



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7008 1830 0003 8091 0259

April 1, 2009

Zua Xiong, Administrator
Hmong Homecare Visit LLC
30794 Reflection Avenue
Shafer, MN 55074

Re: Results of State Licensing Survey

Dear Ms. Xiong:

The above agency was surveyed on February 12, 17, 18, and 19, 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".

Jean Johnston, Program Manager
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

Division of Compliance Monitoring • Case Mix Review
85 East 7th Place Suite, 220 • PO Box 64938 • St. Paul, MN 55164-0938 • 651-201-4301
General Information: 651-201-5000 or 888-345-0823 • TTY: 651-201-5797 • Minnesota Relay Service: 800-627-3529

<http://www.health.state.mn.us>
An equal opportunity employer



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: HMONG HOMECARE VISIT LLC

HFID #: 25466

Date(s) of Survey: February 12, 17, 18 and 19, 2009

Project #: QL25466003

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><u>X</u> Survey not Expanded</p> <p>___ 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><u>X</u> Met ___ 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</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>___ 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. 4**INDICATOR OF COMPLIANCE: # 2**

Based on record review and interview, the licensee failed to ensure that in addition to the Minnesota Home Care Bill of Rights, clients were given written information on how to file a complaint about the agency or the person providing home care services for two of two client (#1 and #2) records reviewed. The findings include:

Clients #1 and #2 began receiving services April of 2008, and May of 2008, respectively. The clients had been given copies of the bill of rights that did not contain the statement regarding making a complaint with the Office of Health Facility Complaints and the Ombudsman Office, nor did it contain the telephone number and mailing address of the Office of Health Facility Complaints and Office of the Ombudsman.

When interviewed February 17, 2009, the office assistant confirmed the bill of rights given to clients did not include the information regarding making a complaint. The office assistant stated he did not realize this information needed to be included with the bill of rights.

2. MN Rule 4668.0040 Subp. 1**INDICATOR OF COMPLIANCE: # 2**

Based on record review and interview, the licensee failed to ensure that a system was established for receiving, investigating, and resolving complaints from its clients. The findings include:

The information given to clients when admitted to the agency did not include information on how the agency would handle a complaint from the client.

When interviewed February 17, 2009, regarding how the agency handled complaints from its client's, the office assistant and owner stated they had not developed a system of handling complaints from clients. The office assistant stated he was not aware of this requirement.

3. MN Rule 4668.0065 Subp. 1**INDICATOR OF COMPLIANCE: # 5**

Based on record review and interview, the licensee failed to ensure tuberculosis screening was completed for one of three employee (A) records reviewed. The findings include:

Employee A was hired to provide direct care to clients on May of 2008. There was no evidence that employee A had any tuberculosis screening.

When interviewed February 17, 2009, the office assistant confirmed that employee A had not had tuberculosis screening, and stated that he was not aware that employee A needed this screening.

4. MN Rule 4668.0070 Subp. 3**INDICATOR OF COMPLIANCE: # 5**

Based on record review and interview, the licensee failed to ensure that job descriptions were developed for three of three employee (A, B and C) records reviewed. The findings include:

Employee A was hired as a licensed direct care staff May of 2008. There was no job description for the employee A. Employees B and C were hired as unlicensed direct care givers April of 2008, and May of 2008, respectively. There was no job description for unlicensed direct care givers.

When interviewed February 17, 2009, the office assistant confirmed there were no job descriptions developed for the licensed and unlicensed care givers. The office assistant stated that they would have to develop them.

5. MN Rule 4668.0075 Subp. 1**INDICATOR OF COMPLIANCE: # 5**

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

Employees A, B and C were hired to provide direct care May of 2008, April of 2008, and May of 2008, respectively. There was no evidence of orientation to the home care requirements in their records.

When interviewed February 18, 2009, employee B did not recall receiving orientation to the home care requirements, but watched a video on problems that develop when a client was immobile.

When interviewed February 17, 2009, the office assistant confirmed they do not provide an orientation to the home care requirements to employees.

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 who performed home health aide tasks, successfully completed training and/or demonstrated competency in the required topics, for two of two unlicensed employee (B and C) records reviewed. The findings include:

Employees B and C were hired as unlicensed direct care personnel April of 2008, and May of 2008, respectively. There was no record of training or competency in their records.

When interviewed, February 18, 2009, employee B stated her training consisted of watching a video on problems that develop when a client had mobility problems.

When interviewed February 18, 2009, the registered nurse (RN) stated she trained the unlicensed staff based on the care they were to provide to a specific client, but was not aware of the specific training and/or competency requirement. The RN stated she had not documented any training she had conducted as she did not know she needed to.

7. 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 two of two client (#1 and #2) records reviewed. The findings include:

Client #1 began receiving services from the licensee April of 2008, which included assistance from employee B with dressing, grooming, bathing and transferring on a daily basis. A supervisory visit was conducted September 15, 2008, and not again until December 20, 2008. There was no evidence that the unlicensed staff person was present during any of the supervisory visits conducted since the client was admitted to the agency.

Client #2 began receiving services from the licensee May of 2008, which included assistance from employee C with bathing, dressing, and nail care on a daily basis. A supervisory visit was conducted September 15, 2008, and not again until December 20, 2008. There was no evidence that the unlicensed staff person was present during any of the supervisory visits conducted since the client was admitted to the agency.

When interviewed February 17, 2009, the office assistant confirmed that supervisory visits of the unlicensed staff were not always conducted every sixty days.

When interviewed February 18, 2009, employee B stated that the RN did not come to do a supervisory visit when she was present in the home providing cares.

When interviewed February 18, 2009, the RN confirmed that the unlicensed staff was not present when she conducted her supervisory visits. The RN stated she was not aware that this was a requirement.

8. MN Rule 4668.0140 Subp. 1

INDICATOR OF COMPLIANCE: # 1

Based on record review and interview, the licensee failed to ensure that a written service agreement was entered into with the client or the client's responsible person for two of two client (#1 and #2) records reviewed. The findings include:

Client #1 began receiving services from the licensee April of 2008, which included dressing, grooming, bathing, and transferring on a daily basis. Client #2 began receiving services from the licensee May of 2008, which included bathing, dressing and nail care on a daily basis. There was no written service agreement with the client or the client's responsible person for client #1 or #2.

When interviewed February 17, 2009, the office assistant confirmed client #1 and #2 did not have a written service agreement in their records. The office assistant stated, “We usually do one, maybe it is misplaced.”

9. MN Statute §144A.46 Subd. 5(b)

INDICATOR OF COMPLIANCE: # 3

Based on record review and interview, the licensee failed to ensure that a background study was conducted for one of three employee (A) records reviewed. The findings include:

Employee A began employment as a licensed direct care staff May of 2008. There was no background study in the employee records.

When interviewed, February 17, 2009, the office assistant stated that the licensee had not submitted a background study request for employee A. The office assistant stated he did not know that this was required for licensed staff.

10. MN Statute §626.557 Subd. 14(b)

INDICATOR OF COMPLIANCE: # 3

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

Client #1 began receiving services from the licensee April of 2008. Client #1 was identified as requiring assistance with her activities of daily living and had a diagnosis of depression. There was no individualized assessment of the client’s susceptibility to abuse or her risk of abusing other vulnerable adults.

Client #2 began receiving services from the licensee May of 2008. Client #2 required assistance with his activities of daily living and had a diagnosis of mental retardation. There was no individualized assessment of the client’s susceptibility to abuse or his risk of abusing other vulnerable adults.

When interviewed February 17, 2009, the office assistant confirmed there was no individual abuse assessment or plan for clients #1 and #2. The office assistant stated that he was not aware of this requirement.

A draft copy of this completed form was left with Plia Xiong, Owner and Kao Khang, Office Assistant, at an exit conference on February 19, 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).