

STATE LICENSING COMPLIANCE REPORT

Report #: HL30754001C

Date Concluded: April 25, 2022

Name, Address, and County of Facility

Investigated:

Arbor Lakes Sr. Living
12001 80th Ave. N. Maple Grove, MN 55369
Hennepin County

**Facility Type: Assisted Living Facility with
Dementia Care (ALFDC)**

Evaluator's Name:

Maerin Renee, RN, Special Investigator
James Larson, RN, Special Investigator

The Minnesota Department of Health conducted a complaint investigation to determine compliance with state laws and rules governing the provision of care under Minnesota Statutes, Chapter 144G. The purpose of this complaint investigation was to review if facility policies and practices comply with applicable laws and rules. No maltreatment under Minnesota Statutes, Chapter 626 was alleged.

To view a copy of the correction orders, if any, please visit:

<https://www.health.state.mn.us/facilities/regulation/directory/provcompselect.html>, or call 651-201-4201 to be provided a copy via mail or email. If you are viewing this report on the MDH website, please see the attached state form.

Minnesota Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 30754	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 04/19/2022
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NAME OF PROVIDER OR SUPPLIER ARBOR LAKES SENIOR LIVING LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 12001 80TH AVENUE NORTH MAPLE GROVE, MN 55369
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0 000	<p>Initial Comments</p> <p>Initial comments *****ATTENTION*****</p> <p>ASSISTED LIVING PROVIDER LICENSING CORRECTION ORDER</p> <p>In accordance with Minnesota Statutes, section 144A.43 to 144A.482/144G.08 to 144G.95, these correction orders are issued pursuant to a complaint investigation.</p> <p>Determination of whether a violation is corrected requires compliance with all requirements provided at the statute number indicated below. When a Minnesota Statute contains several items, failure to comply with any of the items will be considered lack of compliance.</p> <p>INITIAL COMMENTS: #HL30754001C</p> <p>On April 19, 2022, the Minnesota Department of Health conducted a complaint investigation at the above provider, and the following correction orders are issued. At the time of the complaint investigation, there were 175 residents receiving services under the providers Assisted Living with Dementia Care license.</p> <p>The following correction orders are issued for #HL30754001C, tag identification 1370, 1380, 1460, and 1470 .</p>	0 000	<p>Minnesota Department of Health is documenting the State Licensing Correction Orders using federal software. Tag numbers have been assigned to Minnesota State Statutes for Assisted Living Facilities. The assigned tag number appears in the far left column entitled "ID Prefix Tag." The state Statute number and the corresponding text of the state Statute out of compliance is listed in the "Summary Statement of Deficiencies" column. This column also includes the findings which are in violation of the state requirement after the statement, "This Minnesota requirement is not met as evidenced by." Following the evaluators' findings is the Time Period for Correction.</p> <p>PLEASE DISREGARD THE HEADING OF THE FOURTH COLUMN WHICH STATES,"PROVIDER'S PLAN OF CORRECTION." THIS APPLIES TO FEDERAL DEFICIENCIES ONLY. THIS WILL APPEAR ON EACH PAGE.</p> <p>THERE IS NO REQUIREMENT TO SUBMIT A PLAN OF CORRECTION FOR VIOLATIONS OF MINNESOTA STATE STATUTES.</p> <p>THE LETTER IN THE LEFT COLUMN IS USED FOR TRACKING PURPOSES AND REFLECTS THE SCOPE AND LEVEL ISSUED PURSUANT TO 144G.31 SUBDIVISION 1-3.</p>	
01370 SS=F	144G.61 Subd. 2 (a) Training and evaluation of unlicensed personn	01370		

Minnesota Department of Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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01370	<p>Continued From page 1</p> <p>(a) Training and competency evaluations for all unlicensed personnel must include the following:</p> <ul style="list-style-type: none"> (1) documentation requirements for all services provided; (2) reports of changes in the resident's condition to the supervisor designated by the facility; (3) basic infection control, including blood-borne pathogens; (4) maintenance of a clean and safe environment; (5) appropriate and safe techniques in personal hygiene and grooming, including: <ul style="list-style-type: none"> (i) hair care and bathing; (ii) care of teeth, gums, and oral prosthetic devices; (iii) care and use of hearing aids; and (iv) dressing and assisting with toileting; (6) training on the prevention of falls; (7) standby assistance techniques and how to perform them; (8) medication, exercise, and treatment reminders; (9) basic nutrition, meal preparation, food safety, and assistance with eating; (10) preparation of modified diets as ordered by a licensed health professional; (11) communication skills that include preserving the dignity of the resident and showing respect for the resident and the resident's preferences, cultural background, and family; (12) awareness of confidentiality and privacy; (13) understanding appropriate boundaries between staff and residents and the resident's family; (14) procedures to use in handling various emergency situations; and (15) awareness of commonly used health 	01370		

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01370	<p>Continued From page 2</p> <p>technology equipment and assistive devices.</p> <p>This MN Requirement is not met as evidenced by: Based on interview and record review, the facility failed to ensure a registered nurse (RN) trained and competency-evaluated staff in all required topics for three of three employees, unlicensed personnel (ULP-(A), ULP-B, and ULP-C) with employee records reviewed. This had the potential to affect all residents residing at the facility.</p> <p>This practice resulted in a level two violation (a violation that did not harm a resident's health or safety but had the potential to have harmed a resident's health or safety) and was issued at a widespread scope (when problems are pervasive or represent a systemic failure that has affected or has the potential to affect a large portion or all of the residents).</p> <p>The findings include:</p> <p>ULP-A was hired on August 15, 2017, under the comprehensive home care license. ULP-A began providing assisted living services to licensee's residents on August 1, 2021.</p> <p>ULP-A's employee training records lacked evidence of successful completion of practical skills evaluations as required for training in accordance with assisted living 144G statutes in the following areas:</p> <ul style="list-style-type: none"> -documentation requirements for all services provided; -reports of changes in the resident's condition to the supervisor designated by the facility; -basic infection control; 	01370		
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01370	<p>Continued From page 3</p> <ul style="list-style-type: none"> -maintenance of a clean and safe environment; -appropriate and safe techniques in personal hygiene and grooming; -standby assistance techniques and how to perform them; -medication, exercise, and treatment reminders; -basic nutrition, meal preparation, food safety, and assistance with eating; -preparation of modified diets as ordered by a licensed health professional; -communication skills that include preserving the dignity of the resident and showing respect for the resident and the resident's preferences, cultural background, and family; -awareness of confidentiality and privacy; -understanding of appropriate boundaries between staff and residents and the resident's family; -procedures to use in handling various emergency situations; and -awareness of commonly used health technology equipment and assistive devices. <p>ULP-B was hired on August 2, 2017, under the comprehensive home care license. ULP-B began providing assisted living services on August 1, 2021.</p> <p>ULP-B's employee training records lacked evidence of successful completion of practical skills evaluations as required for training in accordance with assisted living 144G statutes in the following areas:</p> <ul style="list-style-type: none"> -documentation requirements for all services provided; -reports of changes in the resident's condition to the supervisor designated by the facility; -basic infection control; -maintenance of a clean and safe environment; 	01370		

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01370	<p>Continued From page 4</p> <ul style="list-style-type: none"> -appropriate and safe techniques in personal hygiene and grooming; -standby assistance techniques and how to perform them; -medication, exercise, and treatment reminders; -basic nutrition, meal preparation, food safety, and assistance with eating; -preparation of modified diets as ordered by a licensed health professional; -communication skills that include preserving the dignity of the resident and showing respect for the resident and the resident's preferences, cultural background, and family; -awareness of confidentiality and privacy; -understanding of appropriate boundaries between staff and residents and the resident's family; -procedures to use in handling various emergency situations; and -awareness of commonly used health technology equipment and assistive devices. <p>ULP-C was hired on May 27, 2021, under the comprehensive home care license. ULP-C began providing assisted living services on August 1, 2021.</p> <p>ULP-C's employee training records lacked evidence of successful completion of practical skills evaluations as required for training in accordance with assisted living 144G statutes in the following areas:</p> <ul style="list-style-type: none"> -documentation requirements for all services provided; -reports of changes in the resident's condition to the supervisor designated by the facility; -basic infection control; -maintenance of a clean and safe environment; -appropriate and safe techniques in personal 	01370		

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01370	<p>Continued From page 5</p> <p>hygiene and grooming; -standby assistance techniques and how to perform them; -medication, exercise, and treatment reminders; -basic nutrition, meal preparation, food safety, and assistance with eating; -preparation of modified diets as ordered by a licensed health professional; -communication skills that include preserving the dignity of the resident and showing respect for the resident and the resident's preferences, cultural background, and family; -awareness of confidentiality and privacy; -understanding of appropriate boundaries between staff and residents and the resident's family; -procedures to use in handling various emergency situations; and -awareness of commonly used health technology equipment and assistive devices.</p> <p>On April 19, 2022, at approximately 1:15 p.m., residence director (RD)-D stated leadership was unaware of the need to retrain staff in accordance with 144G statutes so training had not been completed.</p> <p>The facility policy titled Competency Training Evaluations dated August 1, 2021, indicated staff providing delegated services must demonstrate competency of tasks in accordance with 144G statutes.</p> <p>TIME PERIOD FOR CORRECTION: Twenty-one (21) days.</p>	01370		
01380 SS=F	144G.61 Subd. 2 (b) Training and evaluation of unlicensed personn	01380		

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01380	<p>Continued From page 6</p> <p>(b) In addition to paragraph (a), training and competency evaluation for unlicensed personnel providing assisted living services must include:</p> <ol style="list-style-type: none"> (1) observing, reporting, and documenting resident status; (2) basic knowledge of body functioning and changes in body functioning, injuries, or other observed changes that must be reported to appropriate personnel; (3) reading and recording temperature, pulse, and respirations of the resident; (4) recognizing physical, emotional, cognitive, and developmental needs of the resident; (5) safe transfer techniques and ambulation; (6) range of motioning and positioning; and (7) administering medications or treatments as required. <p>This MN Requirement is not met as evidenced by: Based on interview and record review, the facility failed to ensure the registered nurse (RN)-B trained and competency-tested in all required topics for three of three employees, unlicensed personnel (ULP-(A), ULP-B, and ULP-C) with employee records reviewed. This had the potential to affect all residents residing in the facility.</p> <p>This practice resulted in a level two violation (a violation that did not harm a resident's health or safety but had the potential to have harmed a resident's health or safety) and was issued at a widespread scope (when problems are pervasive or represent a systemic failure that has affected or has the potential to affect a large portion or all of the residents).</p> <p>The findings include:</p>	01380		

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01380	<p>Continued From page 7</p> <p>ULP-A was hired on August 15, 2017, under the comprehensive home care license. ULP-A began providing assisted living services to licensee's residents on August 1, 2021.</p> <p>ULP-A's employee training records lacked evidence of successful completion of practical skills evaluations as required for training in accordance with assisted living 144G statutes in the following areas:</p> <ul style="list-style-type: none"> -observing, reporting, and documenting resident status; -basic knowledge of body functioning and changes in body functioning, injuries, or other observed changes that must be reported to appropriate personnel; -reading and recording temperature, pulse, respirations of the resident; -recognizing physical, emotional, cognitive, and developmental needs of the resident; -safe transfer and ambulation techniques and ambulation; -range of motion and positioning; -administering medications or treatments as required. <p>ULP-B was hired on August 2, 2017, under the comprehensive home care license. ULP-B began providing assisted living services on August 1, 2021.</p> <p>ULP-B's employee training records lacked evidence of successful completion of practical skills evaluations as required for training in accordance with assisted living 144G statutes in the following areas:</p> <ul style="list-style-type: none"> -observing, reporting, and documenting resident status; 	01380		

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01380	<p>Continued From page 8</p> <ul style="list-style-type: none"> -basic knowledge of body functioning and changes in body functioning, injuries, or other observed changes that must be reported to appropriate personnel; -reading and recording temperature, pulse, respirations of the resident; -recognizing physical, emotional, cognitive, and developmental needs of the resident; -safe transfer and ambulation techniques and ambulation; -range of motion and positioning; -administering medications or treatments as required. <p>ULP-C was hired on May 27, 2021, under the comprehensive home care license. ULP-C began providing assisted living services on August 1, 2021.</p> <p>ULP-C's employee training records lacked evidence of successful completion of practical skills evaluations as required for training in accordance with assisted living 144G statutes in the following areas:</p> <ul style="list-style-type: none"> -observing, reporting, and documenting resident status; -basic knowledge of body functioning and changes in body functioning, injuries, or other observed changes that must be reported to appropriate personnel; -reading and recording temperature, pulse, respirations of the resident; -recognizing physical, emotional, cognitive, and developmental needs of the resident; -safe transfer and ambulation techniques and ambulation; -range of motion and positioning; -administering medications or treatments as required. 	01380		

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01380	<p>Continued From page 9</p> <p>During interview on April 19, 2022, at approximately 1:15 p.m., residence director (RD)-D stated leadership was unaware of the need to retrain staff in accordance with 144G statutes, so training had not been completed.</p> <p>The facility policy titled Competency Training Evaluations dated August 1, 2021, staff providing delegated services must demonstrate competency of tasks in accordance with 144G statutes.</p> <p>No further information was provided.</p> <p>TIME PERIOD FOR CORRECTION: Twenty-one (21) days.</p>	01380		
01460 SS=F	<p>144G.63 Subdivision 1 Orientation of staff and supervisors</p> <p>All staff providing and supervising direct services must complete an orientation to assisted living facility licensing requirements and regulations before providing assisted living services to residents. The orientation may be incorporated into the training required under subdivision 5. The orientation need only be completed once for each staff person and is not transferable to another facility.</p> <p>This MN Requirement is not met as evidenced by: Based on interview and record review, the licensee failed to ensure orientation to assisted living licensing requirements and regulations was provided for three of three employees, unlicensed personnel (ULP-(A), ULP-B, and ULP-C), with records reviewed. This had the potential to affect</p>	01460		

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01460	<p>Continued From page 10</p> <p>all residents receiving assisted living services.</p> <p>This practice resulted in a level two violation (a violation that did not harm a resident's health or safety but had the potential to have harmed a resident's health or safety) and was issued at a widespread scope (when problems are pervasive or represent a systemic failure that has affected or has the potential to affect a large portion or all of the residents).</p> <p>The findings include:</p> <p>ULP-A was hired on August 15, 2017, under the comprehensive home care license. ULP-A began providing assisted living services to licensee's residents on August 1, 2021.</p> <p>ULP-A's employee training records lacked evidence of successful completion of assisted living orientation in accordance with 144G statutes.</p> <p>ULP-B was hired on August 2, 2017, under the comprehensive home care license. ULP-B began providing assisted living services on August 1, 2021.</p> <p>ULP-B's employee training records lacked evidence of successful completion of assisted living orientation in accordance with 144G statutes.</p> <p>ULP-C was hired on May 27, 2021, under the comprehensive home care license. ULP-C began providing assisted living services on August 1, 2021.</p> <p>ULP-C's employee training records lacked evidence of successful completion of assisted</p>	01460		

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01460	<p>Continued From page 11</p> <p>living orientation in accordance with 144G statutes.</p> <p>On April 19, 2022, at 1:15 p.m., residence director (RD)-D stated leadership was unaware of the need to retrain staff in accordance with 144G statutes, so training had not been completed.</p> <p>The facility policy titled Orientation of Staff and Supervisors & Content dated August 1, 2021, indicated all staff providing and supervising direct care services must complete an orientation to Assisted Living facility licensing requirements and regulations.</p> <p>No further information was provided.</p> <p>TIME PERIOD FOR CORRECTION: Twenty-one (21) days.</p>	01460		
01470 SS=F	<p>144G.63 Subd. 2 Content of required orientation</p> <p>(a) The orientation must contain the following topics:</p> <p>(1) an overview of this chapter;</p> <p>(2) an introduction and review of the facility's policies and procedures related to the provision of assisted living services by the individual staff person;</p> <p>(3) handling of emergencies and use of emergency services;</p> <p>(4) compliance with and reporting of the maltreatment of vulnerable adults under section 626.557 to the Minnesota Adult Abuse Reporting Center (MAARC);</p> <p>(5) the assisted living bill of rights and staff responsibilities related to ensuring the exercise and protection of those rights;</p>	01470		

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01470	<p>Continued From page 12</p> <p>(6) the principles of person-centered planning and service delivery and how they apply to direct support services provided by the staff person;</p> <p>(7) handling of residents' complaints, reporting of complaints, and where to report complaints, including information on the Office of Health Facility Complaints;</p> <p>(8) consumer advocacy services of the Office of Ombudsman for Long-Term Care, Office of Ombudsman for Mental Health and Developmental Disabilities, Managed Care Ombudsman at the Department of Human Services, county-managed care advocates, or other relevant advocacy services; and</p> <p>(9) a review of the types of assisted living services the employee will be providing and the facility's category of licensure.</p> <p>(b) In addition to the topics in paragraph (a), orientation may also contain training on providing services to residents with hearing loss. Any training on hearing loss provided under this subdivision must be high quality and research based, may include online training, and must include training on one or more of the following topics:</p> <p>(1) an explanation of age-related hearing loss and how it manifests itself, its prevalence, and the challenges it poses to communication;</p> <p>(2) health impacts related to untreated age-related hearing loss, such as increased incidence of dementia, falls, hospitalizations, isolation, and depression; or</p> <p>(3) information about strategies and technology that may enhance communication and involvement, including communication strategies, assistive listening devices, hearing aids, visual and tactile alerting devices, communication access in real time, and closed captions.</p>	01470		

Minnesota Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 30754	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 04/19/2022
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NAME OF PROVIDER OR SUPPLIER ARBOR LAKES SENIOR LIVING LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 12001 80TH AVENUE NORTH MAPLE GROVE, MN 55369
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
01470	<p>Continued From page 13</p> <p>This MN Requirement is not met as evidenced by: Based on interview and record review, the facility failed to ensure three of three employees, unlicensed personnel (ULP-(A), ULP-B, and ULP-C), received the required orientation content for 144G licensing requirements with training records reviewed. This had the potential to affect all residents residing in the facility.</p> <p>This practice resulted in a level two violation (a violation that did not harm a resident's health or safety but had the potential to have harmed a resident's health or safety) and was issued at a widespread scope (when problems are pervasive or represent a systemic failure that has affected or has the potential to affect a large portion or all of the residents).</p> <p>The findings include:</p> <p>ULP-A was hired on August 15, 2017, under the comprehensive home care license. ULP-A began providing assisted living services to licensee's residents on August 1, 2021.</p> <p>ULP-A's employee training records lacked evidence of successful completion of assisted living orientation in accordance with 144G statutes in the following areas:</p> <ul style="list-style-type: none"> -an overview of 144G statutes -an introduction and review of the facility's policies and procedures related to the provision of assisted living services -handling of emergencies and use of emergency services -compliance with and reporting of the maltreatment of vulnerable adults -the assisted living bill of rights 	01470		

Minnesota Department of Health

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01470	<p>Continued From page 14</p> <ul style="list-style-type: none"> -the principles of person-centered planning and service delivery -handling of resident complaints, reporting of complaints, and where to report complaints -consumer advocacy services of the office of the Ombudsman for Long-Term Care, Office of Ombudsman for Mental Health and Developmental Disabilities, Managed Care Ombudsman at the Department of Human Services, county-managed care advocates, or other relevant advocacy services -a review of the types of assisted living services the employee will be providing and the facility's category of licensure <p>ULP-B was hired on August 2, 2017, under the comprehensive home care license. ULP-B began providing assisted living services on August 1, 2021.</p> <p>ULP-B's employee training records lacked evidence of successful completion of assisted living orientation in accordance with 144G statutes.</p> <ul style="list-style-type: none"> -an overview of 144G statutes -an introduction and review of the facility's policies and procedures related to the provision of assisted living services -handling of emergencies and use of emergency services -compliance with and reporting of the maltreatment of vulnerable adults -the assisted living bill of rights -the principles of person-centered planning and service delivery -handling of resident complaints, reporting of complaints, and where to report complaints -consumer advocacy services of the office of the Ombudsman for Long-Term Care, Office of 	01470		

Minnesota Department of Health

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01470	<p>Continued From page 15</p> <p>Ombudsman for Mental Health and Developmental Disabilities, Managed Care Ombudsman at the Department of Human Services, county-managed care advocates, or other relevant advocacy services</p> <p>-a review of the types of assisted living services the employee will be providing and the facility's category of licensure</p> <p>ULP-C was hired on May 27, 2021, under the comprehensive home care license. ULP-C began providing assisted living services on August 1, 2021.</p> <p>ULP-C's employee training records lacked evidence of successful completion of assisted living orientation in accordance with 144G statutes.</p> <p>-an overview of 144G statutes</p> <p>-an introduction and review of the facility's policies and procedures related to the provision of assisted living services</p> <p>-handling of emergencies and use of emergency services</p> <p>-compliance with and reporting of the maltreatment of vulnerable adults</p> <p>-the assisted living bill of rights</p> <p>-the principles of person-centered planning and service delivery</p> <p>-handling of resident complaints, reporting of complaints, and where to report complaints</p> <p>-consumer advocacy services of the office of the Ombudsman for Long-Term Care, Office of Ombudsman for Mental Health and Developmental Disabilities, Managed Care Ombudsman at the Department of Human Services, county-managed care advocates, or other relevant advocacy services</p> <p>-a review of the types of assisted living services</p>	01470		

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01470	<p>Continued From page 16</p> <p>the employee will be providing and the facility's category of licensure</p> <p>On April 19, 2022, at approximately 1:15 p.m., residence director (RD)-D stated leadership was unaware of the need to retrain staff in accordance with 144G statutes, so training had not been completed.</p> <p>The facility policy titled Orientation of Staff and Supervisors & Content dated August 1, 2021, all staff providing and supervising direct care services must complete an orientation to Assisted Living facility licensing requirements and regulations.</p> <p>No further information was provided.</p> <p>TIME PERIOD FOR CORRECTION: Twenty-one (21) days.</p>	01470		