

# State Rapid Response Investigative Public Report

*Office of Health Facility Complaints*

**Maltreatment Report #:** HL99997025M  
**Compliance #:** HL99997026C

**Date Concluded:** October 24, 2022

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

**Investigated:**

Haven HomeCare Inc  
21037 Ivory Lane  
Lakeville, MN 55044  
Dakota County

**Evaluator's Name:**

Lisa Coil, RN Special Investigator  
Paul Spencer, RN Special Investigator

**Facility Type:** Home Care Provider

**Finding:** Substantiated, 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.

**Initial Investigation Allegation(s):**

The alleged perpetrator (AP) financially exploited the client when the AP used the client's credit cards for personal purchases without the client's authorization.

**Investigative Findings and Conclusion:**

The Minnesota Department of Health determined financial exploitation was substantiated. The AP was responsible for the maltreatment. The used the client's credit card to for personal purchases such as a medical appointment.

The investigator conducted an interview with the provider's administrative staff. The investigator contacted the client's family members. The investigation included review of law enforcement report.

According to the family interview, the client received comprehensive home care services in their home related to blindness. The client's medical records were not reviewed because the provider did not provide the requested documents.

During the time when the AP provided home care services to the client, the client's credit card statement included a charge for a medical appointment for \$460.00. The client's credit card statement also indicated the client's Amazon Shop points had been redeemed at an estimated value of \$872.05.

A review of the billing statement from the same clinic for the same date for the same amount indicated the person to bill was the AP. The billing statement indicated the bill had been paid in full.

A police report indicated the client's family became concerned about the AP and decided to terminate his employment. However, the AP refused to leave the client's home claiming he was locked out of his own home and stayed overnight. After the AP left the next afternoon, the family began to look more closely at the recent activity on the client's electronic devices and charges on the client's credit cards. The same document indicated there were multiple charges on the client's credit card, which were not made by the client and evidence someone other than the client had changed passwords for online accounts, made purchases, and routed information to cell phone number(s) associated with the AP. The same document indicated the medical appointment for \$460.00 was not for the client.

During an interview, the client's family member (FM) became concerned about the AP listening in on conversations and looking at private computers. The family decided to terminate employment of the AP, however the AP refused to leave the client's home until the next day. The FM stated the AP had set up smart speakers around the client's home. The FM stated the client's electronic devices has been used and online account had been changed. The FM stated they were unable to access or authenticate multiple accounts and they were unable to find the client's cell phone after AP left the client's home. The FM stated they hired a computer forensic who discovered the account changes linked back to AP's cell phone number and the client's Amazon account had been changed. The FM stated they found unauthorized purchases were made on the client's Amazon account, credit card, and the client's customer points had been redeemed without permission.

During an interview, the providers administrative (ADM) staff stated the family notified her of the incident and the needed for a new caregiver because of termination of the AP. ADM stated she was not involved in the investigation of the unauthorized transactions because the family took care of everything.

In conclusion, the Minnesota Department of Health determined financial exploitation was substantiated.

**Substantiated: Minnesota Statutes, section 626.5572, Subdivision 19.**

“Substantiated” means a preponderance of evidence shows that an act that meets the definition of maltreatment occurred.

**Financial exploitation: Minnesota Statutes, section 626.5572, subdivision 9**

"Financial exploitation" means:

(b) In the absence of legal authority, a person:

- (1) willfully uses, withholds, or disposes of funds or property of a vulnerable adult;
- (2) obtains for the actor or another the performance of services by a third person for the wrongful profit or advantage of the actor or another to the detriment of the 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
- (4) forces, compels, coerces, or entices a vulnerable adult against the vulnerable adult's will to perform services for the profit or advantage of another.

**Vulnerable Adult interviewed:** No. Due to emotional stress related to situation.

**Family/Responsible Party interviewed:** Yes.

**Alleged Perpetrator interviewed:** Yes.

**Action taken by facility:**

No action taken.

**Action taken by the Minnesota Department of Health:**

The facility was found to be in noncompliance. 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>

If you are viewing this report on the MDH website, please see the attached Statement of Deficiencies.

You may also call 651-201-4890 to receive a copy via mail or email

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

Dakota County Attorney

Minnetonka City Attorney  
Minnetonka Police Department

Minnesota Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>99997</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/15/2022</b>
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0 000	<p>Initial Comments</p> <p>*****ATTENTION*****</p> <p><b>HOME CARE PROVIDER LICENSING CORRECTION ORDER</b></p> <p>In accordance with Minnesota Statutes, section 144A.43 to 144A.484, 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><b>INITIAL COMMENTS:</b></p> <p><b>#HL99997026C/#HL99997025M</b></p> <p>On September 15, 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 an unknown number of clients receiving services under the provider's Home Care license.</p> <p>The following immediate correction orders are issued for #HL99997026C/#HL99997025M, correction order identification 0325, 0430 and 0645.</p> <p>At the time of the investigation, the entity "Haven HomeCare Inc" did not hold an Home Care license. As a result, the enclosed violations do not include a time period for correction. In the event that the entity is licensed or permitted to operate in the future, it is required to immediately</p>	0 000	<p>The Minnesota Department of Health documents the State Licensing Correction Orders using federal software. Tag numbers have been assigned to Minnesota State Statutes for Home Care 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 are listed in the "Summary Statement of Deficiencies" column. This column also includes the findings that are in violation of the state requirement after the statement, "This Minnesota requirement is not met as evidenced by." Following the investigators ' findings is the Time Period for Correction.</p> <p>Per Minnesota Statute § 144A.474, Subd. 8 (c), the home care provider must document any action taken to comply with the correction order. A copy of the provider ' s records documenting those actions may be requested for licensing order follow-ups. The home care provider is not required to submit a plan of correction for approval; please disregard the heading of the fourth column, which states " Provider ' s Plan of Correction."</p> <p>The letter in the left column is used for tracking purposes and reflects the scope and level issued pursuant to Minn. Stat. § 144A.474, Subd. 11 (b).</p>	
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Minnesota Department of Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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0 000	Continued From page 1 correct these violations.	0 000		
0 325	<p>144A.44, Subd. 1(a)(14) Free From Maltreatment</p> <p>Subdivision 1.Statement of rights. (a) A client who receives home care services in the community or in an assisted living facility licensed under chapter 144G has these rights: (14) be free from physical and verbal abuse, neglect, financial exploitation, and all forms of maltreatment covered under the Vulnerable Adults Act and the Maltreatment of Minors Act;</p> <p>This MN Requirement is not met as evidenced by: Based on interviews, and document review, the facility failed to ensure one of an unknown number of clients reviewed (C1) was free from maltreatment. C1 was financially exploited.</p> <p>Findings include:</p> <p>The Minnesota Department of Health (MDH) issued a determination maltreatment occurred, and that the individual staff person was responsible for the maltreatment, in connection with incidents which occurred at the facility.</p>	0 325	No plan of correction is required for 0325. Please refer to the public maltreatment report (report sent separately) for details.	
0 430 SS=I	<p>144A.471, Subd. 4 Operating Without a License</p> <p>Subd. 4.Penalties for operating without license. A person involved in the management, operation, or control of a home care provider that operates without an appropriate license is guilty of a misdemeanor. This section does not apply to a</p>	0 430		

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0 430	<p>Continued From page 2</p> <p>person who has no legal authority to affect or change decisions related to the management, operation, or control of a home care provider.</p> <p>This MN Requirement is not met as evidenced by: Based on interview and document review, the provider failed to establish licensure while providing services and advertising as a Home Care provider. The provider provided medication management; however, it did not have a MDH license to provide this service and did not provide training to caregivers.</p> <p>This practice resulted in a level three violation (a violation that harmed a client's health or safety, not including serious injury, impairment, or death, or a violation that has the potential to lead to 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 clients).</p> <p>Findings include:</p> <p>On September 16, 2022, an internet search for Haven HomeCare Inc yielded advertisement for Haven HomeCare Inc as a currently operational home care provider.</p> <p>During an interview on September 16, 2022, at 1:14 p.m., ADM-A stated she was not managing the Haven HomeCare Inc website and believed it had been taken down. ADM-A stated she is a scheduler between clients and independent contractors (IC). ADM-A stated clients, or their family reach out to her, she visits with them, finds an IC and the two parties meet to determine if</p>	0 430		
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0 430	<p>Continued From page 3</p> <p>they are a good fit. ADM-A stated the client and/or family directs the care from there. ADM-A stated IC provide services that include grocery shopping, light housekeeping, standby assist, and basic safety. ADM-A denied IC services that include making meals or assisting with medication. ADM-A stated the client and/or family would contact her if they needed additional support, such as nursing, therapy, or other. ADM-A stated the client and/or family pays IC directly and pays her \$3.00 per hour scheduling fee. ADM-A stated she does not do training with IC's, does not do background checks, and does not keep employee or client files.</p> <p>During an interview on October 5, 2022, at 10:20 a.m., family member (FM)-B stated she pays IC directly and ADM-A directly, ADM-A gets \$3.00 per hour for IC worked hours. FM-B stated ADM-A comes to C1's home to train new IC's but sometimes the older IC's will train the newer IC's. FM-B Stated she did not know who does the basic home care education but hoped ADM-A did. FM stated IC does most cares for C1 because he is blind and weak and requires assist with toileting, transfers, ambulation, meals, and medication management. FM-B stated IC picks up the medications from the store, sets them up in the weekly medication tender, and gives them to C1 when they are scheduled.</p> <p>Review of Summary of Work Hours indicated there was a \$3.00 per hour administrative fee for caregiver hours worked. The summary billing, dated February 1, 2022, indicated the caregiver worked a total of 84 hours for services from January 17, through January 30, 2022. The summary indicated the administrative fee for the 84 hours worked was \$252.00. The summary billing, dated February 7, 2022, indicated the</p>	0 430		
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0 430	Continued From page 4  caregiver worked a total of 84 hours for services from January 24, through February 6, 2022. The summary indicated the administrative fee for the 84 hours worked was \$252.00. The same document included the ADM-A's name and business address at the bottom of the form.  TIME PERIOD TO CORRECT-IMMEDIATE	0 430		
0 645 SS=I	144A.475, Subd. 1 Conditions  Subdivision 1.Conditions. (a) The commissioner may refuse to grant a temporary license, refuse to grant a license as a result of a change in ownership, refuse to renew a license, suspend or revoke a license, or impose a conditional license if the home care provider or owner or managerial official of the home care provider:  (1) is in violation of, or during the term of the license has violated, any of the requirements in sections 144A.471 to 144A.482;  (2) permits, aids, or abets the commission of any illegal act in the provision of home care;  (3) performs any act detrimental to the health, safety, and welfare of a client;  (4) obtains the license by fraud or misrepresentation;  (5) knowingly made or makes a false statement of a material fact in the application for a license or in any other record or report required by this chapter;  (6) denies representatives of the department access to any part of the home care provider's	0 645		

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0 645	<p>Continued From page 5</p> <p>books, records, files, or employees;</p> <p>(7) interferes with or impedes a representative of the department in contacting the home care provider's clients;</p> <p>(8) interferes with or impedes a representative of the department in the enforcement of this chapter or has failed to fully cooperate with an inspection, survey, or investigation by the department;</p> <p>(9) destroys or makes unavailable any records or other evidence relating to the home care provider's compliance with this chapter;</p> <p>(10) refuses to initiate a background study under section 144.057 or 245A.04;</p> <p>(11) fails to timely pay any fines assessed by the department;</p> <p>(12) violates any local, city, or township ordinance relating to home care services;</p> <p>(13) has repeated incidents of personnel performing services beyond their competency level; or</p> <p>(14) has operated beyond the scope of the home care provider's license level.</p> <p>(b) A violation by a contractor providing the home care services of the home care provider is a violation by the home care provider.</p> <p>This MN Requirement is not met as evidenced by: Based on interview and document review, the licensee failed to cooperate with the investigation. Because of the inability to determine services</p>	0 645		

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0 645	<p>Continued From page 6</p> <p>provided by the provider, all clients receiving services by the provider are at risk of harm related to the lack of oversight.</p> <p>This practice resulted in a level three violation (a violation that harmed a resident's health or safety, not including serious injury, impairment, or death, or a violation that has the potential to lead to 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>The provider interfered with and impeded on a representative of the department in the enforcement of this chapter and failed to fully cooperate with an investigation by the department. The provider denied a representative of the department access to any part of the provider's books, records, files, or employees.</p> <p>Review of a subpoena letter dated August 3, 2022, indicated a representative of the department had requested documentation from owner/administrator (ADM)-A and her husband. The letter indicated ADM-A and/or her husband had until August 12, 2022, to provide the documents to the department representative.</p> <p>Review of Certified Mail documents indicated ADM-A signed for the subpoena letters on August 6, 2022, for both her and her husband. Neither ADM-A nor her husband responded to the subpoena letters.</p> <p>During an interview on October 16, 2022, at 1:14</p>	0 645		

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0 645	<p>Continued From page 7</p> <p>p.m., ADM-A initially stated she never signed for a certified letter from the department. ADM-A later stated it must be in a basket full of mail. ADM-A stated she does not have employee files because she does not employ anyone, they are contractors; therefore, the family runs the contractors background study, and the contractors keep their own education/training file. ADM-A stated she does not keep any medical paperwork for clients, which is all between the client, the client's family, and the contractor. ADM-A stated there was no reason for the department to have a list of the contractors she works with or a client roster.</p> <p>TIME PERIOD TO CORRECT-IMMEDIATE</p>	0 645		