

6. MN Rule 4668.0150 Subp. 3**INDICATOR OF COMPLIANCE: # 6**

Based on record review and interview the licensee failed to have physician orders for medications that the licensee assisted with the administration of for one of one client (#1) record reviewed. The findings include:

During the home visit for client #1, March 6, 2009, the reviewer observed employee A opening a container, containing medications, taking out a pill and putting the medication into a container. During the home visit, employee A reminded the client to take the medication and provided water for the client to use. It was also noted during the home visit that the client had medications set-up in daily dose boxes.

When interviewed, March 6, 2009, employee A, an unlicensed employee, stated she set-up client #1's medications into these dose boxes for the client to self administer during breakfast, which was completed prior to employee A's shift. Employee A also stated she had been putting client #1's eye drops into her eyes since February 24, 2009, as client #1 had had surgery on her hand and was having a difficult time self administering the eye drops. Employee A added that on March 5, 2009, the physician had discontinued the eye drops until the client's next appointment in one month. There were no prescriber orders in the record for these medications.

When interviewed, March 9, 2009, the registered nurse stated she was not aware that employee A was setting up the medications for client #1 in dose boxes. She stated the licensee did not have physician orders for these medications as she thought the care giver was only providing medication reminders for client #1.

7. MN Statute §144A.44 Subd. 1(2)**INDICATOR OF COMPLIANCE: # 2**

Based on observation, record review and interview the licensee failed to provide services according to acceptable medical and nursing standards for one of one client (#1) record reviewed. The findings include:

Client #1 began receiving services from the licensee February of 2008. During the home visit for client #1, March 6, 2009, the reviewer observed employee A opening a container, containing medications, taking out a pill and putting the medication into a container. During the home visit, employee A reminded the client to take the medication and provided water for the client to use. It was also noted during the home visit that the client had medications set-up in daily dose boxes for client #1 to self administer in the mornings before employee A worked with the client.

When interviewed, March 6, 2009, employee A, an unlicensed employee, stated she set-up client #1's medications into these dose boxes for the client to self administer during breakfast, which was completed prior to employee A's shift. Employee A also stated she had been putting client #1's eye drops into her eyes since February 24, 2009, as client #1 had had surgery on her hand and was having a difficult time self administering the eye drops. Employee A added that on March 5, 2009, the physician had discontinued the eye drops until the client's next appointment in one month. There were no

prescriber orders in the record for these medications. When interviewed, March 9, 2009, the registered nurse stated she was not aware that employee A was pre-setting up the medications for client #1 in dose boxes. She stated the licensee did not have physician orders for these medications as she thought the care giver was only providing medication reminders for client #1.

8. MN Statute §626.557 Subd. 14(b)

INDICATOR OF COMPLIANCE: # 3

Based on record review and interview the licensee failed to assess and develop an individual abuse prevention plan for one of one client (#1) record reviewed. The findings include:

Client #1 began receiving services from the licensee February of 2008. The record lacked a vulnerable adult assessment and plan which addressed the person's susceptibility to abuse by other individuals and the person's risk of abusing other vulnerable adults.

When interviewed, March 6, 2009, the registered nurse stated that if she had felt the client was vulnerable to abuse others or be abused by others she would have documented it, however, if she did not feel there was a problem she did not address it. She stated she did not feel client #1 was vulnerable.

A draft copy of this completed form was faxed to Dennis Eichinger, Administrator, at an exit teleconference on March 9, 2009. Any correction order(s) issued as a result of the on-site visit and the final Licensing Survey Form will be sent to the licensee. If you have any questions about the Licensing Survey Form or the survey results, please contact the Minnesota Department of Health, (651) 201-4301. After review, this form will be posted on the MDH website. CLASS 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: <http://www.revisor.leg.state.mn.us/stats> (for MN statutes)
<http://www.revisor.leg.state.mn.us/arule/> (for MN Rules).