



Protecting, Maintaining and Improving the Health of Minnesotans

Certified Mail # 7009 1410 0000 2303 6826

October 6, 2010

Chandas Schouvieller, Administrator
Oak Hills Living Center
1314 8th Street N
New Ulm, MN 56073

Re: Results of State Licensing Survey

Dear Ms. Schouvieller:

The above agency was surveyed on September 22 and 23, 2010, for the purpose of assessing compliance with state licensing regulations. State licensing orders 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. If further clarification is necessary, an informal conference can be arranged.

A final version of the Correction Order 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) 201-4309.

Sincerely,

A handwritten signature in cursive script, appearing to read "Patricia Nelson".

Patricia Nelson, Supervisor
Home Care & Assisted Living Program

Enclosures

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

01/07 CMR3199

Division of Compliance Monitoring Home Care & Assisted Living Program
85 East 7th Place Suite, 220 • PO Box 64900 • St. Paul, MN 55164-0900 • 651-201-5273
General Information: 651-201-5000 or 888-345-0823 • TTY: 651-201-5797 • Minnesota Relay Service: 800-627-3529

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CERTIFIED MAIL #: 7009 1410 0000 2303 6826

FROM: Minnesota Department of Health, Division of Compliance Monitoring
85 East Seventh Place, Suite 220, P.O. Box 64900, St. Paul, Minnesota 55164-0900
Home Care and Assisted Living Program



Patricia Nelson, Supervisor - (651) 201-4309

TO:	<u>CANDAS SCHOUVIELLER</u>	<u>DATE: October 6, 2010</u>
	<u>OAK HILLS LIVING CENTER</u>	<u>COUNTY: BROWN</u>
ADDRESS:	<u>1314 8TH STREET N</u>	<u>HFID: 25987</u>
	<u>NEW ULM, MN 56073</u>	

On September 22 and 23, 2010, a surveyor of this Department's staff visited the above provider and the following correction orders are issued. When corrections are completed please sign and date, make a copy of the form for your records and return the original to the above address.

Signed: _____ Date: _____

In accordance with Minnesota Statute §144A.45, this correction order has been issued pursuant to a survey. If, upon re-survey, it is found that the violation or violations cited herein are not corrected, a fine for each violation not corrected shall be assessed in accordance with a schedule of fines promulgated by rule of the Minnesota Department of Health.

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 may be considered lack of compliance and subject to a fine.

You may request a hearing on any assessments that may result from non-compliance with these orders provided that a written request is made to the Department within 15 days of receipt of a notice of assessment for non-compliance.

1. MN Statute §144A.44 Subd. 1(2)

Based on observation, record review and interview, the licensee failed to ensure medications were administered as prescribed by the physician and failed to ensure medication records were complete for one of one client (#1) record reviewed. The findings include:

Client #1 was admitted and began receiving home care services May 4, 2010, including medication set up by the registered nurse (RN). The client's record contained a physician's order, dated September 1, 2010, for Lyrica (pain) 100 milligrams (mg.) every day, Ferrous Gluconate (iron supplement) 325 mg. every day and Tylenol (pain) 500 mg. p.r.n. (as needed).

During a home visit on September 23, 2010, client #1's medication pill box was observed. The medications in the pillbox were reconciled with the prescriber's orders of September 1, 2010, and with the client's pill bottles. It was observed that there was no Ferrous Gluconate set up in the client's pill box and there was only one capsule of Lyrica set up in the Tuesday and Wednesday slot for September 28 and 29, 2010.

When interviewed during the home visit, client #1 stated she did not take the iron (Ferrous Gluconate) and took Ibuprofen for pain and not the Tylenol as ordered. Client #1 indicated there was only two Lyrica left to take and she would take them when needed. She also said she did not plan to renew the prescription because the Lyrica was too expensive.

Documentation indicated the RN set up the client's medication every week, but there was no documentation of each medication that the RN set up in the client's pill box.

When interviewed September 23, 2010, employee A (RN) stated she had not documented each medication that she had set up in client #1's pill box. She also said that the client was refusing the Ferrous Gluconate and the medication was not available to be set up in the pill box. Employee A indicated she was aware that the client was not going to reorder the Lyrica and that she should let the prescriber know what medications client #1 was refusing.

TO COMPLY: A person who receives home care services has these rights:

(2) the right to receive care and services according to a suitable and up-to-date plan, and subject to accepted medical or nursing standards, to take an active part in creating and changing the plan and evaluating care and services;

TIME PERIOD FOR CORRECTION: Seven (7) days

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