

March 5, 2026

Stella Nyakundi, Authorized Agent
Holistic Nursing Corp
6501 91st Trail North
Brooklyn Park, Minnesota 55445-1634

License Number: 1109156 (245D – HCBS)

CORRECTION ORDER

Dear Stella Nyakundi:

On January 26, 2026, a licensing review of Holistic Nursing Corp, located at 1821 University Avenue West Suite 205, 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, paragraph (b).

Violation: For three of three persons whose records were reviewed (P1-P3), the license holder did not document 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.

- a. The license holder did not document the review of P1’s or P2’s individual abuse prevention plan (IAPP) at least annually in 2025 as required.
- b. The license holder did not document the review of P3’s IAPP at least annually in 2023, 2024, or 2025 as required.

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

- meet with P1's, P2's, and P3's interdisciplinary teams to review P1's, P2's, and P3's IAPPs using the individual assessments and any reports of abuse relating to P1, P2, and P3;
- revise P1's, P2's, and P3's support plan to reflect the results of the review; and
- provide training to all staff providing working with P1, P2, and P3.

Compliance will be monitored 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 three persons whose records were reviewed (P1-P3), the license holder did not provide the service recipient rights as required.

- a. The license holder did not provide P1 and P2 with a written notice that identified the service recipient rights in subdivisions 2 and 3, and an explanation of those rights annually in 2025 as required.
- b. The license holder did not provide P3 with a written notice that identified the service recipient rights in subdivisions 2 and 3, and an explanation of those rights annually in 2023, 2024, and 2025 as required.

Corrective Action Ordered: Within 60 days of receiving this order, you must provide P1-P3 with a notice that identifies the service recipient rights and an explanation of those rights as required. You must maintain documentation of P1's, P2's, and P3's receipt of a copy and an explanation of the rights in P1's, P2's, and P3's service recipient record. Compliance will be monitored 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 two persons whose records were reviewed (P1, P2), the license holder did not document how health service needs would be met as required.

- a. The license holder documented responsibility for meeting health service needs for P1. The license holder did not maintain documentation on how P1's health needs would be met, including a description of the procedures the license holder would follow in order to:
 - provide medication assistance according to this chapter;
 - assist with or coordinate medical, dental, and other health service appointments; and
 - use medical equipment, devices, or adaptive aides or technology safely and correctly according to written instructions from a licensed health professional.
- b. The license holder documented responsibility for meeting health service needs for P2. The license holder did not maintain documentation on how P2's health needs would be met, including a description of the procedures the license holder would follow in order to:
 - assist with or coordinate medical, dental, and other health service appointments; and
 - 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 60 days of receiving this order, you must update P1's and P2's support plan addendums to include the health service needs documentation and information listed in this citation. Compliance will be monitored 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.07, subdivision 2.

Violation: For two persons whose records were reviewed (P1, P2), the license holder did not meet service planning requirements for basic support services.

- a. The license holder initiated P1's services on May 1, 2024. Within 60 calendar days of service initiation, the license holder did not review and revise as needed the preliminary support plan addendum to document the services that will be provided including, how, when, and by whom services will be provided, and the person responsible for overseeing the delivery and coordination of services for P1.

Additionally, the license holder did not participate in service planning and support team meetings annually in 2025 as established in P1's support plan addendum.

- b. The license holder initiated P2's services on September 1, 2024. Within 60 calendar days of service initiation, the license holder did not review and revise as needed the preliminary support plan addendum to document the services that will be provided including, how, when, and by whom services will be provided, and the person responsible for overseeing the delivery and coordination of services for P2. The license holder did maintain a support plan addendum for P2; however, the date of completion was unclear due to the document being undated.

Additionally, the license holder did not participate in service planning and support team meetings annually in 2025 as established in P2's support plan addendum.

- c. The license holder initiated P3's services on July 25, 2022. Within 60 days of service initiation, the license holder did not review and revise as needed the preliminary support plan addendum to document the services that will be provided including, how, when, and by whom services will be provided, and the person responsible for overseeing the delivery and coordination of services for P3.

Additionally, the license holder did not participate in service planning and support team meetings quarterly in 2023, 2024, or 2025 as established in P3's support plan addendum.

Corrective Action Ordered: Within 60 days of receiving this order, you must review and revise as needed P1's, P2's, and P3's support plan addendum to document:

- the services that will be provided including how, when, and by whom services will be provided;
- the person responsible for overseeing the delivery and coordination of services; and
- maintain documentation of all staff persons trained on the needs of persons served in each staff person's training record.

Compliance will be monitored 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.095, subdivision 3, paragraph (b), clause (11).

Violation: For two persons whose records were reviewed (P1-P3), the license holder did not maintain service recipient records as required.

The license holder did not maintain a record of progress or daily log notes for P1, P2, and P3 as required.

Corrective Action Ordered: Compliance will be monitored 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.10, subdivision 4, paragraph (b).

Violation: For three persons whose records were reviewed (P1 – P3), the license holder did not provide policies and procedures as required.

- a. The license holder did not inform P1's case manager of the policies and procedures affecting a person's rights and provide copies of the following policies and procedures within five working days of service initiation as required:
- grievance policy and procedure;
 - service suspension and service termination policy and procedure; and
 - emergency use of manual restraints policy and procedure.

P1's services were initiated by the license holder on May 1, 2024. At the time of this review, these policies and procedures had not been provided to P1's case manager.

- b. The license holder did not inform P2's case manager of the policies and procedures affecting a person's rights and provide copies of the following policies and procedures within five working days of service initiation as required:
- grievance policy and procedure;
 - service suspension and service termination policy and procedure; and
 - emergency use of manual restraints policy and procedure.

P2's services were initiated by the license holder on September 1, 2024. At the time of this review, these policies and procedures had not been provided to P2's case manager.

- c. The license holder did not inform P3's case manager of the policies and procedures affecting a person's rights and provide copies of the following policies and procedures within five working days of service initiation as required:
- grievance policy and procedure;
 - service suspension and service termination policy and procedure; and
 - emergency use of manual restraints policy and procedure.

P3's services were initiated by the license holder on July 25, 2022. At the time of this review, these policies and procedures had not been provided to P3's case manager.

Corrective Action Ordered: Within 60 days of receiving this order, you must inform and provide copies of the above-mentioned policies and procedures to P1's, P2's, and P3's case managers. Compliance will be monitored at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subdivision.

7. Citation: Minnesota Rules, 9544.0030.

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

The license holder did not develop and implement positive support strategies for P1, P2, and P3 as required.

Corrective Action Ordered: On an ongoing basis, you must ensure that the identified positive support strategies for each person served are reviewed at least every six months. Compliance will be monitored at an upcoming compliance monitoring visit. On an ongoing basis, you must maintain compliance as required in this subpart.

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

Violation: For three of five staff persons whose records were reviewed (SP1 – SP3), the license holder did not provide and ensure orientation to the program as required.

The license holder did not provide and ensure SP1's -SP3's orientation was completed within 60 days of hire and included review and instruction in the following areas:

- the job description and how to complete specific job functions, including:
 - responding to and reporting incidents as required under section 245D.06, subdivision 1; and
 - following safety practices established by the license holder and as required in section 245D.06, subdivision 2;
- the license holder's policies and procedures, including:
 - grievance policy and procedure required under subdivision 2;
 - service suspension and termination policy and procedure required under subdivision 3;
 - emergency use of manual restraints policy and procedure required under section 245D.061, subdivision 9, or successor provisions; and
- 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, 245A.66, and 626.557 and chapter 260E governing maltreatment reporting and service planning for vulnerable adults, and staff responsibilities related to protecting persons from maltreatment and reporting maltreatment;
- 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;

- 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;
- 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;
- 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.

The license holder hired SP1 on April 20, 2024, and again on June 8, 2025. The license holder hired SP2 on October 28, 2023, and SP3 was hired on August 3, 2022.

Corrective Action Ordered: Within 60 days of receiving this order you must provide SP1-SP3 with the trainings identified above and annually thereafter and maintain documentation in accordance with Minnesota Statutes 245D.095. Compliance will be monitored 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.09, subdivision 4a.

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

The license holder did not provide SP1 or SP2 with review and instruction on 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, to achieve and demonstrate an understanding of the person as a unique individual, and how to implement those plans before SP1 and SP2 had unsupervised direct contact with a person served by the program.

Corrective Action Ordered: Within 60 days of receiving this order you must provide SP1 and SP2 with orientation to individual services recipient needs as outlined above and maintain documentation according to Minnesota Statutes 245D.095. Compliance will be monitored 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.095, subdivision 5, paragraph (b).

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

The license holder did not maintain the following documentation:

- SP1's and SP2's qualifications;
- SP1-SP3's training records including:
 - the date the training was completed;
 - the number of hours per subject area; and
 - the name of the trainer or instructor; and

- information sufficient to determine the date of SP1's and SP3's first unsupervised direct contact with a person served by the program, and the date of the first unsupervised contact with a person served by the program.

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

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

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

The license holder did not establish, enforce, and maintain a policy and procedure for the reporting of suspected or alleged maltreatment to vulnerable adults, as required.

Corrective Action Ordered: Within 30 days of receiving this order, you must ensure that the policy above is established, enforced, and maintained, as required. Compliance will be monitored 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.10.

Violation: The license holder did not establish, enforce, and maintain policies and procedures as required.

The license holder did not establish, enforce, and maintain the following policies and procedures as required in this chapter, chapter 245A, and other applicable state and federal laws and regulations governing the provision of home and community-based services licensed according to this chapter as required:

- grievances;
- service suspension; and
- service termination.

Corrective Action Ordered: Within 30 days of receiving this order, you must ensure that the policies mentioned above are established, enforced, and maintained, as required. Compliance will be monitored 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.11.

Violation: The license holder did not establish, enforce, and maintain intensive policies and procedures as required.

The license holder did not establish, enforce, and maintain the following intensive support services policies and procedures as required:

- health and welfare;

- use of universal precautions and sanitary practices in compliance with section 245D.06, subdivision 2, clause (5);
 - safe medication assistance and administration according to the requirements in section 245D.05, subdivisions 1a, 2 and 5, and 245D.051, that are established in consultation with a registered nurse, advanced practice registered nurse, physician assistant, or medical doctor and require completion of medication administration training according to the requirements in section 245D.09, subdivision 4a, paragraph (d);
 - safe transportation, when the license holder is responsible for transportation of persons, with provisions for handling emergency situations according to the requirements in section 245D.06, subdivision 2, clauses (2) to (4);
 - a plan for responding to all incidents as defined in section 245D.02, subdivision 11; and reporting all incidents required to be reported according to section 245D.06, subdivision 1; and
 - a procedure for the review of incidents and emergencies to identify trends or patterns, and corrective action if needed.
- data privacy; and
 - admission criteria.

Corrective Action Ordered: Within 30 days of receiving this order, you must ensure that the policies mentioned above are developed, maintained, and enforced, as required. Compliance will be monitored 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, subdivisions 2 and 3.

Violation: The license holder did not ensure the designated coordinators (SP4, SP5) and the designated managers (SP4, SP5) provided program management and oversight of the services provided by the license holder as required.

- a. The license holder did not ensure that the staff person the license holder identified as the designated coordinator 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 outcomes have been achieved according to the requirements in section 245D.07.
- b. The license holder did not ensure that the staff person the license holder identified as the designated manager performed the required program management and oversight of the services provided by the license holder that included:

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

Corrective Action Ordered: Within 30 days of receiving this order, you must designate an individual or individuals other than SP4 and SP5 to hold the role(s) of designated coordinator and designated manager. For the individual(s) holding these roles, you must submit a completed designated coordinator and designated manager verification form to your licensor. Compliance will be monitored 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.

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

1. By secure email at Dylan.Sobota@state.mn.us; 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: Dylan Sobota
Licensing Division
PO Box 64242
St. Paul, MN 55164-0242

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

Stella Nyakundi

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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.

Dylan Sobota, HCBS Licenser
Licensing Division
Office of Inspector General
651-431-2690