



November 26, 2025

Ashley Doss, Authorized Agent
Home Sweet Home Care Services, Inc
8700 West 36th Street #225
Saint Louis Park, Minnesota 55426-3951

License Number: 1111242 (245D – HCBS)
1127082 (Child Foster Residential Setting)

CORRECTION ORDER

Dear Ashley Doss:

On October 21, 2025, and October 23, 2025, a licensing review of Home Sweet Home Care Services Inc, located at 8700 West 36th Street, Saint Louis Park, 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 1, paragraph (a).

Violation: The license holder did not establish and enforce a program abuse prevention plan (PAPP) as required.

The license holder did not establish and enforce a PAPP for each location within the control of the license holder and where licensed services were provided.

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

- establish a PAPP that meets the requirements outlined in Minnesota Statutes 245A.65, subdivision 2, paragraph (a) for each location within your control and where licensed services are provided;
- orient all persons served to the PAPP and maintain documentation of this orientation in the service recipient record; and
- provide training to staff on the PAPP for the location they provide services at. If staff work at multiple locations, they must receive orientation to the PAPP for each location they work at. Documentation of this training must be maintained in the personnel record including the date the training is completed, the number of hours per subject area, and the name of the trainer or instructor.

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.04, subdivision 1.

Violation: For one of two persons whose records were reviewed (P1), the license holder did not provide a written notice of service recipient rights as required.

The license holder initiated services for P1 on May 18, 2025. The license holder did not provide P1 or P1's legal representative with a written notice that identified the service recipient rights and an explanation of those rights within five working days of service initiation. The license holder provided P1's legal representative with the written notice in July 2025.

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.

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

Violation: For one person whose record was reviewed (P2), the license holder did not document how health services would be met as required.

The license holder was assigned the responsibility of meeting P2's health needs in P2's support plan and support plan addendum. P2 was prescribed a pro re nata (PRN) psychotropic medication. The license holder failed to maintain documentation on how P2's health needs would be met in P2's support plan addendum, including a description of the procedures the license holder would follow in order to administer P2's psychotropic PRN medication.

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

- document the above information in P2's support plan addendum;
- provide training to all staff who work with P2 on the updated information; and

- maintain documentation of this training in the personnel record including the date the training is completed, the number of hours per subject area, and the name of the trainer or instructor.

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.05, subdivision 2.

Violation: For two persons whose records were reviewed (P1 and P2), the license holder did not implement medication administration procedures as required.

- a. The license holder did not obtain written authorization from P1's legal representative and P2's legal representative to administer medication or treatment before administering medication or treatment.
- b. The license holder was assigned responsibility for medication administration for P2. The license holder documented multiple medication errors between August 9, 2025, and August 12, 2025, where P2 did not receive one daily prescribed medication due to the program not having the medication available. The license holder did not implement medication administration procedures to ensure P2 took medications and treatments as prescribed when the license holder did not ensure medication refill requests were communicated in a timely manner.

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

- obtain authorization from P1's and P2's legal representative to administer medication or treatment. You must maintain this authorization in P1's and P2's support plan addendum;
- develop and implement a plan across your program to ensure medication refills are requested in a timely manner to ensure persons receive medications as prescribed when you are assigned the responsibility of medication administration;
- maintain documentation of this plan in your program's records;
- train all staff who are responsible for administering medications on your plan and how to implement it; and
- maintain documentation of this training in the personnel record including the date the training is completed, the number of hours per subject area, and the name of the trainer or instructor.

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 Statutes, section 245D.05, subdivision 4.

Violation: For one person whose record was reviewed (P2), the license holder did not report medication errors or refusals as required.

The license holder was assigned responsibility for medication administration for P2. There were multiple medication errors or refusals documented between August 2025 and September 2025. The license holder did not report the medication errors or refusals to P2's legal representative and case manager as they occurred.

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

- review P2's MARs from July 2025 to current to ensure the information maintained in the MAR is current and to identify medication administration errors;
- report any medication errors found in P2's MARs to P2's legal representative and P2's case manager; and
- maintain documentation of the notifications regarding the medication errors in P2's record.

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.

6. Citation: Minnesota Statutes, section 245D.051, subdivision 1.

Violation: For two persons whose records were reviewed (P1 and P2), the license holder did not develop, implement, and maintain documentation regarding psychotropic medications as required.

Minnesota Statutes, section 245D.051, subdivision 1, paragraph (b) defines "target symptoms" as any perceptible diagnostic criteria for a person's diagnosed mental disorder, as defined by the Diagnostic and Statistical Manual of Mental Disorders Fourth Edition Text Revision (DSM-IV-TR) or successive editions, that has been identified for alleviation.

The license holder was assigned responsibility for administering P1's and P2's psychotropic medications. The license holder did not maintain documentation of a description of the target symptoms for each psychotropic medication prescribed to P1 and P2 in the person's support plan addendum.

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

- maintain documentation in P1's and P2's support plan addendum of a description of the target symptoms that each psychotropic medication is to alleviate, as required in this subdivision;
- audit the records of all service recipients your program is assigned the responsibility for medication administration to ensure each person's support plan addendum includes a description of target symptoms for each psychotropic medication prescribed to the person;
- for any person who does not have target symptoms documented for each psychotropic medication, you must document the target symptoms in the person's support plan addendum; and

- maintain the audit results in your program's records.

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.06, subdivision 1.

Violation: For one person whose record was reviewed (P2), the license holder did not report incidents, as defined in section 245D.02, subdivision 11, as required.

P2 was involved in two incidents that occurred on August 24, 2025, and September 5, 2025. The license holder did not report the incidents to P2's legal representative and case manager within 24 hours of the incident occurring while services were being provided or within 24 hours of discovery or receipt of information that an incident occurred.

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

- review all incidents for P2 to ensure notification has been made to P2's legal representative and P2's case manager;
- for any incidents that were not reported to P2's legal representative and case manager, you must immediately notify them of the incident; and
- maintain documentation of this notification in the service recipient record as required.

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.07, subdivision 2.

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

- a. The license holder did not review, and revise as needed, the preliminary support plan addendum for P1 to document how and by whom services would be provided and the person responsible for overseeing the delivery and coordination of services.
- b. The license holder initiated services for P2 on July 15, 2025. The license holder did not review and revise the preliminary support plan addendum within 60 calendar days of service initiation. The license holder reviewed and revised the preliminary support plan addendum on September 24, 2025.

Corrective Action Ordered: P1 no longer receives this service, therefore, no corrective action is required. 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.071, subdivision 3, paragraph (a).

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

The license holder initiated an intensive service for P1 on May 18, 2025. The license holder did not complete a preliminary support plan addendum based on the support plan within 15 days of service initiation. The license holder completed the preliminary support plan addendum on July 2, 2025.

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.

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

Violation: For one person whose record was reviewed (P1), the license holder did not complete assessments as required.

The license holder did not complete an assessment for P1 that included information about P1's overall strengths, functional skills and abilities, and behaviors or symptoms.

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

- complete an assessment of P1 that includes information about P1's overall strengths, functional skills and abilities and behaviors or symptoms;
- provide training to staff that work with P1 on the updated assessment; and
- maintain documentation of the training in the personnel record, including the date the training is completed, the number of hours per subject area, and the name of the trainer or instructor.

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.

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

Violation: For one person whose record was reviewed (P1), the license holder did not hold an initial planning meeting as required.

The license holder did not hold an initial planning meeting with P1, P1's legal representative, P1's case manager, and other members of the support team within 45 days of service initiation. The license holder initiated services for P1 on May 18, 2025 and held an initial planning meeting with P1 and P1's legal representative in August 2025. The license holder did not provide an opportunity for P1's case manager to participate in the meeting.

Additionally, the license holder did not determine the following information during the meeting:

- the scope of the services to be provided to support P1's daily needs and activities;
- P1's desired outcomes and the supports necessary to accomplish P1's desired outcomes;
- P1's preferences for how services and supports were provided, including how the provider would support P1 to have control of P1's schedule;
- whether the current service setting is the most integrated setting available and appropriate for P1;
- 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 P1's choice in the community; and
- how technology might be used to meet P1's desired outcomes.

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

- meet with P1, P1's legal representative, P1's case manager, and other members of the support team to determine the following:
 - P1's preferences for how services and supports are provided, including how you will support P1 to have control of P1's schedule;
 - opportunities to develop and strengthen personal relationships with other persons of P1's choice in the community; and
 - how technology might be used to meet P1's desired outcomes.
- document the information determined at the meeting in P1's support plan addendum and submit the completed plan to P1, P1's legal representative, and P1's case manager to obtain dated signatures to document completion and approval of the plan; and
- train all staff that work with P1 on the updated support plan addendum and maintain documentation of this training in the personnel record, including the date the training is completed, the number of hours per subject area and the name of the trainer or instructor.

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.

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

Violation: For one person whose record was reviewed (P1), the license holder did not document service outcomes and supports as required.

The license holder did not document the supports and methods to be implemented to support P1 and accomplish outcomes related to acquiring, retaining, or improving skills and physical, mental, and emotional health and well-being including:

- the methods or actions that would be used to support P1 and to accomplish service outcomes including:
 - any equipment and materials required; and
 - techniques that are consistent with P1's communication mode and learning style;
- the measurable and observable criteria for identifying when the desired outcome has been achieved and how data would be collected;
- the projected starting date for implementing the supports and methods and the date by which progress towards accomplishing the outcomes would be reviewed and evaluated; and
- the names of the staff or position responsible.

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

- update P1's support plan addendum to include the information outlined above; and
- provide training to all staff that work with P1 on the updated support plan addendum and maintain documentation of this training in the personnel file including the date the training is completed, the number of hours per subject area, and the name of the trainer or instructor.

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.

13. 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 a service recipient record as required.

The license holder did not maintain a signed statement authorizing the license holder to act in a medical emergency when P1's and P2's legal representative could not be reached or is delayed in arriving.

Corrective Action Ordered: Within 30 days of receiving this order, you must obtain a signed statement from P1's and P2's legal representative, authorizing you to act in a medical emergency when the legal representative cannot be reached or is delayed in arriving.

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.

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

Violation: For one person whose record was reviewed (P1), the license holder did not make available current written policies and procedures as required.

The license holder initiated services for P1 on May 18, 2025. The license holder did not inform and provide copies of the policies and procedures affecting P1's rights to P1 and P1's case manager within five working days of service initiation. P1 received a copy of the policies in July 2025 and P1's case manager received a copy of the policies in August 2025.

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.

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

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

The license holder did not evaluate the positive support strategies to be used when providing services to P1 at least every six months with P1 to determine whether changes are needed.

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

- evaluate with P1 the positive support strategies to be used when providing services to P1 and document the evaluation in P1's service recipient record; 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.

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

16. Citation: Minnesota Rules, part 9544.0110.

Violation: For one person whose record was reviewed (P2), the license holder did not use the behavioral intervention reporting form (BIRF) to report incidents as required by the commissioner.

The license holder did not use the BIRF to report a behavioral incident resulting in a call to 911 for P2 on August 24, 2025, and September 5, 2025.

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

- utilize the BIRF to report the above-mentioned incidents involving P2 to the commissioner;
- provide training on the reporting requirements identified in Minnesota Rules, part 9544.0110, to all staff persons responsible for reviewing incidents occurring at your program; and

- maintain documentation of this training in the staff person's personnel record according to the requirements in Minnesota Statutes, section 245D.095, subdivision 5.

Within 60 days of receiving this order, you must:

- audit all service recipient records to identify incidents that are required to be reported to the commissioner using the BIRF;
- for any incident identified that requires notice to the commissioner, and in which a BIRF has not previously been completed, you must provide notice to the commissioner using the BIRF;
- maintain documentation of these reports in the person's service recipient record; and
- maintain the results of your audit that includes the date(s) action was taken to achieve compliance with the applicable laws and rules.

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

17. 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 as required.

- a. The license holder hired SP1 on September 25, 2023. The license holder did not provide and ensure completion of orientation for SP1 in the following areas within 60 days of hire:
 - 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. SP1 received training in this area in January 2024;
 - sections 245A.65, 245A.66, and 626.557 and chapter 260E governing maltreatment reporting and service planning for children and vulnerable adults, and staff responsibilities related to protecting persons from maltreatment and reporting maltreatment. This orientation must be provided within 72 hours of first providing direct contact services. SP1 received training in this area in January 2024; and
 - basic first aid. SP1 received training in this area in August 2025.
- b. The license holder did not provide and ensure completion of orientation for SP1 and SP2 in the following areas:
 - the service recipient rights, and staff responsibilities related to ensuring the exercise and protection of those rights according to the requirements in 245D.04; 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 training, you must provide training to SP1 and SP2 in the areas identified in (b) and maintain documentation of the training provided in the personnel record including the date the training is completed, the number of hours per subject area, and the name of the trainer or instructor. 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.

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

Violation: For one staff person whose record was reviewed (SP1), the license holder did not provide training to individual service recipient needs as required.

The license holder hired SP1 on September 25, 2023. The license holder did not provide training in the following areas to SP1 prior to allowing SP1 to have unsupervised direct contact with persons served by the program:

- individual service recipient needs. SP1 received training in this area in January 2024;
- an understanding of what constitutes a healthy diet according to data from the Centers of Disease Control and Prevention and the skills necessary to prepare that diet. At the time of the review, SP1 had not yet received this training; and
- skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) as defined under section 256B.0659, subdivision 1. At the time of the review, SP1 had not yet received this training.

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

- provide training to SP1 in the areas outlined above;
- conduct an audit to ensure all staff have been trained on individual service recipient needs;
- provide the training to any staff identified in the audit; and
- maintain documentation of this training in the personnel record including the date the training is completed, the number of hours per subject area, and the name of the trainer or instructor.

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.

19. 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.

- a. The license holder did not provide annual training to SP1 in the following areas in 2024:

- the principles of person-centered service planning and delivery as identified in section 245D.07, subdivision 1a, and how they apply to direct support service provided by the staff person. SP1 last received this training in October 2023;
 - the safe and correct use of manual restraint on an emergency basis according to the requirements in section 245D.061 or successor provisions, and what constitutes the use of restraints, time out and seclusion, including chemical restraint. SP1 last received this training in October 2023; and
 - staff responsibilities related to prohibited procedures under section 245D.06, subdivision 5, or successor provisions, why such procedures are not effective for reducing or eliminating symptoms or undesired behavior, and why such procedures are not safe. SP1 last received this training in October 2023.
- b. The license holder did not provide annual training to SP1 in the following areas in 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. SP1 last received this training in August 2024; and
 - sections 245A.65, 245A.66, and 626.557 and chapter 260E governing maltreatment reporting and service planning for children and vulnerable adults, and staff responsibilities related to protecting persons from maltreatment and reporting maltreatment. SP1 last received this training in August 2024;

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

- provide training to SP1 on the topics outlined above;
- conduct an audit of all staff persons training records to ensure they have received all required orientation and annual training;
- provide the missing training for any staff identified in the audit to be missing orientation or annual training; and
- maintain documentation of this training in the personnel record including the date the training is provided, the number of hours per subject area, and the name of the trainer or instructor.

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.

20. 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 a personnel record as required.

The license holder did not maintain a personnel record for SP1 that included the date of first supervised contact with persons served and the date of first unsupervised direct contact with persons served. Additionally, the license holder did not maintain a

personnel record for SP1 and SP2 that included the date training was completed, the number of hours per subject area, and the name of the trainer or instructor.

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

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

Violation: The license holder did not establish written policies and procedures related to suspected or alleged maltreatment as required.

The license holder did not ensure that the policy and procedure on the internal reporting of alleged or suspected maltreatment identified the primary and secondary person or position to whom internal reports could be made and the primary and secondary person or position responsible for forwarding internal reports to the common entry point as defined in section 626.5572, subdivision 5.

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

- establish a policy and procedure on the internal reporting of alleged or suspected maltreatment that identifies the primary and secondary person or position to whom internal reports can be made and the primary and secondary person or position responsible to forward internal reports to the common entry point. Your policy must require the secondary person to be involved when there is reason to believe the primary person is involved in the alleged or suspected maltreatment;
- provide orientation to all persons served on the updated policy and maintain documentation of this orientation in the service recipient record; and
- provide orientation to all staff on the updated policy and maintain documentation of this training in the personnel record including the date the training is completed, the number of hours per subject area, and the name of the trainer or instructor.

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.

22. Citation: Minnesota Statutes, section 245D.061, subdivision 9.

Violation: The license holder did not develop, document, and implement a policy and procedure on the emergency use of manual restraints as required.

The license holder maintained a policy that both allowed and did not allow the use of emergency use of manual restraints. The license holder did not establish a policy and procedure that identified if the emergency use of manual restraints was allowed or not allowed in the program.

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

- establish a policy and procedure for your program that either allows or does not allow the emergency use of manual restraint;
- once established, you must inform all persons served, legal representatives, and case managers on the established policy and provide copies of the updated policy;
- maintain documentation of persons served, legal representatives, and case managers being informed of the updated policy in the service recipient record; and
- provide training to all staff on the updated policy and maintain documentation of this training in the personnel record including the date the training is completed, the number of hours per subject area, and the name of the trainer or instructor.

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.

23. Citation: Minnesota Statutes, section 245D.10, subdivision 2.

Violation: The license holder did not establish a policy and procedure for grievances as required.

The license holder did not include in the grievance policy and procedure, the name, address, and telephone number of the highest authority in the program.

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

- update your grievance policy to include the name, address, and telephone number of the highest authority in the program;
- inform all persons served and case managers of the updated policy and provide copies of the updated policy;
- maintain documentation of persons served and case managers being informed of and provided copies of the updated grievance policy; and
- provide training to all staff on the updated policy and maintain documentation of this training in the personnel record including the date the training is completed, the number of hours per subject area, and the name of the trainer or instructor.

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.

24. Citation: Minnesota Statutes, section 245D.081, subdivision 3.

Violation: The license holder did not ensure program coordination, evaluation, management and oversight was completed as required.

The license holder did not ensure the staff person the license holder identified as the designated manager (SP4) completed 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), and when applicable, as identified in section 256B.04, subdivision 21, paragraph (b);

- ensuring the duties of the designated coordinator are fulfilled according to the requirements in subdivision 2; and
- ensuring staff competency requirements are met according to the requirements in section 245D.09, subdivision 3, and ensuring staff orientation and training is provided according to the requirements in section 245D.09, subdivisions 4, 4a, and 5.

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

- review the job duties with the designated coordinators and designated managers and obtain a signed acknowledgement from the designated coordinators and designated managers that they have reviewed and understand the job duties;
- develop and implement a written plan for how you will come into compliance in all areas listed in this correction order. This plan must include specific actions you will implement to ensure ongoing compliance with the 245D requirements throughout your program on an ongoing basis; and
- maintain this written plan in your program records for review by DHS licensors.

Compliance with this subdivision will be monitored onsite. 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
ATTN: Legal Unit
Licensing Division
PO Box 64242
St. Paul, MN 55164-0242

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.

Ashley Doss

Page **16** of **2**

November 26, 2025

If you have any questions regarding this Correction Order, please contact me as soon as possible.

Erin White, Home and Community Based Services Licensor

Licensing Division

Office of Inspector General

651-431-4821