

Protecting, Maintaining and Improving the Health of All Minnesotans

# State Rapid Response Investigative Public Report

Office of Health Facility Complaints

Maltreatment Report #: HL26035003M Date Concluded: May 11, 2022

**Compliance #:** HL26035004C

Name, Address, and County of Licensee

Investigated:
Comfort Keepers
2006 First Avenue North #205
Anoka, MN 55303
Anoka County

Facility Type: Home Care Provider Evaluator's Name: Willette Shafer, RN

Special Investigator

Finding: Substantiated, facility and individual responsibility

### **Nature of Visit:**

The Minnesota Department of Health investigated an allegation of maltreatment, in accordance with the Minnesota Reporting of Maltreatment of Vulnerable Adults Act, Minn. Stat. 626.557, and to evaluate compliance with applicable licensing standards for the provider type.

### Allegation(s):

It is alleged: The alleged perpetrator (AP) financially exploited the client when the AP accepted and cashed large checks including a personal check in the amount of \$49,000, cashier's checks written to a luxury car dealership and a housing construction company.

### **Investigative Findings and Conclusion:**

Financial exploitation was substantiated. The facility and the AP were responsible for the maltreatment. The AP's bank statements indicated personal checks from the client were deposited into the AP's account while the AP was employed by the home care provider. The facility failed to ensure staff competency with handing client finances including tips, gifts, and gratuity. In addition, the facility had trained staff they could accept gifts up to \$50.

The investigation included interviews with facility staff members, including administrative staff, nursing staff, and unlicensed staff. In addition, the investigator contacted law enforcement and county adult protection. The investigator reviewed medical records, facility policies, incident

reports, and the internal investigation. The investigator also reviewed the police report and case file.

The client began home care services one year prior to the incident due to diagnoses that included diabetes, atherosclerosis, and atrial fibrillation. The client resided in his private residence and received services from the home care provider that included medication administration, bathing, cooking, laundry, and housekeeping.

According to the client's bank statements, the client wrote out at least four checks in the AP's name while the AP worked with the client. The AP's bank account indicated all four checks were deposited into the AP's account. The four checks combined total was \$54,750. The AP also deposited numerous checks into her account from the client after she stopped working for the home care provider.

During an interview, the AP said she provided home care services to the client and the client's daughter. The AP acknowledged the last date she worked for the home care provider was also the same date a \$49,000 check was deposited into her bank account. The AP said the client would "write me big checks." The AP said she believed the total amount of money she accepted from the client including checks she cashed for the client totaled roughly \$200,000. The AP said she accepted the money because it made her, and the client feel good. The AP said she told the client to write her a note that read the money was nonrefundable and that she was not obligated to pay the client back. The AP acknowledged the client received services from the home care provider. The AP said she received training on vulnerable adult maltreatment. The AP acknowledged she received education on how to handle client funds. The AP said the home care provider trained the employees not to accept any kind of funds over \$50.

During an interview, the director said all staff are trained on how to handle client funds and staff are not supposed to accept any type of gift or money that exceeded \$50. The director said she was informed by another caregiver the AP accepted financial assistance from the client and the client and the AP were observed looking for vehicles together online. The director said she completed an internal investigation including interviews with the client and several staff members. The director said she found no evidence to substantiate the allegations made. The director said education was provided to the staff on financial handling of client funds, tips, gifts, and gratuity.

During an interview, unlicensed personnel (ULP)-1 said she provided care to the client and the client's daughter. ULP-1 said she often accepted tips from the client. ULP-1 said the facility told her she could accept tips from clients. ULP-1 said the check written out to her from the client in the amount of \$392.50 was reimbursement for multiple items she purchased for the clients. ULP-1 said this was during COVID and it was hard for people to go to the bank. ULP-1 said the facility told her she could accept tips up to \$50 but never specified how often staff could accept tips. ULP-1 said she never accepted a tip over \$50 at one time.

During an interview, ULP-2 said she has never accepted money from the client. ULP-2 said the \$90.94 check written out and cashed by ULP-2 was for personal items the client asked her to buy for his daughter. ULP-2 said client funds are managed different for each client. ULP-2 said she was unsure how the client's funds were managed or who completed their shopping. ULP-2 said staff were allowed to accept tips, gifts, and gratuity but she was unsure of the exact amount staff could accept.

During an interview, ULP-3 said she provided care to the client and his daughter. ULP-3 said the client often tried to give the staff tips. ULP-3 denied accepting money from the client. ULP-3 denied accepting and cashing a check for \$200 from the client. ULP-3 stated there was information on handling client funds in a pamphlet she received when she started. ULP-3 said she is unaware of who completes the client shopping. ULP-3 said she purchased some items for the client's daughter once and the client paid her back for the items. ULP-3 said staff are allowed to accept tips and gifts from clients up to \$50.

In conclusion, financial exploitation was substantiated.

# "Financial exploitation" means:

- (a) In breach of a fiduciary obligation recognized elsewhere in law, including pertinent regulations, contractual obligations, documented consent by a competent person, or the obligations of a responsible party under section 144.6501, a person:
- (1) engages in unauthorized expenditure of funds entrusted to the actor by the vulnerable adult which results or is likely to result in detriment to the vulnerable adult; or
- (2) fails to use the financial resources of the vulnerable adult to provide food, clothing, shelter, health care, therapeutic conduct or supervision for the vulnerable adult, and the failure results or is likely to result in detriment to the vulnerable adult.
- (b) In the absence of legal authority a person:
- (1) willfully uses, withholds, or disposes of funds or property of a vulnerable adult;
- (3) acquires possession or control of, or an interest in, funds or property of a vulnerable adult through the use of undue influence, harassment, duress, deception, or fraud; or

Vulnerable Adult interviewed: No, declined interview. Family/Responsible Party interviewed: No family involved. Alleged Perpetrator interviewed: Yes.

## Action taken by facility:

The AP was no longer employed by the facility.

# Action taken by the Minnesota Department of Health:

The facility was issued a correction order regarding the vulnerable adult's right to be free from maltreatment. To view a copy of the Statement of Deficiencies and/or correction orders, please visit: https://www.health.state.mn.us/facilities/regulation/directory/provcompselect.html

Or call 651-201-4890 to be provided a copy via mail or email. If you are viewing this report on the MDH website, please see the attached Statement of Deficiencies.

The responsible party will be notified of their right to appeal the maltreatment finding. If the maltreatment is substantiated against an identified employee, this report will be submitted to the nurse aide registry for possible inclusion of the finding on the abuse registry and/or to the Minnesota Department of Human Services for possible disqualification in accordance with the provisions of the background study requirements under Minnesota 245C.

cc:

The Office of Ombudsman for Long Term Care
The Office of Ombudsman for Mental Health and Developmental Disabilities
Anoka County Attorney
Anoka City Attorney
Anoka Police Department

Minnesota Department of Health

AND PLAN	T OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	` '	LE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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	144A.43 to 144A.48 issued pursuant to a Determination of what requires compliance provided at the state When a Minnesota items, failure to combe considered lack INITIAL COMMENT #HL26035004C/#HI On March 29, 2022 Health conducted a above provider, and orders are issued. A investigation, there services under the passisted Living licer	Minnesota Statutes, section 32, these correction orders are a complaint investigation.  The ther a violation is corrected with all requirements ute number indicated below. Statute contains several analy with any of the items will of compliance.  TS:  L26035003M  The Minnesota Department of complaint investigation at the difference of the complaint were 100 clients receiving provider's Comprehensive anse.  Ction orders are issued for L26035003M, tag		Minnesota Department of Health is documenting the State Licensing Correction Orders using federal so Tag numbers have been assigned Minnesota State Statutes for Hom Providers. The assigned tag num appears in the far left column entity Prefix Tag." The state Statute number the corresponding text of the state out of compliance is listed in the "Summary Statement of Deficiency Column. This column also includes findings which are in violation of the requirement after the statement," Minnesota requirement is not met evidenced by." Following the evaluation from the Evidence of the Statement of Deficiency Corrections in the Evidence of the Statement of Deficiency Column. This column also includes findings which are in violation of the requirement after the statement, "Minnesota requirement is not met evidenced by." Following the evaluation of the Evidence of the Statement of the State	oftware. to e Care ber ded "ID ber and e Statute ies" a the ne state This as uators' rection.  DING OF  THIS  ON FOR TATE  JMN IS ES AND EVEL
0 325	144A.44, Subd. 1(a)	)(14) Free From Maltreatment	0 325	SUBDIVISION 11 (b)(1)(2).	
/linnocata Da	Subdivision 1.State	ment of rights. (a) A client who			

TITLE LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

(X6) DATE

Minnesota Department of Health

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	receives home care in an assisted living chapter 144G has to (14) be free from phoneglect, financial examples and the cover	e services in the community or facility licensed under				
	by: Based on interviews facility failed to ensi	ent is not met as evidenced s, and document review, the ure one of one clients free from maltreatment. C1 oited.		No Plan of Correction (PoC) requi Please refer to the public maltreat report (report sent separately) for of this tag.	ment	
	Health (MDH) issue financial exploitation and an individual state for the maltreatment that occurred at C1	he Minnesota Department of ed a determination that n occurred, and that the facility aff person were responsible at, in connection with incidents is private residence. The MDH as a preponderance of eatment occurred.				
	144A.479, Subd. 5 Finances/Property	Handling of Client's	0 800			
	property. (a) A home clients with household paying bills and purmay not otherwise rehome care provider	f client's finances and le care provider may assist old budgeting, including chasing household goods, but manage a client's property. A r must provide a client with sactions and purchases paid				

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	' '	ULP-B said C1 and C2's file ion on how to handle their				
		lated October 14, 2021, lacked now staff should assist C1 with ncial transactions.				
	any of the above tra	to provide documentation for ansactions. The licensee failed ifts, and gratuity accepted by				
	document indicated financial transaction buying, selling, exclusions services. Staff must possessions form acknowledgement ack	ated Financial Matters I staff must not enter into any his with clients including hanging, or bartering goods or it not borrow money or clients and should not give or and approval of management. I mally handle money on behalf clearly defined work				
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0 810 SS=G	· · · · · · · · · · · · · · · · · · ·	(b) Individual Abuse	0 810			
	implement an indivi- each vulnerable mi care services are p provider. The plan s review or assessme susceptibility to abu including other vuln	e provider must develop and idual abuse prevention plan for nor or adult for whom home rovided by a home care shall contain an individualized ent of the person's use by another individual, perable adults or minors; the using other vulnerable adults				

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION  A. BUILDING:		(X3) DATE SURVEY COMPLETED	
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0 810	measures to be tak abuse to that perso or minors. For purp plan, the term abus.  This MN Requirements by: Based on interview licensee failed to enprevention plan (IAI statements of speciminimize the risk of clients (C1) with recommendation that harmonic including serious or a violation that has serious injury, impaissued at an isolate limited number of climited number of climited number of simited number of similar s	ements of the specific en to minimize the risk of n and other vulnerable adults oses of the abuse prevention e includes self-abuse.  ent is not met as evidenced and record review, the sure the individual abuse PP) was revised to include ific measures to be taken to financial abuse for one of one	0 810			
	diagnoses included and atrial fibrillation care services on Au recent service plan indicated C1 require	d was reviewed. C1's medical, diabetes, atherosclerosis, . C1 began receiving home igust 18, 2021. C1's most dated, January 19, 2022, ed assistance with bathing, on set-up, meal prep, and				
	C1 was not vulnera	eptember 3, 2021, indicated ble to financial exploitation.  Ints were reviewed. C1's bank				

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		H26035	B. WING			9/2022
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	statements indicated personnel (ULP)-A' C1 and C1's family least four times whithe licensee. The awritten from C1 and name and deposite \$54,750.  ULP-A's electronic were reviewed. ULF indicated ULP-A debank account. ULP the four checks total deposited into ULP C1's account are as check written from deposited into ULP 23, 2021, check writer and check written from deposited into ULP 23, 2021, check writer and check written from deposited into ULP 23, 2021, check writer and check	ed checks written in unlicensed is name, were withdrawn from member's (FM) account at the ULP-A was employed with mount of the four checks of FM's account in ULP-A's in ULP-A's account totaled deposits and bank statements posited all four checks into here. A's bank account indicated aled \$54,750. The checks had account written from a follows: October 9, 2021, C1 and FM's joint account and had account for \$400, October account for				
	\$5,000, October 25 and FM's joint account ULP-A's account fo 2021, check written	, 2021, check written from C1 ount and deposited into r \$350.00, November 26, from C1 and FM's joint ited into ULP-A's account for				
		pdates to reflect C1's ked intervention to reduce the loitations.				
	said staff reported of providing financial a she was informed by accepted financial and C1 were observed.	at 11:06 a.m., director (D)-E concerns relating to C1 assistance to ULP-A. D-E said by another caregiver ULP-A assistance from C1 and ULP-A wed looking for vehicles as aid C1 tried to give staff as were performed.				

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0 810	provided home care acknowledged the I licensee at C1's prividate a \$49,000 che account written from C1 would "write me believed the total ar from C1 along with totaled roughly \$200 accepted the mone C1 feel good. ULP-a note that indicated nonrefundable and pay C1 back any m C1 received service said she received tr maltreatment policy provided education ULP-A said the licentot to accept funds. The licensee's unda Condition/Status por review and update to changes in needs.	11:05 a.m., ULP-A said she services to C1. ULP-A ast date she worked for the vate residence was the same ck was deposited into her n C1's account. ULP-A said big checks." ULP-A said she mount of money she accepted checks she cashed for C10,000. ULP-A said she y because it made her, and A said she told C1 to write her d the money was that she is not obligated to oney. ULP-A acknowledged as from the licensee. ULP-A raining on the vulnerable adult of the ULP-A said the licensee on how to handle client funds. The insee trained the employees over \$50.	0 810			

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