

**DHS DIVISION OF LICENSING  
Self-Monitoring Checklist**

**Adult Day Care Center Services Licensed under Minnesota Rules, 9555.9600 – 9555.9730 (Rule 223)**

LAW / RULE	LICENSING STANDARD	Record 1	Record 2	Record 3	NOTES
9555.9660 Subp. 1	<p align="center"><b><u>Person's Written Record</u></b></p> <p>The center developed and maintained a written record for each person. The record included;</p> <p>A. an application form <b>signed</b> by the person or the person's caregiver that included the person's:</p> <ul style="list-style-type: none"> <li>• name</li> <li>• address</li> <li>• DOB</li> <li>• sex</li> <li>• date of admission or readmission</li> <li>• living arrangement</li> <li>• telephone number</li> <li>• source of referral</li> <li>• the name and telephone number of the person to call in case of emergency involving the person and name and number of another person to call if that person cannot be reached</li> <li>• name and telephone number of person's physician or medical provider</li> </ul> <p>B. a medical report</p> <ul style="list-style-type: none"> <li>• dated within the <b>3 months prior to or 30 calendar days</b> after the person's admission to the center</li> <li>• signed by a physician, or physician assistant or RN and cosigned by physician</li> </ul>				

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	<p>The medical report included:</p> <ul style="list-style-type: none"> <li>• a report on a physical examination, <b>updated annually</b>;</li> <li>• a medical history of the person;</li> <li>• indication of dietary restrictions and medication regimen, including the need for medication assistance, that apply to the person;</li> <li>• a release signed by the physical indicating whether the person may engage in a structured exercise program; and</li> <li>• documentation that the person is free from communicable disease or infestations, as specified in parts 4605.700 to 4605.7090, that would endanger the health of other participants.</li> </ul>				
	<p>C. reports received from other agencies involved in providing services or care to the person;</p>				
	<p>D. person's service agreement with the center, that specified the responsibilities of the person and the center with respect to payment for and provision of services and signed by the person or the person's caregiver and the center director;</p>				
	<p>E. attendance and participation reports and progress notes that are recorded at least monthly;</p>				
	<p>F. notes on special problems, medication changes, and need for medication assistance;</p>				
	<p>G. person's needs assessment and current plan of care in compliance with part 9555.9700;</p>				
	<p>H. a copy of the center's statement on the person's rights signed by the person or the person's caregiver;</p>				
	<p>I. incident reports involving the person;</p>				
	<p>J. copy of the individual abuse prevention plan (IAPP) developed for the person as required by section 626.557, subd. 14;</p>				

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	<p>K. a statement signed by the center director and person at the time of admission specifying the basis on which the person was determined to be capable or incapable of taking appropriate action for self-preservation under emergency conditions</p> <p>L. discharge summary if the person was discharged from the center.</p>				
<p><b>9555.9600, subp. 3</b></p>	<p align="center"><b><u>Right to contest</u></b></p> <p>The center provided each person with a written notice ensuring that each person or person's guardian or caregiver was informed of the person's right to contest the accuracy and completeness of the data maintained in the record.</p>				
<p><b>9555.9640</b></p>	<p align="center"><b><u>Distribution of Policies and Program Information</u></b></p> <p>The center had written information distributed to the person and their caregiver <b>upon admission.</b></p> <p>The written information included:</p> <p>A. the scope of the programs, services, and care offered by the center;</p> <p>B. a description of the population to be served;</p> <p>C. a description of the individual conditions which the center is not able to accept;</p> <p>D. the person's rights in accordance with part 9555.9670 and additional rights, including:</p> <ul style="list-style-type: none"> <li>• the right to participate in developing the person's plan of care;</li> <li>• the right to refuse care or participation;</li> <li>• the right to physical privacy during care or treatment;</li> <li>• the right to confidentiality of records;</li> <li>• the right to present grievances regarding treatment or care</li> </ul>				

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	<ol style="list-style-type: none"> <li>1. the procedure for presenting grievances, including the name, address, and telephone number of the Licensing Division of DHS, to which a person or person's caregiver may submit an oral or written complaint; and</li> <li>2. a copy or written summary of section 626.55, the Vulnerable Adults Act.</li> </ol>				
	E. the center's policy on and arrangements for providing transportation;				
	F. the center's policy on providing meals and snacks;				
	G. the center's fees, billing arrangements, and plans for payments;				
	H. the center's policy governing the presence of pets in the center;				
	I. the center's policy on smoking in the center;				
	J. types of insurance coverage carried by the center;				
	K. a statement of the center's compliance with section 626.557;				
	L. a statement that admission and employment policies and procedures comply with chapter 363, MN Human Rights Act;				
	M. the center's terms and conditions of licensure, including a description of the population the center is licensed to serve; and				
	N. the telephone number of DHS Licensing Division.				
	<p>The information in items A to N above were provided in writing to DHS upon request and were available for inspection by DHS at the center.</p>				

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LAW / RULE	LICENSING STANDARD	Record 1	Record 2	Record 3	NOTES
245A.65, Sub. 1	<p align="center"><b><u>VA Maltreatment Orientation</u></b></p> <p>The license holder met all requirements for providing orientation to the license holder's internal and external reporting procedures of alleged or suspected maltreatment of vulnerable adults.</p> <p>The orientation was provided within <b>24 hours of admission</b>, or for persons who would benefit more from a later orientation; the orientation took place within 72 hours.</p> <p>      ___orientation for person served; or if applicable       ___orientation for legal representative</p> <ul style="list-style-type: none"> <li>• If applicable" means that if the person has a legal representative then the legal representative must also be notified</li> </ul>				
9555.9700, subp. 1	<p align="center"><b><u>Individual Service Planning – Initial Screening</u></b></p> <p>The center conducted an intake screening to determine if they could serve the person.</p> <p>When possible, the screening included an interview with the person and the person's caregiver.</p> <p>The center notified the person of the outcome no more than <b>5 days after</b> the screening process began.</p>				
9555.9700, subp. 2	<p align="center"><b><u>Needs Assessment</u></b></p> <p><b>Immediately</b> after the person's admission to the center, the center completed a needs assessment.</p> <p>The needs assessment was based on observation of the person and information obtained from other sources.</p>				

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	<p>The needs assessment addressed:</p> <ul style="list-style-type: none"> <li>(1) the person's psychosocial status; <ul style="list-style-type: none"> <li>• for example; awareness level, personal care needs, need for privacy or socialization</li> </ul> </li> <li>(2) the person's functional status; and <ul style="list-style-type: none"> <li>• for example; endurance and capability for ambulation, transfer, and managing activities of daily living</li> </ul> </li> <li>(3) the person's physical status, determined by observation, from the intake screening interview, and from the medial report received from the person's physician.</li> </ul>				
<p><b>9555.9700, subp. 2</b></p>	<p align="center"><b><u>Preliminary Service Plan</u></b></p> <p>Within <b>30 days</b> of the person's admission to the center, the center completed a preliminary service plan.</p> <p>The preliminary service plan included the following information and specifications:</p> <ul style="list-style-type: none"> <li>(1) scheduled days of the person's attendance at the center;</li> <li>(2) transportation arrangements for getting the person to and from the center;</li> <li>(3) the person's nutritional needs and , where applicable, dietary restrictions;</li> <li>(4) the role of the person's caregiver or caregivers in carrying out the service plan; and</li> <li>(5) services and activities in which the person will take part immediately upon admission.</li> </ul>				

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LAW / RULE	LICENSING STANDARD	Record 1	Record 2	Record 3	NOTES
	<b><u>Abuse Prevention Plans</u></b>				
245A.65, Sub. 2, (b)	<p style="text-align: center;"><b><u>Individual Abuse Prevention Plan</u></b></p> <p>An individual abuse prevention plan (IAPP) was developed as part of the <b>initial individual program plan or service plan prior to or upon service initiation.</b></p> <p>The interdisciplinary team shall document the <b>review the individual abuse prevention plans quarterly</b>, using the individual assessment and any reports of abuse relating to the person. The plan shall be revised to reflect the results of this review.</p> <p>The person receiving services participated in the development of the IAPP to the full extent of the person's ability.</p> <p>If applicable, the person's legal representative was given the opportunity to participate with or for the person in the development of the plan.</p>				
626.557 Subd.14, (b)	<p><b><u>Section 626.557, subdivision 14, paragraph (b)</u></b></p> <ul style="list-style-type: none"> <li>• For the purposes of this paragraph, the term "abuse" includes self-abuse.</li> </ul> <p>The plan shall contain <b>an individualized assessment</b> of:</p> <ul style="list-style-type: none"> <li>(1) the person's susceptibility to abuse by other individuals, including other vulnerable adults;</li> <li>(2) the person's risk of abusing other vulnerable adults; and</li> <li>(3) statements of the specific measures to be taken to minimize the risk of abuse to that person and other vulnerable adults.</li> </ul>				
245A.65 Sub. 2, (b), (1)	<p>The IAPP included <b>a statement of measures that would be taken to minimize the risk of abuse</b> to the vulnerable adult <b>when</b> the individual assessment <b>required in section 626.557, subdivision 14, paragraph (b)</b>, [See box above ] indicated the need for measures in addition to the specific measures identified in the program abuse prevention plan.</p>				

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	<p>The IAPP included measures with specific actions the program would take to minimize the risk of abuse within the scope of the licensed services, and identified referrals made when the vulnerable adult was susceptible to abuse outside of the scope or control of the licensed services.</p> <p>If the assessment indicated that the vulnerable adult did not need specific risk reduction measures in addition to those identified in the program abuse prevention plan, the IAPP documented this determination.</p>				
<b>245A.65, Sub. 2, (a)</b>	<p align="center"><b><u>Program Abuse Prevention Plan</u></b></p> <p>The license holder provided an orientation to the program abuse prevention plan (PAPP) for persons receiving services.</p> <p>If applicable, the client's legal representative was notified of the orientation.</p> <p>The license holder provided PAPP orientation for each new person within <b>24 hours of admission</b>, or for persons who would benefit from a later orientation, the orientation took place within 72 hours.</p>				2 3
<b>9555.9700 , subp. 3</b>	<p align="center"><b><u>Individual Plan of Care</u></b></p> <p><b>Within 90 days of the person's admission</b> to the center, a written plan of care was developed.</p>				



LAW / RULE	LICENSING STANDARD	Record 1	Record 2	Record 3	NOTES
	<p>The individual plan of care included:</p> <ul style="list-style-type: none"> <li>A. an update of the preliminary service plan and additional services required by the person;</li> <li>B. short- and long-term objectives for the person stated in concrete, measurable, and time specific outcomes;</li> <li>C. the staff members responsible for implementing the individual plan of care;</li> <li>D. the anticipated duration of the individual plan of care as written; and</li> <li>E. provisions for quarterly review and quarterly revisions of the individual plan of care.</li> </ul> <p>The plan of care was developed by center staff together with the person, the person's caregiver, and other agencies and individual service providers.</p>				
245A.14 Sub. 14	<p style="text-align: center;"><b><u>Attendance Records</u></b></p> <p>The license holder must maintain documentation of actual attendance for each adult day service recipient for which the license holder is reimbursed by a governmental program. The records must be accessible to the commissioner during the program's hours of operation, <b>they must be completed on the actual day of attendance</b>, and they must include:</p> <ul style="list-style-type: none"> <li>A. the first, middle, and last name of the recipient;</li> <li>B. the time of day that the recipient was dropped off; and</li> <li>C. the time of day that the recipient was picked up.</li> </ul>				
9555.9710 Subp. 7	<p style="text-align: center;"><b><u>Social services</u></b></p> <p>The center offered the social services in items A to D.</p> <ul style="list-style-type: none"> <li>A. Interviewing the person and, when possible, the person's caregiver as part of the admission procedure specified in part 9555.9700;</li> </ul>				

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	<p>B. Maintaining a family and social history for the person's record that is <b>updated annually</b>;</p> <p>C. observing and recording psychological, emotional, social, financial, legal, employment, transportation, and other living situation factors related to the person achieving objectives specified in the person's plan of care; and</p> <p>D. Referring the person and caregivers to community services as required to meet the needs identified by the observation in item C.</p>				
<b>245A.04, Sub. 13,</b>	<b><u>Use and Availability of Funds and Property</u></b>				
245A.04, Sub. 13, (b)	<p align="center"><b><u>Separation of Funds</u></b></p> <p>The license holder ensured separation of the person's funds from funds of the license holder, the program, or program staff.</p>				
245A.04, Sub. 13, (a)	<p align="center"><b><u>Use and Availability of Funds and Property</u></b></p> <p>The license holder ensured that the person retained the use and availability of personal funds or property unless restrictions are justified in the person's individual plan.</p>				
245A.04, Sub. 13, (c)	<p align="center"><b><u>Documentation</u></b></p> <p>Whenever the license holder assisted a person with the safekeeping of funds or other property the license holder:</p> <p>immediately documented receipt and disbursement of the person's funds or the property at the time of receipt or disbursement,</p> <p>included the person's signature or the signature of the conservator or payee; and written authorization to assist a person with the safekeeping of funds, meets the requirement for obtaining the signature of the person, conservator, or payee.</p>				

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	returned to the person upon the person's request, funds and property in the license holder's possession subject to restrictions in the person's treatment plan, as soon as possible, but no later than three working days after the date of request.				
245A.04, Sub. 13, (d)	<p align="center"><b><u>Prohibitions</u></b></p> <p>License holders and program staff did not:</p> <ul style="list-style-type: none"> <li>(1) borrow money from a person served by the program;</li> <li>(2) purchase personal items from a person;</li> <li>(3) sell merchandise or personal services to a person;</li> <li>(4) require a person to purchase items for which the license holder was eligible for reimbursement; or</li> <li>(5) use the person's funds to purchase items for which the facility was already receiving public or private payments.</li> </ul>				

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LAW / RULE	STAFF QUALIFICATIONS, ORIENTATION & TRAINING	Staff 1	Staff 2	Staff 3	NOTES
	LICENSING STANDARD				
9555.9650 Subp. 1	<p align="center"><b><u>PERSONNEL RECORDS</u></b></p> <p>A center shall maintain the personnel files in items A and B.</p> <p>A. personnel file for each employee that includes:</p> <p>(1) the employee's job description;</p> <p>(2) <del>documentation that the employee has completed and signed the form required in part <a href="#">9555.9620</a>, subpart 3;</del> <b>REPEALED</b></p> <p>(3) an employment application or resume indicating that the employee meets the requirements in part <a href="#">9555.9680</a>, subpart 2;</p> <p>(4) documentation that the employee has completed the orientation to the center required in part <a href="#">9555.9690</a>, subpart 3;</p> <p>(5) documentation of an <b>annual</b> performance evaluation;</p> <p>(6) documentation of completion of the annual in service training required in part <a href="#">9555.9690</a>, subpart 4; and</p> <p>(7) documentation, when applicable, that the employee has completed the cardiopulmonary resuscitation and airway obstruction treatment training required in part <a href="#">9555.9690</a>, subpart 2, item C.</p>				
9555.9680 Subp. 2	<p align="center"><b><u>Personnel Standards</u></b></p> <p>The standards and requirements in items A to C apply to all employees.</p> <p>A. Persons who supervise employees were at least 18 years of age.</p> <p>B. Employees or consultants who perform services that require licensure, certification, or registration by the State of MN had current licensure, certification, or registration.</p> <p>C. An Employee who is responsible for med assistance provided a certificate verifying successful completion of a trained medication aid program for unlicensed personnel approved by MDH or trained by a RN</p>				

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LAW / RULE	STAFF QUALIFICATIONS, ORIENTATION & TRAINING  LICENSING STANDARD	Staff 1	Staff 2	Staff 3	NOTES
9555.9690 Subp. 3	<p align="center"><b><u>Staff Orientation to the Adult Day Center</u></b></p> <p>The center provided all center employees with <b>20 hours of orientation</b> to the center within the employees first <b>40 hours of employment at the center</b>.</p> <p>At least 4 hours of supervised orientation must be provided before employees worked directly with persons at the center.</p> <p>The orientation included</p> <ul style="list-style-type: none"> <li>• training related to the kinds of functional impairments of persons currently at the center; and</li> <li>• safety requirements and procedures in part 9555.9720.</li> </ul>				
9555.9690 Subp. 3	Orientation training to <b>VA Maltreatment Reporting</b> was received within <b>72 hours of first providing direct contact</b> .				
	Orientation to the license holder's <b>Program Abuse Prevention Plan</b> was received within <b>72 hours of first providing direct contact</b> .				
	<p align="center"><b><u>In-service/annual training</u></b></p> <p>The center provided a minimum of <b>8 hours of in-service training annually</b>.</p> <p>In-service training was in areas related to care of persons, including provision of medication assistance, Rule 223, and section 626.557.</p> <p><b>Annual review</b> to VA Maltreatment Reporting and Program Abuse Prevention Plan was received.</p>				

LAW / RULE	STAFF TRAINING & BACKGROUND STUDIES	Staff 1	Staff 2	Staff 3	NOTES
	LICENSING STANDARD				
<p>245A.04, subd. 12 subpart 1</p>	<p style="text-align: center;"><b><u>Alzheimer's Disease or Related Disorders</u></b></p> <p><b>Additional notice is required for centers that specialize in services to persons with Alzheimer's disease or related disorders.</b></p> <p>The facility's direct care staff and their supervisors must be trained in dementia care. Areas of required training include:</p> <ul style="list-style-type: none"> <li>○ an explanation of Alzheimer's disease and related disorders;</li> <li>○ assistance with activities of daily living;</li> <li>○ problem solving with challenging behaviors; and</li> <li>○ communication skills.</li> </ul> <p>The license holder provided to persons in written or electronic form a description of the training program, the categories of employees trained, the frequency of training; and, the basic topics covered.</p>				
<p><a href="#">245C.03</a> <a href="#">Subd 1</a></p>	<p style="text-align: center;"><b><u>Background Study; Individuals to be studied</u></b></p> <p>(a) The commissioner shall conduct a background study on:</p> <ul style="list-style-type: none"> <li>(1) the person or persons applying for a license;</li> <li>(3) current or prospective employees or contractors of the applicant who will have direct contact with persons served by the facility, agency, or program;</li> <li>(4) volunteers or student volunteers who will have direct contact with persons served by the program to provide program services if the contact is not under the continuous, direct supervision by an individual listed in clause (1) or (3);</li> </ul>				

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LAW / RULE	<p align="center"><b>BACKGROUND STUDIES</b></p> <p><b>LICENSING STANDARD</b></p>	Staff 1	Staff 2	Staff 3	NOTES
	<p>(6) an individual who, without providing direct contact services at a licensed program, may have unsupervised access to children or vulnerable adults receiving services from a program, when the commissioner has reasonable cause as defined in section <a href="#">245C.02</a>, subdivision 15;</p> <p>(7) all controlling individuals as defined in section <a href="#">245A.02, subdivision 5a.</a></p>				
<p><a href="#">245C.20</a></p> <p>245C.20, Sub. 1</p>	<p align="center"><b><u>Background Study Records</u></b></p> <p>The license holder ensured that background study records were maintained as required.</p> <p>245C.20, Sub. 3. The requirements in subd. 1 are met for programs when the LH had an active roster and all individuals affiliated with the LH were recorded on the active roster.</p> <p>The license holder documented the date the program initiated a background study in the program's personnel files.</p> <p>The license holder maintained a notice that the background study was undertaken and completed in the program's personnel files.</p> <p>Except when the background study was initiated through NETStudy, if the license holder did not receive a response from DHS within 45 days of initiation of the background study request, the license holder contacted DHS to inquire about the status of the study.</p> <p>If a license holder initiated a background study under NETStudy, but the background study subject's name did not appear in the list of active or recent studies initiated by that license holder, the license holder either contacted DHS or resubmitted the study information online for that individual.</p>				

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<p><a href="#">245C.04, Sub. 1</a></p> <p>245C.04, Sub. 1, (h)</p>	<p align="center"><b><u>When to Submit a Background Study</u></b></p> <p>The license holder submitted a completed background study request to DHS using the electronic system known as NETStudy before an individual specified in section <a href="#">245C.03</a>, subdivision 1, began a position allowing direct contact in the licensed program</p> <p>The license holder initiated a new background study through NETStudy when:</p> <ul style="list-style-type: none"> <li>(1) an individual returned to a position requiring a background study following an absence of 120 or more consecutive days; or</li> <li>(2) a program that discontinued providing licensed direct contact services for 120 or more consecutive days began to provide direct contact licensed services again</li> </ul>				
<p><a href="#">245C.30</a></p>	<p align="center"><b><u>Background Study Variances</u></b></p> <p>The license holder complied with the conditions of a variance to permit a disqualified individual to provide services.</p> <p>The license holder complied with the conditions of a variance that permitted a disqualified individual to provide services for which the subject was disqualified.</p> <p>the individual designated to receive the sensitive background study information was capable of determining, upon request of the department, whether a background study subject was providing direct contact services in one or more of the license holder's programs or services and, if so, at which location or locations.</p>				



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LAW / RULE  CITE #	PREV CITE COMPLAINT	Personnel Records  LICENSING STANDARD	Registered Nurse	Physical therapist	Registered dietitian	NOTES
<u>9555.9650</u>		<u>Personal Records - Consultants</u>				
		B. A personnel file for each consultant whose services the center purchases either by contracting directly with the individual or by contracting for the person's services with another organization. The file shall include:				
		(1) a copy of a signed contract or letter of appointment specifying conditions and terms of employment; and				
		(2) documentation that the person under contract meets any licensure, registration, or certification requirements required to perform the services specified in the contract.				
<u>9555.9680 Subp. 1</u>		<u>Personnel Requirements – Center Director</u>	<b>Licensing Standard</b>			
		The center director met both the requirements in items A and B or only the requirement in item C.	<b>Met (+) Not Met (-)</b>			
		A. Licensure by the State of MN as a LPN or completion of at least 2 years of post-secondary education from and accredited college, university, technical college, or correspondence school; and				
		B. Completion of 2 years of paid or volunteer experience in planning or delivering health or social services including experience in supervision and administration; or				
		C. Completion of 4 years of paid or volunteer experience in planning or delivering health or social services, including 2 years of experience in supervision and administration.				

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LAW / RULE	SERVICE AND PROGRAM REQUIREMENTS  LICENSING STANDARD	Licensing Standard  Met (+) Not Met (-)	NOTES
<u>9555.9710</u> <u>Subp. 1</u>	<p align="center"><b><u>Food Service and Nutrition</u></b></p> <p>The center met the requirements in items A to H.</p> <p>A. Procedures for preparing, handling and service food, and washing food, utensils, and equipment complied with chapter 4626, Requirements for Food and Beverage Establishments, and with applicable local ordinances.</p> <p>If the food was prepared off-site by another facility or if food was provided to according to the center's contract with a food service provider, the facility or provider complied with chapter 4626 and applicable local ordinances.</p> <p>B. The center provided refrigeration for dairy products and other perishable foods, whether supplied by the center or supplied by the person.</p> <p>The refrigeration had a temperature of 40 degrees or less.</p> <p>C. When persons were at the center for more than 4 ½ hours, they were served a meal which met one-third of the recommended daily allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences, specified in Recommended Dietary Allowances.</p> <p>D. The center offered a midmorning and a midafternoon snack.</p> <p>E. The menus for all meals and snacks were approved by a registered dietitian and met all applicable state rules and laws and US DOA regulations.</p> <p>F. The center whose written records specified dietary restrictions provided modified diets for persons</p> <p>G. Drinking water was available to persons throughout the hours of operation.</p> <p>H. The center maintained a record indicating the menu for all meals served for at least six months.</p>		

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9555.9710 Subp. 2	<p align="center"><b><u>Transportation</u></b></p> <p>If the center provided transportation the maximum transportation time for any person being transported by a center vehicle between the person's home and the center was 90 minutes, one way.</p>		
9555.9710 Subp. 3	<p align="center"><b><u>Health Services</u></b></p> <p>The center offered health serviced developed in consultation with a registered nurse.</p> <p>The registered nurse provided consultation and review of the health services at <b>least monthly</b>. Heath services included:</p> <p>A. Monitoring persons' health status and reporting changes to the person's caregiver, physician, and center director;</p> <p>B. Educating and counseling persons on good health practices;</p> <p>C. Maintaining a listing of professional health resources available for referrals as needed by people;</p> <p>D. Developing policies and monitoring procedures for participant self-administration of medications for training unlicensed personnel who provide medication assistance; and</p> <p>E. Supervising staff distribution of medication and assistance with a person's self-administration of medication and ensuring compliance with 9555.9680, subp. 2, item C.</p>		
9555.9710 Subp. 4	<p align="center"><b><u>Structured exercise program</u></b></p> <p>The center offered a daily structured exercise program for persons whose physicians have authorized their participation.</p> <p>The program was developed in consultation with a registered physical therapist.</p>		

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	The registered physical therapist provided consultation and review of the exercise program, at <b>least quarterly</b> .		
9555.9710 Subp. 5	<p align="center"><b><u>Activities of daily living</u></b></p> <p>The center provided persons assistance, when needed, in managing activities of daily living such as dressing, grooming, and eating, and in developing or maintaining the skills necessary to manage these activities on their own.</p>		
9555.9710 Subp. 6	<p align="center"><b><u>Daily program activities</u></b></p> <p>The center had a monthly plan for diversified daily program activities. Program activities were designed to meet the needs and interests of the persons and included:</p> <p>A. Socialization activities, such as group projects and recreational activities</p> <p>B. Cultivation of persona interests, such as arts, crafts, and music; and</p> <p>C. Activities designed to increase the person’s knowledge and awareness of the environment and to enhance language and conceptual skills.</p>		

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<a href="#">245A.65</a> , Sub. 1	<p align="center"><b><u>Reporting Vulnerable Adult Maltreatment Policy</u></b></p> <p>The license holder who served vulnerable adults established written policies and procedures related to suspected or alleged maltreatment.</p>		
<a href="#">626.557</a> , Sub. 4a	<p align="center"><b><u>Internal Reporting</u></b></p> <p>The license holder established a procedure for the internal reporting of maltreatment that included the requirements of this section.</p> <p>The license holder established an ongoing written procedure in compliance with applicable licensing rules [chapters 245A and 245D] and internal reporting policies and procedures in section 626.557, subdivision 4a to ensure that all cases of suspected maltreatment are reported.</p> <p>The internal reporting procedure allowed a mandated reporter to meet the reporting requirements of this section by reporting internally. However, the facility remained responsible for complying with the immediate reporting requirements of section <a href="#">626.557</a>.</p> <ul style="list-style-type: none"> <li>• Minnesota Adult Abuse Reporting Center (MAARC) # 1-884-880-1574</li> </ul>		
626.557, Sub. 4a, (b)	<p>The internal reporting procedure required the license holder to give a mandated reporter making an internal report a written notice stating whether the facility had reported the incident to the common entry point.</p> <p>The internal reporting procedure required that a written notice must be provided within two working days and in a manner that protects the confidentiality of the reporter.</p>		
626.557, subd. 4a, (c)	<p>The internal reporting procedure required that the written response to the mandated reporter must note that if the mandated reporter is not satisfied with the action taken by the facility on whether to report the incident to the common entry point, then the mandated reporter may report externally.</p>		

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626.557, subd. 4a, (d)	The internal reporting procedure stated that the license holder may not prohibit a mandated reporter from reporting externally, and a facility [license holder] is prohibited from retaliating against a mandated reporter who reports an incident to the common entry point in good faith.		
	The internal reporting procedure required that the written notice by the facility [license holder] must inform the mandated reporter of this protection from retaliatory measures by the facility against the mandated reporter for reporting externally.		
245A.65, Sub. 1, (a), (2)	<p>The internal reporting procedure identified the primary and secondary person or position to whom internal reports may be made and the primary and secondary person or position responsible for forwarding internal reports to the common entry point as defined in section <a href="#">626.5572</a>, subdivision 5.</p> <p>The internal reporting procedure required that the secondary person be involved when there is reason to believe that the primary person was involved in the alleged or suspected maltreatment.</p>		
245A.65, Sub. 1, (b)	(1) The license holder established and maintained policies and procedures to ensure that an internal review is completed within 30 calendar days and that corrective action is taken as necessary to protect the health and safety of vulnerable adults when the facility has reason to know that an internal or external report of alleged or suspected maltreatment has been made.		
	<p>The internal review policy and procedures required a review that includes an evaluation of:</p> <ul style="list-style-type: none"> <li>_____ whether related policies and procedures were followed,</li> <li>_____ whether the policies and procedures were adequate,</li> <li>_____ whether there is a need for additional staff training,</li> <li>_____ whether the reported event is similar to past events with the vulnerable adults or the services involved, and</li> <li>_____ whether there is a need for corrective action by the license holder to protect the health and safety of vulnerable adults.</li> </ul>		

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	<p>Based on the results of this review, the license holder must</p> <p>____ develop, ____ document, and ____ implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by individuals or the license holder, if any.</p>		
	<p>(2) The internal review policy and procedures identifies the primary and secondary person or position who will ensure that, when required, internal reviews are completed.</p> <p>The internal review policy and procedures requires that the secondary person shall be involved when there is reason to believe that the primary person was involved in the alleged or suspected maltreatment; and</p>		
	<p>(3) The internal review policy and procedures requires the license holder to document and make internal reviews accessible to the commissioner immediately upon the commissioner's request.</p> <p>For purposes of this section, the documentation provided to the commissioner by the license holder may consist of a completed checklist that verifies completion of each of the requirements of the review.</p>		
<p><b><u>245A.04,</u></b> <b>Sub. 14</b></p>	<p align="center"><b><u>Monitoring Implementation &amp; Staff Access</u></b></p> <p><b>The license holder developed program policies and procedures necessary to maintain compliance with licensing requirements under Minnesota Statutes and Minnesota Rules.</b></p>		
<p>245A.04, Sub. 14, (b), (3)</p>	<p>The license holder monitored implementation by program staff of the policies and procedures necessary to maintain compliance with licensing requirements under Minnesota Statutes and Minnesota Rules.</p>		
<p>245A.04, Sub. 14, (c)</p>	<p>The license holder kept program policies and procedures readily accessible to staff and indexed the policies and procedures with a table of contents or another method approved by the commissioner.</p>		

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LAW / RULE	LICENSING STANDARD	Licensing Standard  Met (+) Not met (-)	NOTES
9555.9720 Subp. 1	<b><u>Safety Requirements – First Aid Kits</u></b>		
	The center had a first aid kit. The kit contained:		
	First aid manual		
	Sterile bandages and Band-Aids		
	Sterile compresses		
	Scissors		
	Ice bag or cold pack		
	Thermometer, oral or topical		
	Liquid soap		
	Adhesive tape		
	Money for phone calls		
	The first aid kit and manual was accessible to the staff.		
The first aid kit and manual was taken on field trips.			
9555.9720 Subp. 2	<b><u>Safety Requirements -Telephone and posted numbers</u></b>		
The center had a non-coin operated telephone.			



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	<p>The telephone was readily accessible.</p> <p>A list of emergency phone numbers was posted next to the telephone, including 911. If 911 was not available in the area of the state, the numbers included local fire, police, emergency transportation, and poison control.</p> <p>If the center was located in a hospital or nursing home, the posted numbers included the emergency care team.</p>		
9555.9720 Subp. 3	<p align="center"><b><u>Emergency phone numbers for persons receiving services</u></b></p> <p>For each person, the emergency phone numbers of their caregiver, the person to be called if the caregiver cannot be reached, and the person's physician was readily available.</p> <p>These numbers were also available in vehicles provided by the center to transport persons.</p>		
9555.9720 Subp. 4	<p align="center"><b><u>Safety Requirements – Records of Incidents</u></b></p> <p>The center maintained records of all incidents involving persons, including illnesses; accidents requiring first aid; emergency medical or psychiatric care; police reports; and VA reports.</p> <p>The record included the person's name, the date and time of the incident, a description of the incident, the center's action in response to the incident, and indication that the incident was reported to the person's caregiver.</p>		
9555.9720 Subp. 5	<p align="center"><b><u>Hazardous Objects, Materials, or Equipment</u></b></p> <p>Chemicals that are poisonous when swallowed or inhaled or that are damaging to eyes or skin were stored in an area not accessible to the persons receiving services.</p> <p>Use of scissors, knives, matches, razor blades, and other potentially hazardous materials by persons was allowed only under supervision.</p>		

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9555.9720 Subp. 6	<p align="center"><b><u>Emergency Equipment</u></b></p> <p>The center had a flashlight and a portable radio or television set that did not require electricity and could be used if a power failure occurred.</p>		
9555.9720 Subp. 7	<p align="center"><b><u>Equipment and Furniture</u></b></p> <p>Equipment and furniture was in good repair and without sharp points, splinters, and paint that contains lead.</p>		
9555.9720 Subp. 8	<p align="center"><b><u>Areas Used by Persons Receiving Services</u></b></p> <p>The areas used by persons receiving services were free from debris, loose plaster, peeling paint, and litter.</p> <p align="center">Rugs had nonskid backing.</p>		
9555.9720 Subp. 8	<p align="center"><b><u>Emergencies Caused by Fire and Weather</u></b></p> <p>The center had written plans for emergencies caused by fire, blizzards, and tornados.</p> <p>The emergency plans were posted in a visible place and on file in the center.</p> <p>The plans included items A to I:</p> <p>A. The responsibilities each staff person will assume in case of emergency;</p> <p>B. Identification of primary and secondary exits;</p> <p>C. Identification of building evacuation routes;</p> <p>D. Identification of an emergency shelter area within the center;</p>		

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	E. Instructions for evacuating or rescuing persons;		
	F. Instructions for calling the fire department and emergency phone numbers;		
	G. Procedures for the quarterly fire drill		
	H. Instructions on location and use of fire extinguishers; and		
	I. Instructions on closing off the fire area.		
	The fire escape plan (fire drill) was rehearsed at least four times each year.  The dates of the fire drill rehearsals were recorded in the file of emergency plans.		
9555.972 0 Subp. 10	<p align="center"><b><u>Medical Emergencies</u></b></p> <p>The center had written procedures governing medical emergencies.</p> <p>The center had an identified source of emergency medical care and transportation that was made known to all staff members and volunteers.</p>		
9555.972 0 Subp. 11	<p align="center"><b><u>Safety Requirements – Pets</u></b></p> <p>If the center allows pets, the center ensured that:</p> <p><b>A.</b> Prospective persons were notified that pets may be present in the center</p> <p><b>B.</b> All dogs and cats brought into the center have current rabies shots and tags;</p> <p><b>C.</b> Pets and pet cages are excluded from food storage, preparation, and serving areas; and</p>		

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	D. A record of annual examinations for communicable disease and parasites by a licensed veterinarian is maintained for all pets that reside in or regularly visit the center.		
9555.973 0 Subp. 2	<p align="center"><b><u>Physical Plant and Space Requirements – Determination of Occupancy Code</u></b></p> <p>The occupancy code requirements for a center were determined according to the MN State Fire Code adopted under chapter 7511.</p>		
245A.04 Sub. 2a	<p align="center"><b><u>State and Local Codes</u></b></p> <p>The center documented compliance with applicable building codes, fire and safety codes, health rules, and zoning ordinances, or documented that an appropriate waiver has been granted.</p>		
9555.973 0 Subp. 3	<p align="center"><b><u>Signal System in restrooms</u></b></p> <p>Restrooms used by participants must be equipped with a mechanism that participants can use to signal staff members by light or by sound if participants need assistance.</p>		
9555.973 0 Subp. 4	<p align="center"><b><u>Usable Space Requirements</u></b></p> <p>The licensed capacity of the center was limited by the amount of indoor space available for use by the people receiving services.</p> <p>The total indoor space available for use by persons receiving services equaled at least 40 sq. ft. for each person and each staff member present at the center.</p> <p>If the center was located in a multifunctional organization, and the center shared space with the multifunctional organization, the required space available to each person was maintained when the center was operating.</p>		

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	<p>In determining, the square footage of usable indoor space available, a center did not count:</p> <ul style="list-style-type: none"> <li>A. Hallways, stairways, closets, offices, restrooms, and utility and storage areas;</li> <li>B. More than 25% of the space occupied by furniture or equipment used by persons or staff; or</li> <li>C. In a multifunctional organization, any space occupied by persons associated with the multifunctional organization while people used common space.</li> </ul>		
<p><b>9555.9730 Subp. 5</b></p>	<p align="center"><b><u>Private Space</u></b></p> <p>The usable indoor space available to a center must include a room or an area that can be used as private space for providing personal hygiene services or social services to persons.</p>		
<p><b>9555.9730 Subp. 6</b></p>	<p align="center"><b><u>Equipment and Furnishings</u></b></p> <p>The center provided equipment and furnishings in items A to E:</p>		
	<p>A. A sturdy, non-folding chair for each person who does not require or prefer a wheelchair;</p>		
	<p>B. Stable tables that are accessible to all persons and staff and accommodate dining and program activity needs;</p>		
	<p>C. Age appropriate games, books, crafts, and other materials to implement daily program activities;</p>		
	<p>D. One cot, couch , or recliner per 8 persons; and</p> <p align="center">Number of persons _____</p> <p align="center">Number of required furnishings _____</p>		

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	E. One television set, AM/FM radio, phonograph, or tape player.		
9555.9730 Subp. 6	<p align="center"><b><u>Temperature</u></b></p> <p>A minimum temperature of 70 degrees Fahrenheit must be maintained in indoor areas used by people receiving services.</p>		
9555.9730 0 Subp. 6	<p align="center"><b><u>Ventilation</u></b></p> <p>Outside doors and windows used for ventilation were screened in summer months.</p>		
9555.9690 Subp. 1	<p align="center"><b><u>Staff Ratio and Center Coverage – Staff Ratio</u></b></p> <p>Centers must meet the standards specified in items A to G.</p> <p>A. When a center serves only participants who are capable of taking appropriate action for self-preservation under emergency conditions, the center shall maintain a minimum staff to participant ratio of one staff member present for every eight participants present.</p> <p>B. When a center serves only participants who are not capable of taking appropriate action for self-preservation under emergency conditions, the center shall maintain a minimum staff to participant ratio of one staff member present for every five participants present.</p> <p>C. When a center serves both participants who are capable of taking appropriate action for self-preservation under emergency conditions and participants who are not, the center shall maintain a staff to participant ratio of one staff member present for every five participants present who are not capable of self-preservation and one staff member present for every eight participants present who are capable of self-preservation. When a center has participants to whom the one to eight ratio applies, as well as participants to whom the one to five ratio applies, the number of staff persons necessary to meet the ratio requirements can be determined by making the following computations:</p>		

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	D. Only those employees whose primary center duties, as defined in their job descriptions, are to work directly with participants by providing care, supervision, and assistance in achieving plan of care objectives shall be counted as staff members in calculating the staff to participant ratio.		
	E. A multifunctional organization may count other employees of the organization besides center employees in calculating the staff to participant ratio if:		
	(1) the employee's responsibilities in the organization other than the center meet the requirement in item D; and		
	(2) the employee is assigned to the center for a specified amount of time during which the employee is not assigned to another organization.		
	F. No participant shall be counted as or be substituted for a staff member in calculating the staff to participant ratio.		
	G. A volunteer may be counted as a staff member in calculating the staff to participant ratio if the volunteer meets the same standards and requirements as paid staff.		
<b>9555.9690 Subp. 2</b>	<p align="center"><b><u>Staff coverage of center</u></b></p> <p>Centers must meet the standards specified in items A to C.</p> <p>A. In the temporary absence of the director, a staff member shall be designated to supervise the center.</p> <p>B. When only one staff member is needed to meet the staff ratio requirement in subpart 1, item A, a volunteer or other adult who is not a participant shall be present when six or more participants are in attendance.</p> <p>C. A person trained in basic first aid and certified in cardiopulmonary resuscitation, and the treatment of obstructed airways must be present at all times:</p> <p>(1) in the center when participants are present;  (2) in a vehicle being used by the center to transport participants; and  (3) with participants on field trips or other activities conducted by the center away from the center site.</p>		

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<a href="#">245A.65</a> , Sub. 2, (a)	<p align="center"><b><u>Program Abuse Prevention Plan (PAPP)</u></b></p> <p>The license holder established and enforced ongoing written program abuse prevention plans as required under section 626.557, subdivision 14.</p>		
<a href="#">626.557</a> , Sub. 14	<p>The plan contained an assessment of:</p> <ul style="list-style-type: none"> <li>— the physical plant,</li> <li>— its environment, and</li> <li>— its population identifying factors which may have encouraged or permitted abuse, and</li> <li>— a statement of specific measures that would be taken to minimize the risk of abuse.</li> </ul>		
245A.65, Sub. 2, (a)	<p>The scope of the program abuse prevention plan was limited to</p> <ul style="list-style-type: none"> <li>• the population,</li> <li>• physical plant, and</li> <li>• environment within the control of the license holder and the location where licensed services were provided.</li> </ul> <p>In addition to the requirements in section 626.557, subdivision 14, [see above] the PAPP met the requirements in clauses (1) to (5).</p> <p>(1) the assessment of the population included an evaluation of the following factors:</p> <ul style="list-style-type: none"> <li>• age,</li> <li>• gender,</li> <li>• mental functioning,</li> <li>• physical and emotional health or behavior of the person;</li> <li>• the need for specialized programs of care for persons;</li> </ul>		



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	<ul style="list-style-type: none"> <li>• the need for training of staff to meet identified individual needs; and</li> <li>• the knowledge the license holder may have regarding previous abuse that is relevant to minimizing risk of abuse for persons.</li> </ul>		
	<p>(2) The assessment of the physical plant where the licensed services were provided included an evaluation of the following factors:</p> <ul style="list-style-type: none"> <li>— the condition and design of the building as it related to the safety of the persons; and</li> <li>— the existence of areas in the building that were difficult to supervise.</li> </ul>		
	<p>(3) The assessment of the environment for each facility included an evaluation of the following factors:</p> <ul style="list-style-type: none"> <li>— the location of the program in a particular neighborhood or community;</li> <li>— the type of grounds and terrain surrounding the building;</li> <li>— the type of internal programming; and</li> <li>— the program's staffing patterns.</li> </ul>		
	<p>(4) The license holder shall provide an orientation to the PAPP for persons receiving services.</p> <p>If applicable, the person's legal representative must be notified of the orientation.</p> <p>The license holder shall provide this orientation for each new person within 24 hours of admission, or for persons who would benefit more from a later orientation, the orientation may take place within 72 hours</p>		

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	<p>(5) The license holder's governing body or the governing body's delegated representative reviewed the plan</p> <ul style="list-style-type: none"> <li>— at least annually</li> <li>— using the assessment factors in the plan; and</li> <li>— any substantiated maltreatment findings that occurred since the last review.</li> </ul> <p>The governing body or the governing body's delegated representative revised the plan, if necessary to reflect the review results.</p>		
<a href="#">245A.65, Sub. 1 and 2</a>	<b><u>Posting VA Maltreatment Policy and PAPP</u></b>		
245A.65, Sub. 1, (d)	<p>The license holder posted <b><i>a copy of the internal and external reporting policies and procedures,</i></b></p> <p>including the telephone number of the common entry point as defined in section <a href="#">626.5572</a>, subdivision 5, in a prominent location in the program and had it available upon request to mandated reporters, persons receiving services, and the person's legal representatives.</p>		
245A.65, Sub. 2, (a)	<p><b><i>A copy of the program abuse prevention plan</i></b> was posted in a prominent location in the program and was available upon request to mandated reporters, persons receiving services, and legal representatives.</p>		