

April 6, 2023

Bryan Hendrickson, Authorized Agent
Grandma's Place
7040 Lakeland Ave N STE 110
Minneapolis, Minnesota 55428-5615

License Number: 1097877 (245D – HCBS)

CORRECTION ORDER

Dear Bryan Hendrickson,

On February 9, 2023, a licensing review of Grandma's Place located at 7040 Lakeland Ave N, STE 110, Minneapolis, Minnesota was conducted to determine compliance with state and federal laws and rules governing the provision of home and community-based services to persons with disabilities and age 65 and older under Minnesota Statutes, Chapter 245D. As a result of this licensing review a Correction Order is being issued.

A. Reason for Correction Order

Pursuant to Minnesota Statutes, section 245A.06, if the Commissioner of the Department of Human Services (DHS) finds that the license holder has failed to comply with an applicable law or rule and this failure does not imminently endanger the health, safety, or rights of the persons served by the program, the Commissioner may issue a Correction Order to the license holder.

The following violation(s) of state or federal laws and rules were determined as a result of the licensing review. Corrective action for each violation is required by Minnesota Statutes, section 245A.06 and is hereby ordered by the Commissioner of Human Services.

1. Citation: Minnesota Statutes, section 245A.65, subdivision 2.

Violation: For three of three persons whose records were reviewed (P1-P3), the license holder did not meet the requirements for abuse prevention plans as required.

- a. Both P1 and P3's individualized home supports with training services were initiated on August 1, 2021. The license holder failed to develop an IAPP as part of that initial service plan for P1 and P3 prior to or upon service initiation for individualized home supports with training.
P1 and P3's services changed to integrated community supports on November 1, 2021. The license holder failed to develop an IAPP as part of that initial service plan for P1 and

P3 prior to or upon service initiation for integrated community supports. The license holder later developed an IAPP for P1 on June 30, 2022 and for P3 on August 31, 2022.

- b. The license holder developed an IAPP for P2 on November 15, 2022. The license holder failed to include an individualized assessment of the person's susceptibility to abuse by others and the person's risk of abusing other adults. P2's IAPP stated that P2 was not susceptible to abuse or at risk of abusing other vulnerable adults, however, this assessment was not consistent with information reviewed elsewhere in P2's record. The support plan completed by P2's case manager indicated that P2 was susceptible to self-abuse.
- c. The license holder developed an IAPP for P3 on August 31, 2022. The license holder documented in P3's IAPP that P3 was susceptible to self-abuse and financial exploitation, however, the license holder failed to include the following:
 - measures with specific actions the program would take to minimize the risk of the abuse within the scope of the licensed services; and
 - identified referrals made when P3 was susceptible to abuse outside of the scope or control of the licensed service(s).
- d. The license holder failed to establish and enforce a Program Abuse Prevention Plan (PAPP) to assess the population, physical plant, and environment within the control of the license holder and the location where licensed services are provided in accordance with 245A.65, clauses (1) to (6).

Corrective Action Ordered: Within 60 days of receiving this order, you must:

- revise P2's IAPP to include to include an individualized assessment of P2's susceptibility to abuse by others and P2's risk of abusing other adults;
- revise P3's IAPP to include specific measures the program will take to minimize the risk of abuse;
- identify referrals made when P3 is susceptible to abuse outside of the scope or control of the licensed service(s);
- review the revisions made to P2 and P3's IAPPs with the person, the person's case manager and member of the person's support team and document the review;
- establish and enforce an ongoing PAPP;
- provide an orientation to the PAPP for all persons receiving services at the location where Integrated Community Support services are being provided;
- provide orientation to the PAPP for all staff persons providing services at the location where integrated community support services are being provided; and
- post a copy of the PAPP in a prominent location in the program and be available upon request to mandated reporters, persons receiving services, and legal representatives.

On an ongoing basis, you must maintain compliance as required in this subdivision.

2. Citation: Minnesota Statutes, section 245D.04, subdivision 1.

Violation: For one person whose record was reviewed (P3), the license holder did not provide a written notice that identified the service recipient rights as required.

Minnesota Statutes, section 245A.02, subdivision 2b defines “annual” or “annually” to mean prior to or within the same month of the subsequent calendar year.

The license holder failed to provide P3 with a notice and explanation of the service recipient rights annually. The license holder provided P3 with a notice and explanation of the service recipient rights on August 1, 2021 and failed to do so annually thereafter.

Corrective Action Ordered: Within 60 days of receiving this order, you must provide P3 with a copy of the service recipient rights and explanation of those rights and maintain documentation of the recipient of the rights. On an ongoing basis, you must maintain compliance as required in this subdivision.

3. Citation: Minnesota Statutes, section 245D.071, subdivision 3.

Violation: For one person whose record was reviewed (P3), the license holder did not meet service planning requirements for an intensive service.

- a. The license holder failed to complete assessments for P1 and P3 in the following areas within 45 days of P1 and P3’s individualized home supports with training services were initiated. Additionally, the license holder failed to complete assessments for P1 and P3 in the following areas within 45 days of when P1 and P3’s services changed to integrated community supports.
 - the person's ability to self-manage health and medical needs to maintain or improve physical, mental, and emotional well-being, including, when applicable, allergies, seizures, choking, special dietary needs, chronic medical conditions, self-administration of medication or treatment orders, preventative screening, and medical and dental appointments;
 - the person's ability to self-manage personal safety to avoid injury or accident in the service setting, including, when applicable, risk of falling, mobility, regulating water temperature, community survival skills, water safety skills, and sensory disabilities; and
 - the person's ability to self-manage symptoms or behavior that may otherwise result in an incident as defined in section 245D.02, subdivision 11, clauses (4) to (7), suspension or termination of services by the license holder, or other symptoms or behaviors that may jeopardize the health and welfare of the person or others, and
 - the assessments must produce information about the person that describes the person's overall strengths, functional skills and abilities, and behaviors or symptoms.

The license holder later completed the above assessments for P1 on June 30, 2022 and for P3 on August 30, 2022.

- b. The assessments the license holder completed for P3 on August 30, 2022 failed to produce information about P3 that described P3's overall strengths, functional skills and abilities, and behaviors or symptoms.
- c. For P1, and P3, the license holder failed to meet with the person, the person's case manager, and other members of the support team or expanded support team within 45 days of service initiation for individualized home supports with training services. The license holder also failed hold 45-day service planning meetings with P1 and P3 and their case managers and members of their support teams when P1 and P3's integrated community support services were initiated.

DHS determined the license holder held a 45-day service planning meeting with P2 and members of P2's support team on December 9, 2022; however, it could not be determined what was discussed or decided at the meeting.

For P1-P3, the license holder failed to determine the following:

- the scope of the services to be provided to support the person's daily needs and activities;
- the person's desired outcomes and the supports necessary to accomplish the person's desired outcomes;
- the person's preferences for how services and supports are provided, including how the provider will support the person to have control of the person's schedule;
- whether the current service setting is the most integrated setting available and appropriate for the person;
- opportunities to develop and maintain essential and life-enriching skills, abilities, strengths, interests, and preferences;
- opportunities for community access, participation, and inclusion in preferred community activities;
- opportunities to develop and strengthen personal relationships with other persons of the person's choice in the community;
- opportunities to seek competitive employment and work at competitively paying jobs in the community
- how services must be coordinated across other providers licensed under this chapter serving the person and members of the support team or expanded support team to ensure continuity of care and coordination of services for the person;

- have a discussion of how technology might be used to meet the person's desired outcomes. The coordinated service and support plan (CSSP) or coordinated service and support plan addendum (CSSPA) must include a summary of this discussion. The summary must include:
 - a statement regarding any decision that is made regarding the use of technology; and
 - a description of any further research that needs to be completed before a decision regarding the use of technology can be made.

Corrective Action Ordered: Within 60 days of receiving this order, you must:

- complete the required assessments for P3 that produce information about the person that describes the person's overall strengths, functional skills, and abilities;
- for P1-P3, meet with the person, the person's case manager, and members of the support team to determine the above-mentioned items and to have a discussion about how technology might be used to meet the person's desired outcomes. You must include a summary of this discussion in the person's support plan;
- review the results of the assessments of P3's ability to self-manage health and medical needs, personal safety, and symptoms or behaviors with P3, P3's case manager and members of the support team. You must document this review;
- develop a service plan for P3 that documents the service outcomes and supports that includes the following:
 - the methods or actions that will be used to support P3 and to accomplish the service outcomes, including information about:
 - any changes or modifications to the physical and social environments necessary when the service supports are provided;
 - any equipment and materials required; and
 - techniques that are consistent with the person's communication mode and learning style;
 - the measurable and observable criteria for identifying when the desired outcome has been achieved and how data will be collected;
 - the projected starting date for implementing the supports and methods and the date by which progress towards accomplishing the outcomes will be reviewed and evaluated; and
 - the names of the staff or position responsible for implementing the supports and methods.
- submit a copy of the service outcomes for P3 to your licenser.

On an ongoing basis, you must maintain compliance as required in this subdivision.

4. Citation: Minnesota Statutes, section 245D.071, subdivision 4, paragraph (b).

Violation: For two persons whose records were reviewed (P1 and P2), the license holder did not develop a service plan that documents the service outcomes and supports based on the

assessments completed under subdivision 3 and the requirements in section 245D.07, subdivision 1a, as required.

- a. The license holder had documented an outcome for P1; however, the license holder failed to document the following supports and methods to accomplish outcomes:
 - the measurable and observable criteria for identifying when the desired outcome has been achieved; and
 - the names of the staff or position responsible for implementing the supports and methods.

- b. The license holder had documented an outcome for P2; however, the license holder failed to document the following supports and methods to accomplish outcomes:
 - the methods or actions that will be used to support the person and to accomplish the service outcomes, including information about:
 - any changes or modifications to the physical and social environments necessary when the service supports are provided;
 - any equipment and materials required; and
 - techniques that are consistent with the person's communication mode and learning style;
 - the measurable and observable criteria for identifying when the desired outcome has been achieved and how data will be collected;
 - the projected starting date for implementing the supports and methods and the date by which progress towards accomplishing the outcomes will be reviewed and evaluated; and
 - the names of the staff or position responsible for implementing the supports and methods.

Corrective Action Ordered: Within 60 days of receiving this order, you must:

- develop a service plan that documents the service outcomes and supports, and methods listed above for P1 and P2; and
- submit the service outcomes and supports and methods for P1 and P2 to your licensor.

On an ongoing basis, you must maintain compliance as required in this subdivision.

5. Citation: Minnesota Statutes, section 245D.071, subdivision 5.

Violation: For two persons whose record was reviewed (P1 and P3), the license holder did not meet the requirements for service plan review and evaluation.

- a. The license holder maintained a document in P1's support plan addendum titled, "coordinated service and support plan addendum-intensive services" dated November 1, 2021 that required annual progress reports for P1. The license holder failed to provide progress reports for P1 on an annual basis.

- b. The license holder maintained a document in P3's support plan addendum titled, "coordinated service and support plan addendum-intensive services" signed on August 16, 2021 that required the license holder was to hold quarterly meetings for P3 and to provide progress reports semi-annually. The license holder failed to provide progress reports for P3 semi-annually and failed to hold quarterly service planning and review meetings for P3.

Corrective Action Ordered: On an ongoing basis, you must maintain compliance as required in this subdivision.

6. Citation: Minnesota Statutes, section 245D.10, subdivision 4, paragraph (b).

Violation: For two person whose record was reviewed (P1 and P2) the license holder did not provide written or electronic copies of policies and procedures as required.

Although the license holder informed P1 and P2 of the following policies and procedures that affect a person's rights and provided copies, the license holder failed to inform P1's and P2's case managers of the following policies and procedures and provide copies of the policies and procedures within five days of service initiation:

- grievance policy;
- temporary service suspension policy;
- service termination policy;
- emergency use of manual restraints policy; and
- data privacy policy.

Corrective Action Ordered: Within 30 days of receiving this order, you must inform P1 and P2's case managers of the above-mentioned policies and provide copies of the policies. On an ongoing basis, you must maintain compliance as required.

7. Citation: Minnesota Rules, part 9544.0030, subpart 1.

Violation: For three persons whose records were reviewed (P1-P3), the license holder did not incorporate and evaluate positive support strategies as required.

- a. The holder failed to develop positive support strategies for P2 and incorporate the positive support strategies in writing to an existing treatment, service, or other individual plan.
- b. The license holder failed to evaluate the identified positive support strategies with P1 and P3 at least every six months.

Corrective Action Ordered: Within 30 days of receiving this order, you must assess P2's strengths, needs, and preferences to identify and develop positive support strategies for the

person. You must incorporate the positive support strategies for P2 in writing to an existing treatment, service, or other individual plan. On an ongoing basis, you must maintain compliance as required in this subdivision.

8. Citation: Minnesota Statutes, section 245D.09, subdivisions 4 and 4a.

Violation: For three of four staff persons whose records were reviewed (SP2 through SP4), the license holder did not provide orientation training as required.

- a. SP2 was hired on August 10, 2017 and began providing licensed 245D services in August 2021. The license holder failed to provide and ensure completion of SP2's orientation sufficient to create staff competency that combined supervised on-the-job training with review and instruction of the following areas within 60 days of SP2 first providing direct support services to persons receiving a 245D service:
- job description and how to complete specific job functions including:
 - responding to and reporting incidents as required in Minnesota Statutes, section 245D.06, subdivision 2; and
 - following safety practices established by the license holder and as required in section 245D.06, subdivision 2;
 - the license holder's current policies and procedures required under Minnesota statutes, chapter 245D, including their location and access, and staff responsibilities related to implementation of those policies and procedures;
 - data privacy requirements according to Minnesota Statutes, sections 13.01 to 13.10 and 13.46, the federal health insurance portability and accountability act of 1996 (HIPPS), and staff responsibilities related to complying with the data privacy practices;
 - the service recipient rights and staff responsibilities related to ensuring the exercise and protection of those rights according to the requirements in Minnesota statutes, section 245D.04;
 - the principals of person-centered service planning and delivery as identified in Minnesota Statutes, section 245D.07, subdivision 1a, and how they applied to direct support service provided by the staff person;
 - the safe and correct use of manual restraint on an emergency basis according to the requirements in section 245D.061 and what constitutes the use of restraints, time out and seclusion, including chemical restraint;
 - staff responsibilities related to prohibited procedures under section 245D.06, subdivision 5, why such procedures are not effective for reducing or eliminating symptoms or undesired behaviors, and why such procedures are not safe;
 - basic first aid; and

- strategies to minimize the risk of sexual violence, including concepts of health relationships, consent, and bodily autonomy of people with disabilities.
- b. SP3 was hired on February 19, 2018 and began providing 245D licensed services to person(s) served on August 1, 2021. The license holder failed to provide and ensure completion of SP3's orientation sufficient to create staff competency that combined supervised on-the-job training with review and instruction of the following areas within 60 days of SP3 first providing direct support services to persons receiving a 245D service:
- a job description and how to complete specific job functions including:
 - responding to and reporting incidents as required in Minnesota Statutes, section 245D.06, subdivision 2; and
 - following safety practices established by the license holder and as required in section 245D.06, subdivision 2;
 - the license holder's current policies and procedures required under Minnesota statutes, chapter 245D, including their location and access, and staff responsibilities related to implementation of those policies and procedures;
 - basic first aid;
 - data privacy requirements according to Minnesota Statutes, sections 13.01 to 13.10 and 13.46, the federal health insurance portability and accountability act of 1996 (HIPPS), and staff responsibilities related to complying with the data privacy practices. SP3 did receive this orientation training on November 8, 2021;
 - the service recipient rights, and staff responsibilities related to ensuring the exercise and protection of those rights according to the requirements in Minnesota statutes, section 245D.04. SP3 did receive this orientation training on November 13, 2021;
 - strategies to minimize the risk of sexual violence, including concepts of health relationships, consent, and bodily autonomy of people with disabilities. SP3 did receive this orientation training on November 8, 2021; and
 - training and instruction on the person's support plan as it related to the responsibilities assigned to the license holder and the person's individual abuse prevention plan to achieve and demonstrate an understanding of the person as a unique individual, and how to implement those plans.
- c. SP4 was hired on October 11, 2022. The license holder failed to provide SP4 with the following trainings within 60 days of hire:
- a job description and how to complete specific job functions including:
 - responding to and reporting incidents as required in Minnesota Statutes, section 245D.06, subdivision 2; and

- following safety practices established by the license holder and as required in section 245D.06, subdivision 2;
- the license holder's current policies and procedures required under Minnesota statutes, chapter 245D, including their location and access, and staff responsibilities related to implementation of those policies and procedures; and
- basic first aid

Corrective Action Ordered: Within 60 days of receipt of this order, you must:

- provide SP2-SP4 with the above-mentioned trainings; and
- submit documentation to your licensor that SP2-SP4 completed the training following the training documentation requirements under section 245D.095, subdivision 5, paragraph (a), clause (2), including:
 - the date the training was completed;
 - the number of hours per subject area; and
 - the name of the trainer or instructor.

On an ongoing basis, you must provide orientation training as required in this subdivision.

9. Citation: Minnesota Statutes, Section 245D.09, subdivision 5.

Violation: For two staff persons whose records were reviewed (SP2 and SP3), the license holder did provide annual training as required.

- a. SP2 was hired on August 10, 2017 and began providing licensed 245D services in August 2021. The license holder failed to provide SP2 with the following annual trainings in 2022:
 - data privacy requirements according to Minnesota Statutes, sections 13.01 to 13.10 and 13.46, the federal health insurance portability and accountability act of 1996 (HIPPS), and staff responsibilities related to complying with the data privacy practices;
 - the service recipient rights and staff responsibilities related to ensuring the exercise and protection of those rights according to the requirements in Minnesota statutes, section 245D.04;
 - sections 245A, 245A.66 and 626.557 and chapter 260E, governing maltreatment reporting and service planning for children and vulnerable adults, the staff responsibilities related to protecting persons from maltreatment and reporting maltreatment. SP2 received this training on July 16, 2021 and not again thereafter;
 - the principals of person-centered service planning and delivery as identified in Minnesota Statutes, section 245D.07, subdivision 1a, and how they applied to direct support service provided by the staff person;
 - the safe and correct use of manual restraint on an emergency basis according to the requirements in section 245D.061 and what constitutes the use of restraints, time out, and seclusion, including chemical restraint;

- staff responsibilities related to prohibited procedures under section 245D.06, subdivision 5, why such procedures are not effective for reducing or eliminating symptoms or undesired behavior, and why such procedures are not safe;
- basic first aid; and
- strategies to minimize the risk of sexual violence, including concepts of healthy relationships, consent, and bodily autonomy of persons with disabilities.

b. SP3 was hired on February 19, 2018 began providing unsupervised direct contact with person served on August 1, 2021. The license holder failed to provide SP3 with basic first aid training annually.

Corrective Action Ordered: Within 60 days of receipt of this order, you must:

- provide SP2-SP3 with the above-mentioned trainings; and
- submit documentation that SP2-SP3 completed the training following the training documentation requirements under section 245D.095, subdivision 5, paragraph (a), clause (2), including:
 - the dated the training was completed;
 - the number of hours per subject area; and
 - the name of the trainer or instructor.

On an ongoing basis, you must provide orientation training as required in this subdivision.

10. Citation: Minnesota Statutes, section 245D.095, subdivision 3, paragraph (b).

Violation: For one person whose record was reviewed (P2), the license holder failed to maintain service recipient records as required.

Although the license holder maintained a signed admission form for P2, the admission form failed to include the name, address, and telephone number of P2's case manager.

Corrective Action Ordered: Within 30 days of receiving this order, you must update P2's admission form to include the name, address, and telephone number of P2's case manager. On an ongoing basis, you must maintain compliance as required.

11. Citation: Minnesota Statutes, section 245D.095, subdivision 5, paragraph (a).

Violation: For two staff person whose records was reviewed (SP1 and SP2), the license holder did not maintain personnel records as required.

a. The license holder failed to maintain the hours of training per subject area in SP1's personnel record for each required training subject area.

- b. The license holder failed to maintain documentation in SP2's personnel record that was sufficient in determining the date of first supervised direct contact with person(s) served and the date of first unsupervised direct contact with persons served.

Corrective Action Ordered: On an ongoing basis, you must maintain the following training information in each staff person's personnel record as required in this subdivision:

- the date the training was completed;
- the number of hours per subject area;
- the name of the trainer or instructor;
- date of first supervised direct contact with persons served; and
- date of first unsupervised direct contact with persons served.

If you fail to correct the violations specified in the Correction Order within the prescribed time lines the Commissioner may issue an Order of Conditional License or may impose a fine and order other licensing sanctions pursuant to Minnesota Statutes, sections 245A.06 and 245A.07.

Submissions required as part of a corrective action ordered must be sent to your Licensor at:

1. By secure email at Renae.S.Dressel@state.mn.us; or
2. If you are unable to submit corrective action ordered securely through email, please mail or fax using the information below:

Commissioner, Department of Human Services
ATTN: Renae Dressel
Licensing Division
PO Box 64242
St. Paul, MN 55164-0242
Fax: 651-431-7673

B. Right to Request Reconsideration

If you believe any of the citations are in error, you have the right to request that the Commissioner of Human Services reconsider the parts of the Correction Order that you believe to be in error. The request for reconsideration must be in writing and received by the Commissioner within 20 calendar days after receipt of this report. Your request for reconsideration must be sent to:

Commissioner, Department of Human Services
ATTN: Legal Unit
Licensing Division
PO Box 64242
St. Paul, MN 55164-0242

Bryan Hendrickson

Page **13** of **2**

April 6, 2023

Please note that a request for reconsideration does not stay any provisions or requirements of the Correction Order. The Commissioner's disposition of a request for reconsideration is final and not subject to appeal under Minnesota Statutes, chapter 14.

If you have any questions regarding this Correction Order, please contact me at 651-431-2661 as soon as possible.

Renaë Dressel, Senior Human Services Licensor

Licensing Division

Office of Inspector General

651-431-2661