BEFORE THE MINNESOTA
BOARD OF EXECUTIVES FOR LONG-TERM SERVICES AND SUPPORT
STANARDS OF PRACTICE COMMITTEE

In the Matter of

Jennifer Thorson

License No. 1574

AGREEMENT FOR

CORRECTIVE ACTION

On January 5th, 2024, the Minnesota Board of Executives for Long-Term Services and Supports ("Board") issued Jennifer Thorson (Licensee") an Agreement for Corrective Action ("2024 ACA") requiring completion of educational course work and written reports. The Board has reviewed all materials submitted on behalf of Licensee, pursuant to that ACA, and has determined that Licensee complied with and fulfilled all terms of the 2024 ACA.

NOW, THEREFORE, IT IS HEREBY ORDERED that the terms of the 2024 ACA issued to Licensee have been successful met and all requirements satisfied.

Dated: 6/17/2024

STATE OF MINNESOTA

BOARD OF EXECUTIVES

FOR LONG-TERM SERVICES

AND SUPPORT

_____

Stephen Jobe

Executive Director

BEFORE THE MINNESOTA
BOARD OF EXECUTIVES FOR LONG-TERM SERVICES AND SUPPORTS
STANDARDS OF PRACTICE COMMITTEE

In the Matter of
Jennifer Thorson, LALD
License No. 1574

AGREEMENT FOR CORRECTIVE ACTION

This Agreement is entered into by and between Jennifer Thorson, LALD ("Licensee"), and the Standards of Practice Committee ("Committee") for the Minnesota Board of Executives for Long-Term Services and Supports ("Board") based on Minnesota Statutes section 214.103, subdivision 6(a)(2). Licensee and the Committee agree to the following:

FACTS

1. On June 7, 2021, the Board granted Licensee an Assisted Living Director ("LALD") license.

2. Licensee is part owner of a management company which oversees assisted living facilities in Aitkin, Minnesota ("Facility #1"), in Fridley, Minnesota, and in Anoka, Minnesota.

a. On April 13, 2022, the Minnesota Department of Health ("MDH") performed a survey of Facility #1. The survey identified multiple deficiencies, including a failure to ensure sufficient staffing, failure to report maltreatment allegations for two residents, and failure to identify measures to reduce residents' elopement risk for residents whom the facility identified as "memory care," while providing some residents with door-code access to unmonitored key-code exit doors. MDH issued 34 correction orders resulting from the survey and issued a 90-day conditional license to Facility #1. MDH twice extended the conditional license on October 5, 2022 and December 19, 2022.

b. On or about December 20, 2022, the Board learned that, during the survey process, Licensee sent correspondence to MDH which indicated to MDH that Licensee was the Licensed Assisted Living Director ("LALD") of Facility #1, when an Assisted Living Director in Residence ("ALDIR") had been listed as the Residency Permit Director. The ALDIR's permit expired on November 1, 2022. Licensee had been listed as the mentor for the ALDIR.

c. In a letter dated December 20, 2022, the Board requested Licensee's response, explaining her role at Facility #1 and identifying the LALD or Residency Permit Director of Record for Facility #1. Licensee submitted a written response on December 21, 2022, stating the following:

1) Licensee's role as executive director included overseeing and assisting the ALDIR at Facility #1, and that it was appropriate for Licensee to be the main point of contact for the State of Minnesota during an ownership change at Facility #1;

2) The October 5, 2022 MDH survey results named Licensee as the owner, not the LALD;

3) Licensee was working to resolve the ALDIR's Residency Permit expiration by having the current Director of Nursing at Facility #1 complete the ALDIR requirements, by hiring a temporary LALD, and by having Licensee serve as the LALD for Facility #1 on a temporary basis.

d. On January 24, 2023, MDH completed a further follow-up evaluation of Facility #1, finding the facility not to be in substantial compliance with Minnesota Statutes chapter 144G and extending the facility's conditional license to May 14, 2023. MDH revised Facility #1's conditional license to require a third-party registered nurse ("RN") consultant to assess residents for their need for a dementia-care facility.

e. MDH conducted additional complaint investigations on April 14, 2023, May 10, 2023, and May 23, 2023. As a result, MDH required Facility #1 to continue to contract with an RN consultant concerning all residents receiving services at the facility, and found that Facility #1 failed to document incidents to prevent recurrence and failed to provide services based on each resident's needs pursuant to an up-to-date service plan.

CORRECTIVE ACTION

3. The Committee determined that the conduct described in paragraphs 2.a.-2.e.above does not comply with Minnesota Rules 6400.7095, subpart 1.E. and 1.I., and necessitates the following corrective action as described below.

Written Report. Within 60 days of this Agreement becoming effective, Licensee shall submit a written report stating Licensee's understanding of her role and responsibility as an assisted living director at Facility #1; her role and responsibility as a manager at Facility #1; and her role as a mentor. Licensee shall submit or cause to be submitted to the Board verification that the ownership of Facility #1 has received a copy of the report. The Board's mailing address is Minnesota Board of Executives for Long-Term Services and Supports, c/o Stephen Jobe, Executive Director, 335 Randolph Avenue, Suite 210-B, St. Paul, Minnesota 55102. Final determination regarding successful completion of this requirement shall be at the discretion of the Committee.

OTHER INFORMATION

4. Upon Licensee's satisfactory completion of the corrective action referenced in paragraph 3 above, the Committee agrees to dismiss the complaint(s) concerning the matters referenced in paragraphs 2.a.-2.e. above. The Committee shall be the sole judge of satisfactory completion. The Committee may reopen this complaint if it receives newly discovered

information that was not available to the Committee during the initial investigation or if the Committee receives a new complaint that indicates a pattern of behavior or conduct.

5. If Licensee fails to complete the corrective action satisfactorily, the Committee may, at its discretion, reopen the investigation and proceed according to Minnesota Statutes sections 144A.19 to 144A.37 (the Board's Practice Act) and chapters 214 and 14. Licensee agrees that failure to complete the corrective action satisfactorily is failure to cooperate under Minnesota Rules 6400.7905, subpart 1.U. and may subject Licensee to disciplinary action by the Board.

6. Licensee was represented in this matter by Kassandra K. Heinrich-Wydra, Esq., of Markve & Zweifel, PLLC, in Maple Grove, Minnesota. The Committee was represented by Erin Farmer, Assistant Attorney General.

7. This agreement shall become effective upon execution by the Board's Executive Director and shall remain in effect until the Committee dismisses the complaint, unless the Committee receives additional information that renders corrective action inappropriate. Upon receiving such information, the Committee may, at its discretion, proceed according to Minnesota Statutes sections 144A.19 to 144A.37 (the Board's Practice Act) and chapters 214 and 14.

8. This agreement is not disciplinary action. *See* Minnesota Statutes section 214.103, subdivision 6. However, this agreement is classified as public data pursuant to Minnesota Statutes section 13.41, subdivision 5.

9. Licensee hereby acknowledges having read and understood this agreement and having voluntarily entered into it. This agreement contains the entire agreement between the Committee and Licensee, there being no other agreement of any kind, verbal or otherwise, which varies the terms of this agreement.

LICENSEE

JENNIFER THORSON, LALD

Dated: 2/1/2024

STANDARDS OF PRACTICE COMMITTEE

STEPHEN JOBE
Executive Director

Dated: 4/10/2024

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