DATE: November 10, 2016

TO: MENTAL HEALTH CENTERS AND CLINICS (DHS Rule 29)

RE: Licensing Updates and Renewal Information for Licenses Effective January 1, 2017

A. NEW AND UPDATED INFORMATION

1. 2016 Legislation changes. The 2016 Minnesota Legislature passed amendments affecting Department of Human Services (DHS) license holders. As a license holder, it is your responsibility to be aware of any legislative changes that effect your licensed service and take the action necessary to comply with any new requirements.

The updated 2016 statutes are now available online through the Office of the Revisor of Statutes website.

As a reminder, in 2015, the Minnesota Legislature passed the following amendments that affected your license.

A. Plan for transfer of clients and records upon closure. Minnesota Statutes, section 245A.04, subdivision 15a required that a provider have a plan for transfer of clients and records upon closure. An applicant for initial or continuing licensure or certification is required to have a written plan indicating how the program will ensure the transfer of clients and records for both open and closed cases if the program closes.

(i) The plan must provide for managing private and confidential information concerning program clients. The plan must also provide for notifying affected clients of the closure at least 25 days prior to closure, including information on how to access their records. A controlling individual of the program must annually review and sign the plan.

(ii) Plans for the transfer of open cases and case records must specify arrangements the program will make to transfer clients to another provider or county agency for continuation of services and to transfer the case record with the client.

(iii) Plans for the transfer of closed case records must be accompanied by a signed agreement or other documentation indicating that a county or a similarly licensed provider has agreed to accept and maintain the program's closed case records and to provide follow-up services as necessary to affected clients.

If you have questions about this requirement, please contact your licensor.

B. Reporting a death in the program. Minnesota Statutes, section 245A.04, subdivision 16. Unless such reporting is otherwise already required under statute or rule, programs licensed under Minnesota Statutes, chapter 245A must have a written policy for reporting the death of an individual served by the program to the commissioner of human services. Within 24 hours of receiving knowledge of the death of an individual served by the program, the license holder shall notify the commissioner of the death. If the license
holder has reason to know that the death has been reported to the commissioner, a subsequent report is not required.

For clarification purposes, for a client who may be on pass or not actually at the licensed facility at the time of the death, but considered an active client, a report is required to be made within 24 hours to the Commissioner of Human Services. The report can be made in the following manner:
By phone: 651-431-6600 to the central intake unit
By fax: 651-431-7601

Please note that a death report made to the Ombudsman of Mental Health and Developmental Disabilities does not meet the above statute requirements and does not exclude your responsibility from reporting to the commissioner of DHS. However, DHS Licensing will allow the use of the ombudsman’s office death reporting form to be utilized to avoid the license holder having to complete multiple forms. Death Report Form

2. **NETStudy 2.0, the new background study system.** The Background Studies Division continues to move forward with development and implementation of NETStudy 2.0. This is the new portal to submit background study requests to DHS that includes use of the background study subject’s fingerprints for the criminal record search and use a photograph for identity verification. Currently, there are over 50 DHS authorized fingerprint and photo service locations operating across the state. After the background study subject is fingerprinted and photographed, background study determinations in NETStudy 2.0 are expected to be completed within a few hours for over 90% of requests, some determinations will be provided within an hour or two. When the law requires additional information or review, the background study may take more time. In these cases, the program is informed of the subject’s background study status and whether the person must be supervised. In the new system, providers receive status updates and background study determinations electronically, eliminating the need to maintain paper files for licensing reviews.

The Background Studies Division is continuing to work on transitioning all providers to ensure they are “on boarded” and trained by December 31, 2016. More information is available on the Background Study web page under the NETStudy 2.0 / Background Study Changes feature. FAQs are also posted as is a link to subscribe to an email list for updates about NETStudy 2.0.

3. **Minnesota Adult Abuse Reporting Center.** Minnesota has a new centralized system for reporting suspected maltreatment of vulnerable adults. On July 1, 2015, the Minnesota Adult Abuse Reporting Center (MAARC) was established. MAARC provides a web-based reporting system and a call center available 24 hours a day, seven days a week for mandated reporters. Mandated reporters are professionals or professional’s delegate identified by law (Minnesota Statutes, section 626.5572, subdivision 16) who MUST make a report if they have reason to believe that the abuse, neglect of financial exploitation of a vulnerable adult has occurred. Mandated reporters can use the Minnesota Adult Abuse Reporting Center’s web based report at mn.gov/dhs/reportadultabuse, or make a phone report by calling the statewide toll-free number at 844-880-1574.
B. GENERAL INFORMATION, UPDATES, AND RESOURCES

1. The Licensing Division’s telephone numbers. Please ensure that your program’s phone list and any applicable policies and procedures include current DHS telephone numbers:

   - Licensing Division – (651) 431-6500
   - Licensing Division’s Main Fax – (651) 431-7673
   - MH/CD Licensing Unit Email- dhs.mhcdlicensing@state.mn.us
   - Maltreatment Intake – (651) 431-6600
   - Maltreatment Fax – (651) 431-7601

2. Online information. The Licensing Division public website is your primary source of information on licensing standards and requirements. As a Rule 29 certification holder, it is your responsibility to frequently check for updates, changes, and additions to this information. Below are highlights of the available online information.

3. Licensing Lookup: Public searches for DHS licensed and certified programs can be done using the DHS Licensing Information Lookup online search tool or by reviewing the online DHS Licensed program list.

   Licensing actions and decisions issued since July 1, 2010 by the Division of Licensing to DHS licensed and certified programs are posted online through DHS Licensing Information Lookup. The licensing actions and decisions that are available include:
   - Correction orders;
   - Orders for conditional license;
   - Sanctions which include fines, suspensions, and revocations;
   - Commissioner’s response to license holders’ requests for reconsideration of correction orders and orders of conditional licenses;
   - Commissioner’s final orders resulting from contested case hearings; and
   - Statement of final agency decision.

   Documents are posted in accordance with the requirements of the Minnesota Government Data Practices Act, Minnesota Statutes, section 13.46.

   New licensing documents are posted daily on DHS Licensing Information Lookup. You may sign up to receive daily emails with links to newly published documents.

4. Mental health center and clinic certification (Rule 29) laws and rules. Mental health center and clinic certification laws and rules are available to you online through the Minnesota Office of the Revisor of Statutes, and include the following:

   - Minnesota Rules, parts 9520.0750 to 9520.0870 (DHS Rule 29)
   - Minnesota Statutes, Chapter 626.557 (Reporting of Maltreatment of Vulnerable Adults)
   - Minnesota Statutes, Chapter 626.556 (Reporting of Maltreatment of Minors Act)
5. **Licensing forms.** License and certification holders have access to various licensing forms developed by DHS, and intended for use by programs, including variance request forms. All forms have been updated to meet current requirements. Many forms are designed for general use by all licensed or certified programs.

C. **MALTREATMENT, AND HEALTH AND SAFETY INFORMATION**

Information is available online to help licensed programs meet licensing requirements for ensuring the health and safety of persons served by the program and for reporting incidents and maltreatment.

1. **Maltreatment information.** Sample maltreatment reporting policies and procedures and general information on maltreatment investigations are available online from the DHS Licensing web site.

2. **Online mandated reporter training.** DHS Licensing offers online training courses for both Vulnerable Adults Mandated Reporting and Maltreatment of Minors Mandated Reporting.

   - **The Vulnerable Adults Mandated Reporting course** introduces mandated reporters to:
     - The Vulnerable Adults Act
     - Definition of maltreatment
     - Who are the mandated reporters
     - The Common Entry Point (CEP)

   - **The Maltreatment of Minors Mandated Reporter training** includes:
     - The Reporting of Maltreatment of Minors Act
     - An overview of the Minnesota Child Protection System
     - Definition of maltreatment
     - Who are mandated reporters

D. **REMINDERS SPECIFIC TO RULE 29 CERTIFICATION HOLDERS**

1. **Case review and consultation.** Multidisciplinary staff must attend staff meetings whose purpose is case review and consultation, at least twice monthly, for a minimum of four hours per month, or a minimum of two hours per month if the staff person provides clinical services in the treatment of mental illness less than 15 hours per month.

   The psychiatrist is not exempt from this requirement, but it is not required by the rule that a psychiatrist be in attendance at all case review and consultation meetings.
Absences, such as vacation and sick leave, will not count against the number of required hours for case consultation if documented.

2. Peer review. Peer reviews must be conducted annually, ensuring a review of randomly selected samples of five percent or six cases, whichever is less, of the annual case load of each mental health professional by other mental health professional staff.

Peer review findings shall be discussed with staff involved in the case and followed up by any necessary corrective action. Peer review records shall be maintained at the center.

3. Staff supervision. There are two areas of supervision that must be addressed.
   a. The center must have a clinical evaluation and supervision procedure that:
      1) Identifies each multidisciplinary staff person’s area of competence (including mental health professionals); and
      2) Documents that each multidisciplinary staff person (including mental health professionals) receives the guidance and support needed to provide clinical services for the treatment of mental illness in the areas they are permitted to practice.
   b. A mental health professional shall be responsible for the supervision of the mental health practitioner, including:
      1) Approval of the individual treatment plan and bi-monthly (every 2 months) case review of every client receiving clinical services from the practitioner, and
      2) A minimum of one hour of face-to-face, client-specific supervisory contact for each 40 hours of clinical services in the treatment of mental illness provided by the practitioner.

4. Satellites. A “center” is a facility that provides clinical services in the treatment of mental illness. If there is more than one center location, the center shall designate one as the main office and all secondary locations as satellites offices. Unless varied, each satellite office must meet the requirements in Minnesota Rules, part 9520.0780, subpart 1, items A through G.

5. Noncompliance. Changes in center organization, staffing, treatment, or quality assurance procedures that affect the ability of the center to comply with the minimum standards of Minnesota Statutes, section 245.69, subdivision 2, and parts 9520.0760 to 9520.0870 shall be reported in writing by the center to the commissioner within 15 days of occurrence. Please reference Minnesota Rules, part 9520.0860, subpart 4 for more information.

E. LICENSE HOLDER REQUIREMENTS FOR LICENSE RENEWAL

1. Certificate fee payment for your 2017 license. All certificate holders must pay for their 2017 license online. Your Authorized Agent will receive an email with instructions and a direct link to pay for your 2017 certificate fee(s). Certificate fee payments must be made within 30 days from receipt of the email to allow enough time for your 2017 certificate(s) to
be issued by January 1, 2017.

2. **Failure to pay 2017 certificate fee.** Your current certificate expires December 31, 2016. If you fail to pay the 2017 certificate fee, your current certificate will expire on December 31, 2016, and you will have to stop operating on January 1, 2016. You will need to apply for a new certificate and **will not be able to operate** under your expired certificate while your new certificate application is being processed.

3. **Programs closing on or before December 31, 2016.** If you plan on closing your program on or before December 31, 2016, please notify your licensor immediately so we can cancel the bill for your 2017 certificate.

4. **Your onsite certification review.** The annual renewal of your certificate is separate from the onsite certification review conducted by your DHS licensor. You will receive notice from your licensor about the certification review prior to your next scheduled review.

5. **Change of certificate information.** If you wish to change any information on your certificate, please contact your licensor immediately so those changes can be approved before we issue your 2017 certificate. If you hold multiple certificates or licenses and want the change to apply to each, you must complete a separate Change of License Information Form (CLIF) for each license and/or certificate. If you have not identified an Authorized Agent or your Authorized Agent information is not current, it will delay the email and the renewal of your 2017 license.

6. **Questions regarding the certificate renewal process.** If you have any questions regarding the certificate renewal process, please contact the DHS licensor assigned to your program, or call the main Licensing Division phone number at 651-431-6500 and select option 4 to speak with a licensor, and then select option 4 to speak with a licensor of mental health or chemical dependency services.