

August 1, 2025

Brenda Bedeaux, Authorized Agent  
Larson Foster Care  
7140 177<sup>th</sup> Street West  
Lakeville, Minnesota, 55044

License Number: 1104473 (245D – HCBS)

### **CORRECTION ORDER**

Dear Brenda Bedeaux:

On July 9, 2025, a licensing review of Larson Foster Care, located at 7140 177<sup>th</sup> Street West, Lakeville, 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 one of one person whose record was reviewed (P1), the license holder did not develop and review for abuse prevention plans 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 did not develop an individual abuse prevention plan (IAPP) for P1 as part of the initial individual program plan or service plan prior to or upon service initiation. The license holder initiated P1’s services on July 29, 2021, and developed P1’s

IAPP on January 16, 2024. Additionally, the license holder did not review P1's IAPP on an annual basis. The license holder most recently reviewed P1's IAPP on January 16, 2024.

Corrective Action Ordered: Within 30 days of receiving this order, you must:

- review and revise P1's IAPP;
- provide P1's support team the opportunity to review P1's IAPP; and
- maintain documentation of this review in P1's service recipient record.

Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. 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 (P1), the license holder did not provide the service recipient rights, as required.

The license holder initiated P1's services on July 29, 2021. The license holder did not provide P1 with a written notice that identified the service recipient rights and an explanation of those rights within five working days of service initiation and annually thereafter. The license holder only provided P1 with a written notice on September 14, 2023.

Corrective Action Ordered: Within 30 days of receiving this order, you must:

- provide P1 with a written notice that identifies service recipient rights and explanation of those rights; and
- maintain documentation of P1's receipt of a copy and an explanation of the rights in P1's service recipient record.

Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

3. Citation: Minnesota Statutes, section 245D.05, subdivision 1.

Violation: For one person whose record was reviewed (P1), the license holder did not maintain documentation of how the person's health needs would be met, as required.

The license holder was assigned the responsibility of meeting P1's health service needs. The license holder did not maintain documentation on how P1's health needs would be met, including as applicable, a description of the procedures the license holder will follow in order to:

- provide medication setup, assistance, or administration according to this chapter. Unlicensed staff responsible for medication setup or medication administration under this section must complete training according to section 245D.09, subdivision 4a, paragraph (d);

- monitor health conditions according to written instructions from a licensed health professional;
- assist with or coordinate medical, dental, and other health service appointments; or
- use medical equipment, devices, or adaptive aides or technology safely and correctly according to written instructions from a licensed health professional.

Corrective Action Ordered: Within 30 days of receiving this order, you must document the above-mentioned information for P1. Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

4. Citation: Minnesota Statutes, section 245D.071, subdivision 3, paragraph (a).

Violation: For one person whose record was reviewed (P1), the license holder did not develop a preliminary support plan addendum as required.

The license holder initiated P1's services on July 30, 2021, and developed a preliminary support plan addendum for P1 in January 2024. The license holder did not complete a preliminary support plan addendum, based on the support plan, within 15 calendar days of service initiation.

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

5. Citation: Minnesota Statutes, section 245D.071, subdivision 3, paragraph (b) and (c).

Violation: For one person whose record was reviewed (P1), the license holder did not complete service planning and assessments for an intensive service, as required.

- a. The license holder did not complete assessments for P1 in the following areas before providing 45 days of service and annually thereafter:
- 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.

- assessments must produce information about the person that describes the person's overall strengths, functional skills and abilities, and behaviors or symptoms.
- b. The license holder did not meet with P1, P1's case manager, and other members of the support team or expanded support team within 45 days of service initiation to determine:
- the scope of 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;
  - 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;
  - a discussion of how technology might be used to meet the person's desired outcomes.

Corrective Action Ordered: Within 30 days of receiving this order, you must:

- meet with P1, P1's case manager, and members of the support team to determine the above-mentioned items and to discuss how technology might be used to meet P1's desired outcomes. You must summarize this conversation in P1's support plan addendum and include the following:
  - 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;
- complete the required assessments for P1 that produce information about the person that describes the person's overall strengths, functional skills, and abilities; and
- review the results of the assessments of P1's ability to self-manage health and medical needs, personal safety, and symptoms or behaviors with P1, P1's case manager and members of the support team. You must document this review.

Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

6. Citation: Minnesota Statutes, section 245D.071, subdivision 4.

Violation: For one person whose record was reviewed (P1), the license holder did not meet the requirements for outcome and support development for an intensive service.

- a. The license holder did not hold an initial service planning meeting within 45 days of initiating P1's services; therefore, the license holder did not develop a service plan that documented the service outcomes and supports within ten working days of the initial service planning meeting. The license holder initiated P1's services on July 29, 2021, and developed an outcome for P1 on January 1, 2024.
- b. The license holder did not develop a service plan that documented the methods and actions that will be used to support P1 and accomplish outcomes, including information about:
  - any changes or modifications to the physical and social environments necessary when the service supports are provided; and
  - any equipment and materials required.

Corrective Action Ordered: Within 30 days of receiving this order, you must review and revise P1's supports and methods to accomplish outcomes to include the information mentioned above. Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

7. Citation: Minnesota Statutes, section 245D.071, subdivision 5, paragraph (a), (b), (c), (d) and (g).

Violation: For one person whose record was reviewed (P1), the license holder did not meet the requirements for service plan review and evaluation as required.

The license holder did not complete the following for P1 at least once per year:

- participate in service plan review meetings with P1, P1's case manager, and other people identified in by P1;
- discuss how technology might be used to meet P1's desired outcomes with P1, P1's case manager, and other people identified by P1; and
- discuss options for transitioning out of a community setting controlled by a provider and into a setting not controlled by a provider with P1, P1's case manager, and other people identified by P1.

Corrective Action Ordered: Within 30 days of receiving this order, you must:

- meet with P1, P1's case manager, and other members of P1's support team and discuss how technology might be used to meet P1's desired outcomes as ordered in citation number 5;

- discuss options for transitioning out of a community setting controlled by a provider and into a setting not controlled by a provider;
- summarize this conversation and include this summary in P1's support plan addendum;
- summarize P1's status and progress toward achieving the identified outcome, make recommendations, and identify the rationale for changing, continuing, or discontinuing implementation of supports and methods identified in subdivision 4, in a report; and
- provide this report to P1's case manager and other members of P1's support team.

Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

8. Citation: Minnesota Statutes, section 245D.10, subdivision 4.

Violation: For one person whose record was reviewed (P1), the license holder did not provide copies of the policies and procedures as required.

The license holder did not provide P1 and P1's case manager with the following policies and procedures that affect a person's rights within five working days of service initiation:

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

Corrective Action Ordered: Within 30 days of receiving this order, you must provide P1 and P1's case manager with the above-mentioned policies and procedures. You must maintain documentation of receipt in P1's service recipient record. Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

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

Violation: For one person whose record was reviewed (P1) the license holder did not develop and incorporate positive support strategies as required.

The license holder did not develop positive support strategies for P1 and incorporate the positive support strategies in writing to an existing treatment, service, or other individual plan.

Corrective Action Ordered: Within 30 days of receiving this order, you must:

- assess P1's strengths, needs, and preferences to identify and create positive support strategies for P1;
- incorporate the positive support strategies for P1 in writing to an existing treatment, service or other individual plan;
- evaluate P1's positive support strategies a minimum of every six months; and

- maintain documentation of these evaluations in P1's service recipient record.

Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

10. Citation: Minnesota Statutes, section 245A.65, subdivision 3.

Violation: For two of three staff persons whose records were reviewed (SP2 and SP3), the license holder did not provide an orientation to mandated reporters within 72 hours of first providing direct contact services as required.

- a. The license holder did not provide SP2 and SP3 with an orientation on vulnerable adult maltreatment reporting, the license holder's PAPP, and all internal policies and procedures related to the prevention and reporting of maltreatment of individuals receiving services within 72 hours of first providing direct contact.
- b. The license holder did not provide SP2 and SP3 with a review to vulnerable adult maltreatment reporting annually in 2021, 2022, or 2023, or to the license holder's PAPP annually in 2021, 2022, 2023, and 2024. The license holder only provided SP3 with a review on vulnerable adult maltreatment in September 2024.

Corrective Action Ordered: Within 30 days of receiving this order, you must orientate SP2 and SP3 to vulnerable adult maltreatment prevention and reporting and to your program's PAPP. You must maintain documentation of this orientation in SP2's and SP3's personnel records. Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

11. Citation: Minnesota Statutes, section 245D.09, subdivision 4 and 4a.

Violation: For two staff persons whose records were reviewed (SP2 and SP3), the license holder did not provide orientation training as required.

- a. The license holder did not provide SP2 and SP3 with training on the following within 60 days of hire:
  - a job description and how to complete specific job functions including:
    - o responding to and reporting incidents as required in Minnesota Statutes, section 245D.06, subdivision 2,
    - o following safety practices established by the license holder and as required in section 245D.06, subdivision 2,
  - current policies and procedures, including their location and access, and staff responsibilities related to implementation of those policies and procedures:
    - o drug and alcohol prohibition;
    - o emergency use of manual restraint;
    - o grievance policy and procedure;

- service suspension and termination policy and procedure;
  - universal precautions and sanitary practices;
  - health service coordination and care;
  - safe medication assistance and administration;
  - safe transportation;
  - safety in emergencies, response and reporting and review;
  - incident response, reporting and review;
  - admission criteria; and
  - data privacy requirements according to Minnesota Statutes, section 13.01 to 13.10 and 13.46, the federal Health Insurance Portability and Accountability Act of 1996 (HIPPA), and staff responsibilities related to complying with 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 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;
  - the principles of person-centered service planning and delivery as identified in Minnesota Statutes, section 245D.07, subdivision 1a, and how they applied to direct support services provided by the staff;
  - strategies to minimize the risk of sexual violence, including concepts of healthy relationships, consent, and bodily autonomy of people with disabilities; and
  - basic first aid.
- b. The license holder did not provide SP2 and SP3 with review and instruction on the following plans to achieve and demonstrate an understanding of the person as a unique individual and how to implement the plans before having unsupervised direct contact with a person serviced by the program:
- the person's coordinated service support plan or coordinated service support plan addendum as it relates to the responsibilities assigned to the license holder; and
  - the person's individual abuse prevention plan.

Corrective Action Ordered: Within 30 days of receiving this order, you must:

- provide SP2 and SP3 with the above-mentioned trainings; and
- maintain documentation of these trainings in SP2's and SP3's personnel records.

Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

12. Citation: Minnesota Statutes, section 245D.09, subdivision 5.

Violation: For three staff persons whose records were reviewed (SP1, SP2 and SP3), the license holder did not provide annual training as required.

- a. The license holder did not provide annual training to SP1, SP2 and SP3 on the following topics in 2021, 2022, 2023, 2024 and 2025:
- data privacy requirements according to sections 13.01 to 13.10 and 13.46, the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA), and staff responsibilities related to complying with data privacy practices;
  - service recipient rights and staff responsibilities related to ensuring the exercise and protection of those rights;
  - principles of person-centered service planning and delivery and how they apply 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 sections 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. The license holder completed this training on March 23, 2022;
  - strategies to minimize the risk of sexual violence, including concepts of healthy relationships, consent, and bodily autonomy of people with disabilities; and
  - basic first aid.

Corrective Action Ordered: Within 30 days of receiving this order, you must provide SP1, SP2 and SP3 with the above-mentioned training. You must maintain documentation of this training in SP1's, SP2's and SP3's personnel records. Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

13. Citation: Minnesota Statutes, section 245D.095, subdivision 5.

Violation: For three staff persons whose records were reviewed (SP1, SP2 and SP3), the license holder did not maintain personnel records as required.

The license holder did not maintain a personnel record for SP1, SP2 and SP3 to document and verify staff qualifications, orientation and training.

Corrective Action Ordered: Within 30 days of receiving this order, you must develop and maintain personnel records for SP1, SP2 and SP3 that includes:

- the employee's date of hire;
- date of first supervised and unsupervised direct contact with person served;
- documentation of staff qualifications, orientation, and training;

- the date training was completed;
- the number of hours per subject area; and
- the name of the trainer or instructor.

Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

14. Citation: Minnesota Statutes, section 245D.081, subdivision 2 and 3.

Violation: The license holder did not provide program management and oversight as required.

- a. The license holder did not ensure that the designated coordinator (SP3), provided supervision, support, and evaluation of activities that included:
  - oversight of the license holder's responsibilities assigned in the person's support plan and support plan addendum;
  - taking the action necessary to facilitate the accomplishment of the outcomes according to the requirements in section 245D.07;
  - instruction and assistance to direct support staff implementing the support plan and the service outcomes, including direct observation of service delivery sufficient to assess staff competency; and
  - evaluation of the effectiveness of service delivery, methodologies, and progress on the person's outcomes based on the measurable and observable criteria for identifying when the desired outcome has been achieved according to the requirements in section 245D.07.
- b. The license holder did not ensure the designated manager (SP3) performed the required program management and oversight of the services provided by the license holder, including:
  - maintaining a current understanding of the licensing requirements sufficient to ensure compliance throughout the program as identified in section 245A.04, subdivision 1, paragraph (e);
  - ensuring the duties of the designated coordinator were fulfilled according to 245D.081, subdivision 2;
  - ensuring the program implements corrective action identified necessary by the program following review of incident and emergency reports according to the requirements in 245D.11, subdivision 2, clause (7). An internal review of incident reports of alleged or suspected maltreatment must be conducted according to the requirements in section 245A.65, subdivision 1, paragraph (b);
  - ensuring and protecting each person's rights as identified in section 245D.04;
  - ensuring staff competency requirements were met according to the requirements in section 245D.09, subdivision 3, and ensuring staff orientation and training was provided according to the requirements in 245D.09, subdivisions 4, 4a, and 5; and

- evaluating the information identified in clauses (1) to (6) to develop, document, and implement ongoing program improvements.

Citations 1 through 13 are evidence of the license holder's lack of program coordination, management and oversight.

Corrective Action Ordered: Within 30 days of receiving this order, you must submit an acknowledgement signed by the designated coordinator (SP3) and the designated manager (SP3) that they have acknowledged and understand their responsibilities as required in Minnesota Statutes, section 245D.081, subdivision 2 and 3 to your licensor. Compliance with this order will be reviewed onsite at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

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

1. By secure email at Kate Spenger; or
2. If you are unable to submit corrective action ordered securely through email, you can mail or fax using the information below:

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

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.

**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

Brenda Bedeaux

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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 as soon as possible.

Kate Spenger, Human Services Licenser

Licensing Division

Office of Inspector General

651-431-5757