

# Interview: Client or Representative

## STATE EVALUATION: HOME CARE PROVIDERS (144A)

### Provider and Survey Information

Provider:

Date of Survey:

HFID:

Time of Survey:

Surveyor:

### Client Information

Client Name:

Client Identifier:

Representative Name:

Person Interviewed/Relationship:

### Interview Questions

#### Services and service plan

- Tell me about the care and services you receive from the provider. What do the staff do for you?
- Do you have a written service plan (agreement or contract) that shows what services the provider agrees to give you?
- Did you participate in determining what and how services are provided?
- Do you get the services the provider agrees to give you in your service plan?
- Are services provided in the way you asked for?
- Are you aware of the charges for the care and services you receive?
- Do the services meet your expectations?

Yes

No

Comments:

#### Staff interactions with client

- Do staff communicate respectfully with you?
- Do you have any concerns about the way staff treat you?
- Do you have any concerns with staff not treating your personal property with care?

## Availability of staff

- Are staff members available to answer your requests when you need them?
- Do staff members show up to provide services at the scheduled time?
- Was there ever a time when staff did not keep a scheduled appointment? If so, what happened?

## Resident rights and making a complaint

- Did you receive a copy of the Minnesota Home Care bill of rights?
- Do you know who to contact when you have a complaint about the care or services you receive? How would you contact them?
- Have you ever filed a complaint? If so, what was the complaint?
- What happened when you voiced a complaint?

## Registered nurse visits

- Does the registered nurse visit you? If so, how often?
- What does the RN do for you during the visit?

## Additional Information

- Is there anything else you would like to tell me about the care and services you receive?

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12/29/2022

*To obtain this information in a different format, call: 651-201-4200.*