

October 17, 2025

Sagal Said, Authorized Agent
Reliable Home Health Care LLC
1821 University Ave. W #319
St. Paul, Minnesota 55104

License Number: 1106482 (245D – HCBS)

CORRECTION ORDER

Dear Sagal Said:

On June 11, 2025, a licensing review of Reliable Home Health Care LLC, located at 1821 University Avenue West, Suite 319, Saint Paul, 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 two persons whose records were reviewed (P1), the license holder did not develop an individual abuse prevention plan (IAPP) as required.

The license holder did not develop an accurate IAPP for P1 as part of the initial individual program plan that included:

- an individualized assessment of P1's susceptibility to abuse by other individuals including other vulnerable adults and P1's risk of abusing other vulnerable adults;
- the statements of the specific measures to be taken to minimize the risk of abuse to P1 and other vulnerable adults; and
- the specific actions the license holder would take to minimize the risk of abuse to P1 within the scope of licensed services.

The license holder maintained an IAPP for P1 that indicated P1 had no vulnerabilities to abuse, including self-abuse; however, this was not consistent with information documented elsewhere in P1's plan.

Corrective Action Ordered: Immediately, you must revise P1's IAPP to accurately assess P1's susceptibility to abuse and include the information detailed above. Additionally, you must:

- review P1's updated IAPP with P1's interdisciplinary team and you must document this review; and
- provide orientation on the updates to P1's IAPP to all staff that provide direct support to P1.

Compliance with this order will be reviewed 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.07, subdivision 3.

Violation: For one person whose record was reviewed (P2), the license holder did not provide written reports as required.

P2's support plan addendum required the license holder to provide progress reports and recommendations semi-annually. The license holder has not provided any reports to P2 and their team.

Corrective Action Ordered: Within 30 days of receiving this order, you must provide P2 and their team with a progress report and recommendations. Compliance with this order will be reviewed 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.095, subdivision 3.

Violation: For two persons whose records were reviewed (P1 and P2), the license holder did not maintain service recipient records as required.

The license holder did not maintain progress or daily log notes for P1 and P2 that were recorded by the program.

Corrective Action Ordered: Immediately upon receiving this order, you must begin maintaining progress or daily log notes for all service recipients. Compliance with this order will be reviewed 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.10, subdivision 4.

Violation: For one person whose record was reviewed (P2), the license holder did not provide policies and procedures as required.

The license holder did not inform P2's case manager of the policies and procedures affecting a person's rights, and provide copies of those policies and procedures, within five working days of service initiation, including:

- grievance policy and procedure; and
- service suspension and termination policy and procedure.

Corrective Action Ordered: Within 30 days of receiving this order, you must inform P2's case manager of the policies and procedures affecting a person's rights and provide copies of those policies and procedures. Compliance with this order will be reviewed at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

5. Citation: Minnesota Rules, chapter 9544.0030, subpart 1.

Violation: For one person whose record was reviewed (P2), the license holder did not evaluate positive support strategies as required.

The license holder did not evaluate the identified positive support strategies with P2 at least every six months.

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

- evaluate the identified positive support strategies, for P2 and based upon the results of the evaluation, you must determine whether changes are needed in the positive support strategies used, and if so, make appropriate changes;
- maintain documentation of the evaluation in P2's record; and
- provide orientation on the updates to P2's support plan addendum to all staff that provide direct support to P2.

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

6. Citation: Minnesota Statutes, section 245D.09, subdivision 4.

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

The license holder did not provide SP1 and SP2 orientation training on the following topics within 60 days of hire:

- the job description to provide SP1 and SP2 orientation training on the following topics:
 - responding to and reporting incidents as required under Minnesota Statutes, section 245D.06, subdivision 1; and
 - following safety practices established by the license holder as required in Minnesota Statutes, section 245D.06, subdivision 2;
- the license holder's current policies and procedures required under this chapter, including their location and access, and staff responsibilities related to implementation of those policies and procedures.
- 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;
- the service recipient rights and staff responsibilities related to ensuring the exercise and protection of those rights according to the requirements in section 245D.04;

- sections 245A.65 and 626.557 governing maltreatment of vulnerable adults and staff responsibilities related to protecting person from maltreatment and reporting maltreatment;
- the principles of person-centered planning and delivery as identified in Minnesota Statutes, section 245D.07, subdivision 1a, 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 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 people with disabilities.

Corrective Action Ordered: Within 30 days of receiving this order, you must provide SP1 and SP2 with an orientation to the program requirements listed above. Compliance with this order will be reviewed 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.09, subdivision 4a.

Violation: For two staff persons whose records were reviewed (SP1 and SP2), the license holder did not provide orientation to individual service recipient needs as required.

The license holder did not provide the following orientation to SP1 and SP2 before having unsupervised direct contact with a person served by the program:

- the person's support plan or support plan addendum as it relates to the responsibilities assigned to the license holder; and
- the person's individual abuse prevention plan (IAPP), to achieve and demonstrate an understanding of the person as a unique individual, and how to implement those plans.

Corrective Action Ordered: Within 30 days of receiving this order, you must provide the orientation listed above to SP1 and SP2 for each service recipient the staff person provides direct support services to. Compliance with this order will be reviewed 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.09, subdivision 5.

Violation: For one staff person whose record was reviewed (SP1), the license holder did not provide annual training 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 provide annual training to SP1 in 2024 and 2025 on the following topics:

- 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;
- the service recipient rights and staff responsibilities related to ensuring the exercise and protection of those rights according to the requirements in section 245D.04;
- sections 245A.65 and 626.557 governing maltreatment of vulnerable adults and staff responsibilities related to protecting person from maltreatment and reporting maltreatment;
- the principles of person-centered planning and delivery as identified in Minnesota Statutes, section 245D.07, subdivision 1a, and how they apply to direct support services 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 people with disabilities.

Corrective Action Ordered: For SP1 complete the corrective action ordered for citation 6 to meet the requirements of this citation. Additionally, within 30 days of receiving this order, you must:

- complete an audit of all personnel records to ensure all staff persons have received the training required in these subdivisions;
- provide any lapsed training identified in the audit to the staff persons and maintain documentation of this training as required in section 245D.095, subdivision 5.

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

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

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

The license holder did not maintain a personnel record for SP1 and SP2 that included documentation of training, including:

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

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

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
Office of Inspector General
Legal Counsel's Office
Attention: Licensing Legal Unit
PO Box 64953
St. Paul, MN 55164-0953

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.

Liz Schiefelbein, HCBS Licensor
Licensing Division
Office of Inspector General
651-431-2738