



*Protecting, Maintaining and Improving the Health of Minnesotans*

October 17, 2008

Vang Xiong, Administrator  
First Home Care LLC  
1010 University Avenue STE 219  
St. Paul, MN 55104

Re: Telephone Interview

Dear Mr. Xiong:

The information discussed during a telephone interview conducted by staff of the Minnesota Department of Health, Case Mix Review Program, on September 11, 2008, is summarized in the enclosed documents listed below:

Telephone Interview and Education Assessment form

A summary of the items discussed during the phone interview and a listing of the education provided during the interview

Resource Sheet for Home Care Providers

A listing of web-sites and documents useful to home care providers in assuring compliance with home care regulations

Please note, it is your responsibility to share the information contained in this letter and the information from this interview with your direct care staff and the President of your facility's Governing Body.

If you have any questions, please feel free to call our office 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

Enclosure(s)

CMR TELEPHONE 03/08



Class A and Class F Home Care  
**Telephone Interview and Education Assessment**

Registered nurses from the Minnesota Department of Health (MDH) use this form to document telephone interviews and education of newly licensed Class F and Class A (licensed only) Home Care Providers as well as other providers who have not been surveyed by Case Mix Review staff.

Licensing requirements listed below were reviewed during a telephone interview. Information from this interview along with other data will be considered when making decisions regarding the timing of an on site survey. The noted topics were discussed during the telephone interview and education was provided in the checked areas.

Name of Home Care Licensee: First Home Care LLC

HFID #: 25397

Type of License: Class A Home Care

Date of Interview: September 16, 2008

| Interview Topic              | Item Discussed   | Education Provided   |
|------------------------------|--|--|
| <b>Access to information</b> | <input checked="" type="checkbox"/> Home Care Rules and Statutes | <input checked="" type="checkbox"/> Web address for Home Care Rules and Statutes was sent (MN Statute §144A and MN Rule 4668)<br><br><input checked="" type="checkbox"/> Web address for Vulnerable Adult Act was sent (MN Statute §626.557)<br><br><input type="checkbox"/> Web address for Maltreatment of Minors Act was sent (MN Statute §626.556)<br><br><input checked="" type="checkbox"/> Board of Nursing web address was sent<br><br>Sent via: <u>E-mail</u><br><br><input checked="" type="checkbox"/> Basic Education Provided |
| <b>Client Needs</b>          | <input checked="" type="checkbox"/> Care needs of clients        | <input checked="" type="checkbox"/> Home Care licensee is required to have staff sufficient in qualifications and numbers to meet client needs (MN Rule 4668.0050)<br><br><input checked="" type="checkbox"/> Basic Education Provided   |



| Interview Topic   | Item Discussed  | Education Provided   |
|---|---|--|
| <b>Home Care Bill of Rights</b>                                 | <input checked="" type="checkbox"/> Bill of Rights given to clients   | <input checked="" type="checkbox"/> Current and appropriate version of home care bill of rights required<br><br>Minnesota Dept. of Health web-site<br><input checked="" type="checkbox"/> Basic Education Provided   |
| <b>Advertising</b>  | <input checked="" type="checkbox"/> Advertising should reflect services provided  | <input checked="" type="checkbox"/> Includes all forms of advertising MN Rule 4668.0019<br><br><input checked="" type="checkbox"/> Basic Education Provided  |
| <b>Unlicensed personnel (ULP) who provide direct care</b>       | <input checked="" type="checkbox"/> Training needed for ULP to be qualified to provide direct care<br><input checked="" type="checkbox"/> Ongoing education needed for unlicensed personnel | <input checked="" type="checkbox"/> Initial training needed MN Rule 4668.0100 Subp. 5 (Class A)<br><input checked="" type="checkbox"/> Competency testing required MN Rule 4668.0130 Subp.3 (Class A)<br><input checked="" type="checkbox"/> Inservice training MN Rule 4668.0100 Subp. 6 (Class A)<br><input checked="" type="checkbox"/> Ongoing infection control training needed MN Rule 4668.0065 Subp. 3<br><br><input checked="" type="checkbox"/> Basic Education Provided   |
| <b>Unlicensed personnel (ULP) and medication administration</b> | <input checked="" type="checkbox"/> Training required<br><input type="checkbox"/> Insulin administration by unlicensed personnel  | <input checked="" type="checkbox"/> Difference between medication administration and assistance with medication administration. MN Rule 4668.0003 Subp. 2a and Subp. 21a<br><br><input checked="" type="checkbox"/> Medication reminders – a visual or verbal cue only. MN Rule 4668.0003 Subp. 21b<br><br><input checked="" type="checkbox"/> ULP limitations with insulin administration MN Rule 4668.0100 Subp. 3 (Class A)<br><br><input checked="" type="checkbox"/> Prescriber orders required MN Rule 4668.0150 Subp. 3 (Class A)<br><br><input checked="" type="checkbox"/> Basic Education Provided |

| Interview Topic   | Item Discussed   | Education Provided   |
|---|--|--|
| <b>Role of registered nurse (RN) and licensed practical nurse (LPN)</b> | <input checked="" type="checkbox"/> Need to verify licenses of nurses<br><input checked="" type="checkbox"/> RN does assessments<br><input type="checkbox"/> LPN does monitoring | <input type="checkbox"/> Difference between RN and LPN role<br>MN Rule 4668.0180 Subp. 5 (Class A) and Minnesota Nurse Practice Act<br><br><input type="checkbox"/> Points at which RN assessment is needed - Class F requirements<br><br><input checked="" type="checkbox"/> RN assessment and change in condition<br>MN Rule 4668.0100 Subp. 9 (Class A)<br><br><input checked="" type="checkbox"/> Basic Education Provided |
| <b>Supervision of unlicensed personnel (ULP)</b>                        | <input checked="" type="checkbox"/> Requirements for supervision and monitoring of unlicensed personnel  | <input type="checkbox"/> RN supervision and LPN monitoring of unlicensed personnel<br><input checked="" type="checkbox"/> Timing of supervision and monitoring<br><br>MN Rule 4668.0100 Subp. 9 (Class A)<br><br><input checked="" type="checkbox"/> Basic Education Provided  |
| <b>Service plan or agreement</b>  | <input checked="" type="checkbox"/> Contents of Service Plan or Agreement<br><input checked="" type="checkbox"/> Person who prepares service plan                                | <input checked="" type="checkbox"/> Differentiate between licensee service plan and county service plan<br><input checked="" type="checkbox"/> Required components of service plan<br><input checked="" type="checkbox"/> Need to review service plan<br><input checked="" type="checkbox"/> Basic Education Provided<br><br>MN Rule 4668.0140 (Class A)   |
| <b>Protection of health, safety and well being of clients</b>           | <input checked="" type="checkbox"/> Background studies for all staff<br><br><input checked="" type="checkbox"/> Assessment of vulnerability for all clients                      | <input checked="" type="checkbox"/> Background studies not transferable<br><input checked="" type="checkbox"/> Only DHS background study accepted<br><br>MN Statute §144A.46 Subd. 5<br><br><input checked="" type="checkbox"/> Plan to address identified vulnerabilities required<br>MN Statute §626.557 Subd. 14b<br><br><input checked="" type="checkbox"/> Basic Education Provided                                       |

| Interview Topic          | Item Discussed  | Education Provided  |
|--------------------------|---|---|
| <b>Infection control</b> | <input checked="" type="checkbox"/> Tuberculosis screening prior to direct client contact | <input checked="" type="checkbox"/> System for follow up on TB status after hire<br>MN Rule 4668.0065 Subps. 1 & 2<br><br><input checked="" type="checkbox"/> Yearly infection control inservice required for all staff including nurses<br>MN Rule 4668.0065 Subp. 3<br><br><input checked="" type="checkbox"/> Basic Education Provided |
| <b>Assisted Living</b>   | <input type="checkbox"/> Arranged providers for assisted living required to follow 144G   | <input type="checkbox"/> Uniform Consumer Information Guide must be given to all prospective clients<br>MN Statute 144G.03 Subd. 2b9<br><br><input checked="" type="checkbox"/> Basic Education Provided  |

The data used to complete this form was reviewed with Vang Xiong Administrator during a telephone interview on September 16, 2008. A copy of this Telephone Interview and Education Assessment form will be sent to the licensee. Any questions about this Telephone Interview and Education Assessment form should be directed to the Minnesota Department of Health, (651) 201-4301. This form will be posted on the MDH web-site. Home care provider general information is available by going to the following web address and clicking on the appropriate home care provider link:

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

**Statutes and rules can be viewed on the internet:**

<http://www.revisor.leg.state.mn.us/stats> - for Minnesota Statutes

<http://www.revisor.leg.state.mn.us/arule/> - for Minnesota Rules