

# STATE LICENSING COMPLIANCE REPORT

**Report #:** HL200771404C

**Date Concluded:** March 18, 2024

**Name, Address, and County of Facility**

**Investigated:**

Brookstone Manor  
722 North Pokegama Avenue  
Grand Rapids, MN 55744  
Itasca County

**Facility Type:** Assisted Living Facility (ALF)

**Evaluator's Name:** Rhylee Gilb, 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:  20077	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____		(X3) DATE SURVEY COMPLETED  C 03/07/2024
NAME OF PROVIDER OR SUPPLIER  BROOKSTONE MANOR			STREET ADDRESS, CITY, STATE, ZIP CODE 722 NORTH POKEGAMA AVENUE GRAND RAPIDS, MN 55744		
(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	
0 000	<p>Initial Comments</p> <p>*****ATTENTION*****</p> <p>ASSISTED LIVING PROVIDER CORRECTION ORDER</p> <p>In accordance with Minnesota Statutes, section 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:</p> <p>HL200771404C</p> <p>On March 7, 2024, 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 41 residents receiving services under the provider's Assisted Living license.</p> <p>The following correction order is issued for HL200771404C, tag identification 1290.</p>	0 000	<p>Minnesota Department of Health is documenting the State Correction Orders using federal software. Tag numbers have been assigned to Minnesota State Statutes for Assisted Living License Providers. 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 surveyors' 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 subd. 1, 2, and 3.</p>		
01290 SS=F	<p>144G.60 Subdivision 1 Background studies required</p> <p>(a) Employees, contractors, and regularly</p>	01290			

Minnesota Department of Health

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

TITLE

(X6) DATE



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01290	<p>Continued From page 1</p> <p>scheduled volunteers of the facility are subject to the background study required by section 144.057 and may be disqualified under chapter 245C. Nothing in this subdivision shall be construed to prohibit the facility from requiring self-disclosure of criminal conviction information.</p> <p>(b) Data collected under this subdivision shall be classified as private data on individuals under section 13.02, subdivision 12.</p> <p>(c) Termination of an employee in good faith reliance on information or records obtained under this section regarding a confirmed conviction does not subject the assisted living facility to civil liability or liability for unemployment benefits.</p> <p>This MN Requirement is not met as evidenced by: Based on interview and document review, the licensee failed to immediately remove an unlicensed personnel (ULP)-A when directed by the Minnesota Department of Health (MDH) and Department of Human Services (DHS) for one of one employee (ULP-A) reviewed. ULP-A was disqualified in 2021 and continued to provide direct care to residents until January 24, 2024.</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, but was not likely to cause serious injury, impairment, or death), and was issued at a widespread scope (when problems are pervasive or represent a systemic failure that has affected or has potential to affect a large portion or all of the residents).</p> <p>The findings include:</p> <p>ULP-A's personnel records were reviewed. ULP-A hired on November 21, 2019, under the</p>	01290			

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01290	<p>Continued From page 2</p> <p>licensee's comprehensive home care provider license at the same street address and facility name as the licensee prior to 144G. ULP-A's record included a cleared background study dated November 20, 2019.</p> <p>ULP-A's record failed to include background study information during the conversion of the licensee's license to an Assisted Living facility license on August 1, 2021.</p> <p>DHS Netstudy records indicated DHS issued a background study disqualification notice dated April 23, 2021, for ULP-A to the licensee while operating under the comprehensive license. The licensee submitted a request for reconsideration of the disqualification of ULP-A, received by DHS on July 7, 2021. After conversion to an Assisted Living facility license, the licensee submitted a background study request for ULP-A. A letter dated October 20, 2021, from MDH requested additional information for the reconsideration to ULP-A to be submitted by November 12, 2021. ULP-A provided MDH court records received on December 9, 2021.</p> <p>MDH provided to the licensee a letter notice dated December 16, 2021, indicated the reconsideration determined no set aside of ULP-A's disqualification and ordered the licensee to immediately remove ULP-A from direct contact and access to residents.</p> <p>ULP-A's personnel records indicated ULP-A remained employed in her role after the immediate removal order. ULP-A's records included an annual review completed on January 19, 2022 and November 30, 2022.</p> <p>MDH survey documents indicated on August 23,</p>	01290			



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01290	<p>Continued From page 3</p> <p>2023, the MDH surveyor spoke to regional director (RD)-B and RD-B reported ULP-A's cleared background study was affiliated with the wrong HFID number.</p> <p>DHS Netstudy records indicated the licensee submitted a background study request for ULP-A on August 29, 2023. A DHS letter notice dated September 13, 2023, indicated ULP-A failed to provide finger prints and a photo. The notice directed the licensee to immediately remove ULP-A.</p> <p>ULP-A's personnel records failed to include the background study requested submitted August 29, 2023 and the DHS notice to immediately remove ULP-A dated September 13, 2023.</p> <p>ULP-A's personnel record included a licensee background study request dated September 17, 2023. A DHS letter notice dated September 13, 2023, indicated ULP-A was disqualified and directed the licensee to immediately remove ULP-A.</p> <p>The licensee staff schedules dated October, November and December 2023, indicated ULP-A continued to work in her position.</p> <p>ULP-A's personnel records included an annual review dated November 30, 2023, completed while she was disqualified.</p> <p>DHS Netstudy records included a DHS notice letter dated December 4, 2023, issued to the licensee, indicated the request for reconsideration for ULP-A was not received and ULP-A may not return to her position.</p> <p>ULP-A's personnel records included another</p>	01290			

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01290	<p>Continued From page 4</p> <p>submission by the licensee for a background study on January 9, 2024. A DHS notice letter dated January 17, 2024, indicated ULP-A was disqualified.</p> <p>DHS Netstudy records indicated the licensee submitted a request for reconsideration of ULP-A's disqualification on January 29, 2024. MDH provided to the licensee a letter notice dated February 20, 2024, indicated the reconsideration determined no set aside of ULP-A's disqualification and ordered the licensee to immediately remove ULP-A from direct contact and access to residents.</p> <p>The facility staff schedules dated January and February, 2024, indicated ULP-A's last scheduled shift was January 24, 2024, scheduled to work 10:00 p.m. to 6:00 a.m. (January 25, 2024). ULP-A was also scheduled January 23, 2024, scheduled to work from 10:00 p.m. to 6:00 a.m. (January 24, 2024).</p> <p>During an interview on March 14, 2024, at 10:12 a.m., ULP-A stated her last day of work was January 23, 2024. She had been working full time for the facility since November 2019 as a home health aide. ULP-A said in the beginning she had issues with her background study, but the executive director [(ED)-D] at the time said they were fine. ULP-A denied receiving direct disqualification letters from DHS. ULP-A stated this last time, she received an email from DHS regarding her background study and put on a leave of absence after January 23, 2024 shift. On February 23, 2024, ULP-A said she was told she could not return to work because ED-C said the facility could not provide continuous supervision.</p> <p>During an interview on March 18, 2024, at 10:37</p>	01290			

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01290	<p>Continued From page 5</p> <p>a.m., RD-B stated she has been in her role for about a year and half. RD-B stated the licensee had several change over of staff in the ED role. ED-C had just recently quite on March 12, 2024, there was another ED in place between ED-C and ED-D. RD-B stated the licensee had also began utilizing an electronic system to store personnel records. RD-B was unsure why ULP-A's background study records of 2021 were not a part of ULP-A's personnel file and it may have gotten missed. RD-B stated she was unable to access the 2021 records from Netstudy due to changing ULP-A to removed in the facility access portal. RD-B stated no residents reported complaints of ULP-A while she had been working during the disqualification.</p> <p>TIME PERIOD OF CORRECTION: Two (2) Days</p>	01290			