

**CHAPTER 2960  
INSPECTION  
TOOL**

ALL

FOSTER FAMILY AND RESIDENCE SETTINGS

FACILITY \_\_\_\_\_

DATE \_\_\_\_\_

Officials present during Inspection \_\_\_\_\_

DOCUMENTATION REVIEW			
Applicable Rule or Statute	REQUIREMENTS	Met (Y) Not (N)	NOTES
<b>POLICY, PLANS AND INSPECTIONS</b>			
2960.0030 subpart 10. <b>POLICY AND PROCEDURE REVIEW.</b>	The license holder must submit the facility's program <i>policies and procedures</i> to the commissioner of human services or corrections for review.		
2960.0040 <b>STATEMENT OF INTENDED USE</b>	The license holder must submit a statement of intended use as part of the license application. The statement of intended use must, at a minimum, meet the requirements in items A to F: A.state the license holder's expertise and qualifications to provide the services noted in the program description;		
	B.describe the target population to be served with consideration of at least the following characteristics of the residents: cultural background, gender, age, medically fragile condition, and legal status, including children in need of protection or services petition status, delinquency, and whether the resident is in the facility as a voluntary placement or self-referral;		
	C.state the primary needs of residents that the license holder will meet in the licensed facility;		
	D.identify those resident services provided within the setting and those services to be provided by programs outside the setting;		
	E.state how the license holder will involve the resident's cultural or ethnic community to ensure culturally appropriate care; and		
	F.describe the specific extent and limitations of the program, including whether the license holder would use a restrictive procedure with a resident, under what conditions a restrictive procedure would be used, and what type of restrictive procedures a license holder would use if the license holder was certified to use restrictive procedures.		
2960.0050 Subpart 2. <b>LICENSE HOLDER DUTIES</b>	The license holder must provide basic services to residents and develop operational <i>policies and procedures</i> which correspond to the basic rights in 2960.0050 subpart 1.		
2960.0060 Subpart 1. <b>STATEMENT OF PROGRAMS OUTCOMES</b>	The license holder must have <i>written policies</i> that identify program outcomes and promote the resident's development as a physically and mentally healthy person. The program services offered by the license holder must be consistent with the resident's case plan.		
2960.0080 Subpart 5. <b>DISCIPLINE POLICY AND PROCEDURE REQUIRED</b>	The license holder must have discipline <i>policies and procedure</i> that require the resident's abuse history and developmental, cultural, disability, and gender needs be taken into consideration when deciding the disciplinary action to be taken with a resident. The policy must include the requirements in items A to E. A. The license holder must not subject residents to:		
	(1) corporal punishment, including, but not limited to: rough handling, shoving, ear or hair pulling, shaking, slapping, kicking, biting, pinching, hitting, throwing objects, or spanking;		
	(2) verbal abuse, including, but not limited to: name calling; derogatory statements about the resident or resident's family, race, gender, disability, sexual orientation, religion, or culture; or statements intended to shame, threaten, humiliate, or frighten the resident;		
	(3) punishment for lapses in toilet habits, including bed wetting and soiling;		

(4) withholding of basic needs, including but not limited to a nutritious diet, drinking water, clothing, hygiene facilities, normal sleeping conditions, proper lighting, educational services, exercise activities, ventilation and proper temperature, mail, family visits, positive reinforcement, nurturing, or medical care. However, a resident who destroys bedding or clothing, or uses these or other items to hurt the resident or others, may be deprived of such articles according to the resident's case plan or, for a facility licensed by the commissioner of corrections, according to part 2960.0270, subpart 6;		
(5) assigning work that is dangerous or not consistent with the resident's case plan;		
(6) disciplining one resident for the unrelated behavior or action of another, except for the imposition of restrictions on the resident's peer group as part of a recognized treatment program;		
(7) use of restrictive techniques or procedures as punishment, for convenience of staff, to compensate for not having an adequate number of staff, or to substitute for program services;		
(8) restrictions on a resident's communications beyond the restrictions specified in the resident's treatment plan or case plan; and		
(9) requirements to assume uncomfortable or fixed positions for an extended length of time, or to march, stand, or kneel as punishment.		
B. The delegation of authority by the license holder to a resident or group of residents to punish another resident or group of residents is prohibited.		
C. The license holder must meet the requirements of part 9525.2700, subpart 2, item G, regarding the use of aversive or deprivation procedures with a resident who has a developmental disability.		
<p>D. The license holder must meet the following requirements for the use of time-out:</p> <ul style="list-style-type: none"> <li>(1) time-out must be used as a nonemergency behavior management technique which is used to intervene in a resident's undesirable behavior and to allow the resident to reflect and become calm before returning to ongoing activities at the facility;</li> <li>(2) time-out must be used under the direction of a mental health professional, the facility director, or the program manager;</li> <li>(3) the use of time-out must be consistent with the resident's treatment plan;</li> <li>(4) staff must escort a resident to an unlocked room or other separate living space in the facility that is safe;</li> <li>(5) staff must assess the resident in time-out at least every 30 minutes and determine when the resident may return to ongoing activity at the facility;</li> <li>(6) staff must have completed at least the following training before they use time-out with a resident: <ul style="list-style-type: none"> <li>(a) the needs and behaviors of residents;</li> <li>(b) building relationships with residents;</li> <li>(c) alternatives to time-out;</li> <li>(d) de-escalation methods;</li> <li>(e) avoiding power struggles with residents; and</li> <li>(f) documentation standards for the use of time-out;</li> </ul> </li> <li>(7) the treatment team must include and document the review of the use of time-out for each resident during the review of the resident's treatment plan; and</li> <li>(8) staff must document the use of time-out in the resident's record and include the information in units (a) to (d): <ul style="list-style-type: none"> <li>(a) the factors or circumstances which caused the need for the use of time-out;</li> <li>(b) the resident's response to the time-out;</li> <li>(c) the resident's ability to de-escalate during the time-out procedure; and</li> <li>(d) the resident's ability to maintain acceptable behavior after the time-out</li> </ul> </li> </ul>		
E. The license holder must be certified to use restrictive procedures according to parts 2960.0710 to 2960.0750 before using a restrictive procedure with a resident.		

2960.0080 Subpart 5a. <b>DISCIPLINE POLICY AND PROCEDURE REQUIRED; SOCIAL ISOLATION PROHIBITED</b>	A. This subpart applies to facilities licensed by the commissioner of corrections. B. A facility's discipline <b>policies and procedures</b> and due process system must be updated to reflect: (1)safety-based separation under parts 2960.0270, subpart 6; and 2960.0720 to 2960.0750; and (2)Minnesota Statutes, section 241.0215, subdivision 4. C. Facility staff are prohibited from socially isolating a resident as discipline by restricting the resident's right to: (1)talk to other residents or staff; or (2)interact with other residents or staff during facility programming or activities.		
2960.3080 Subpart 8. <b>DISCIPLINE</b>	The license holder must consider the child's abuse history and developmental, cultural, disability, and gender needs when deciding the disciplinary action to be taken with the child. Disciplinary action must be in keeping with the license holder's discipline <b>policy</b> . The discipline policy must include the requirements in items A and B. A. Children must not be subjected to: (1) corporal punishment, including, but not limited to: rough handling, shoving, ear or hair pulling, shaking, slapping, kicking, biting, pinching, hitting, throwing objects at the child, or spanking; (2) verbal abuse, including, but not limited to: name calling; derogatory statements about the child or child's family, race, gender, disability, sexual orientation, religion, or culture; or statements intended to shame, threaten, humiliate, or frighten the child; (3) punishment for lapses in toilet habits, including bed wetting or soiling; (4) withholding of basic needs, including, but not limited to: a nutritious diet, drinking water, clothing, hygiene facilities, normalsleeping conditions, proper lighting, educationalservices, exercise activities, ventilation and proper temperature, mail, family visits, positive reinforcement, nurturing, or medical care. However, a child who destroys bedding or clothing, or uses these or other itemsto hurt the child'sself or others, may be deprived ofsuch articles according to the child's case plan; (5) assigning work that is dangerous or not consistent with the child's case plan; (6) disciplining one child for the unrelated behavior or action of another, except for the imposition of restrictions on the child's peer group as part of a recognized treatment program; (7) restrictions on a child's communications beyond the restrictions specified in the child's treatment plan or case plan, unless the restriction is approved by the child's case manager; and (8) requirements to assume uncomfortable or fixed positions for an extended length of time, or to march, stand, or kneel as punishment. B. The license holder: (1) must not require a child to punish other children; (2) must follow the child's case plan regarding discipline; (3) must not use mechanical restraints or seclusion, as defined in part 2960.3010,subpart 38, with a foster child; (4) must ensure that the duration of time-out is appropriate to the age of the child; and (5) must meet the requirements of part 9525.2700, subpart 2, item F, regarding the use of aversive or deprivation procedures with a foster child with a developmental disability		
2960.0080 Subpart. 10. <b>EXERCISE AND RECREATION</b>	The license holder must develop and implement a <b>plan</b> that offers appropriate recreation for residents.		
2960.0080 Subpart 14. <b>EMERGENCY PLAN</b>	The license holder must develop a <b>written emergency plan</b> that specifies actions by staff and residents required for the protection of all persons in the case of an emergency, such as a <u>fire, natural disaster, serious illness, severe weather, disappearance of a resident, or other situation</u> that may require a law enforcement response or other emergency response. The plan must be developed with the advice of the local fire and emergency response authorities. The plan must specify responsibilities assumed by the license holder for assisting a resident who requires emergency care or special assistance to a resident in emergencies.  The license holder must review the plan with staff and residents at least once every six months. The license holder must keep documentation showing compliance with the emergency plan and the semiannual review.		

2960.0080 Subpart 15. <b>COMMUNICATION AND VISITATION</b>	<p>The license holder must have a <b>written policy</b> about resident communications and visiting with others inside and outside of the facility that meets the requirements of items A and B.</p> <p>A. The license holder must have a <b>written policy</b> about the use of the telephone, mail, adaptive communications devices, and other means of communication, compatible with the needs of other residents and the resident's case plan.</p> <p>B. License holders may not restrict the visiting rights of the parents of a resident beyond the limitations placed on those rights by a court order under Minnesota Statutes, section 260C.201, subdivision 5, or limitations in the resident's case plan. The visiting <b>policy</b> must allow parental visits at times that accommodate the parent's schedule.</p>		
2960.3080 Subpart 9. <b>VISITATION AND COMMUNICATION</b>	<p>The license holder must follow the <b>visitation and communication plan</b> in a foster child's case plan, which was developed by the placing agency and child's parents, or required by court order. In the absence of a case plan or court order regarding visitation, the license holder must work with the placing agency and the child's parents to jointly develop a visitation plan.</p>		
2960.0080 Subpart 17 <b>CRITICAL INCIDENT AND MALTREATMENT REPORTS</b>	<p>The license holder must <b>report critical incidents and the maltreatment</b> of a resident according to items A to D.</p> <p>A. The license holder must report critical incidents of a serious nature that involve or endanger the life or safety of the resident or others to the commissioner of human services or corrections within ten days of the occurrence on forms approved by the commissioner of human services or corrections. The license holder must maintain records of all critical incidents on file in the facility.</p> <p>B. The license holder must meet the reporting requirements of Minnesota Statutes, chapter 260E and section 626.557, if applicable, and other reporting requirements based on the age of the resident.</p> <p>C. The license holder must develop policies and procedures to follow if maltreatment is suspected.</p> <p>D. The license holder must review policies and procedures about maltreatment at least annually and revise the policies if the maltreatment laws change or if the license holder's review of incident reports or quality assurance reports indicates that a change in maltreatment policy or procedure is warranted.</p>		
2960.0080 Subpart. 18 <b>RESIDENT AND FAMILY GRIEVANCE PROCEDURES</b>	<p>A. The license holder must develop and follow a written grievance procedure that allows a resident, the resident's parent or legal representative, a guardian, or a concerned person in the resident's life to make a formal complaint or suggestion or express a concern about any aspect of the resident's care during the resident's stay in the facility. The license holder and staff must not attempt to influence a resident's statement about the facility in the grievance document or during an investigation resulting from the grievance. The written grievance procedure must require, at a minimum, that:</p> <ul style="list-style-type: none"> <li>(1)the license holder must give the person who wants to make a grievance the necessary forms and assistance to file a grievance;</li> <li>(2)the license holder must identify the person who is authorized to resolve the complaint and to whom an initial resolution of the grievance may be appealed and, upon request, a license holder must carry a grievance forward to the highest level of administration of the facility or placing agency;</li> <li>(3)a person who reports a grievance must not be subject to adverse action by the license holder as a result of filing the grievance; and</li> <li>(4)a person filing a grievance must receive a response within five days.</li> </ul> <p>B.If a grievance is filed, the license holder must document the grievance along with the investigation findings and resulting action taken by the license holder. Information regarding the grievance must be kept on file at the facility for two licensing periods.</p>		

2960.3080 Subpart 10. <b>COMPLAINTS AND GRIEVANCES</b>	The license holder must work with the licensing agency to develop <i>written complaint and grievance procedures</i> for foster children. The procedures must meet at least the following requirements: A. the agency or license holder must tell the child and the child's parent or legal representative about the complaint and grievance procedures and upon request give the child or the child's parent or legal representative a copy of the procedures and any forms needed to complain or grieve; B. the license holder must notify the placing and licensing agency about a written complaint or grievance and the resolution of the complaint or grievance; and C. a license holder's response to a complaint or grievance that alleges abuse or neglect must meet the requirements of the Maltreatment of Minors Act, Minnesota Statutes, chapter 260E.		
2960.0090 Subpart 2 <b>NO EJECT POLICY</b>	A license holder must have a written <i>no eject policy</i> . Before discharging a resident who has not reached the resident's case plan goals, or treatment plan goals for a resident who has a treatment plan, the license holder must confer with other interested persons to review the issues involved in the decision. During this review process, which must not exceed five working days, the license holder must determine whether the license holder, treatment team, interested persons, if any, and the resident can develop additional strategies to resolve the issues leading to the discharge and to permit the resident an opportunity to continue to receive services from the license holder. If the review indicates that the decision to discharge is warranted, the reasons for it and the alternatives considered or attempted must be documented. A resident may be temporarily removed from the facility during the five-day review period. This subpart does not apply to a resident removed by the placing authority or a parent or		
<b>STAFFING PLAN/STAFFING PATTERNS AND PERSONNEL POLICIES</b>			
2960.0100 Subpart 1 <b>STAFFING PLAN</b>	The license holder must have a staffing plan that: A. is approved by the commissioner of human services or corrections; B. identifies the assignments of facility staff; and C. meets the cultural and ethnic needs of the facility residents to the extent permitted by law.		
2960.0100 Subpart 2 <b>RECRUITMENT OF CULTURALLY BALANCED STAFF</b>	To the extent permitted by law, it is the license holder's responsibility to actively recruit, hire, and retain full-time staff who are responsive to the diversity of the population served.		
	If the facility staffing plan does not meet the cultural and racial needs of facility residents according to subpart 1, item C, the license holder must document the reasons why and work with cultural or racial communities to meet the needs of residents.		
	In addition, the license holder must contact a cultural or racial community group related to the resident's cultural or racial minority background and seek information about how to provide opportunities for the resident to associate with adult and peer role models with similar cultural and racial backgrounds on a regular basis.		
	The license holder must maintain annual documentation regarding the license holder's efforts to meet the requirements of this subpart.		
MN STATUTE 245C.04 Subd. 7 <b>NEW STUDY REQUIRED WITH LEGAL NAME CHANGE</b>	(a) For a background study completed on an individual required to be studied under section 245C.03, the license holder or other entity that initiated the background study must initiate a new background study using the electronic system known as NETStudy when an individual who is affiliated with the license holder or other entity undergoes a legal name change. (b) For background studies subject to a fee paid through the NETStudy system, the entity that initiated the study may initiate a new study under paragraph (a) or notify the commissioner of the name change through a notice to the commissioner.		

<p>MN STATUTE 245C.04 Subd. 11 <b>CHILDRENS RESIDENTIAL FACILITIES AND FOSTER RESIDENCE SETTINGS</b></p>	<p>Applicants and license holders for children's residential facilities and foster residence settings must submit a background study request to the commissioner using the electronic system known as NETStudy 2.0:</p> <ul style="list-style-type: none"> <li>(1) before the commissioner issues a license to an applicant;</li> <li>(2) before an individual age 13 or older, who is not currently receiving services from the licensed facility or setting, may live in the licensed program or setting;</li> <li>(3) before a volunteer has unsupervised direct contact with persons that the program serves;</li> <li>(4) before an individual becomes a controlling individual as defined in section 245A.02, subdivision 5a;</li> <li>(5) before an adult, regardless of whether or not the individual will have direct contact with persons served by the facility, begins working in the facility or setting;</li> <li>(6) when directed to by the commissioner for an individual who resides in the household as described in section 245C.03, subdivision 1, paragraph (a), clause (5); and</li> <li>(7) when directed to by the commissioner for an individual who may have unsupervised access to children or vulnerable adults as described in section 245C.03, subdivision 1, paragraph (a), clause (6).</li> </ul>		
<p>MN STATUTE 245C.07 par (b) <b>STUDY SUBJECT AFFILIATED WITH MULTIPLE FACILITIES</b></p>	<p>When a license holder maintains background study compliance for multiple licensed programs according to paragraph (a), and one or more of the licensed programs closes, the license holder shall immediately notify the commissioner which staff must be transferred to an active license so that the background studies can be electronically paired with the license holder's active</p>		
<p>MN STATUTE 245C.07 par (f) <b>STUDY SUBJECT AFFILIATED WITH MULTIPLE FACILITIES</b></p>	<p>For an entity operating under NETStudy 2.0, the entity's active roster must be the system used to document when a background study subject is affiliated with multiple entities. For a background study to be transferable:</p> <ul style="list-style-type: none"> <li>(1) the background study subject must be on and moving to a roster for which the person designated to receive sensitive background study information is the same; and</li> <li>(2) the same entity must own or legally control both the roster from which the transfer is occurring and the roster to which the transfer is occurring. For an entity that holds or controls multiple licenses, or unlicensed personal care provider organizations, there must be a common highest level entity that has a legally identifiable structure that can be verified through records available from the secretary of state.</li> </ul>		
<p>MN STATUTE 245C.09 Subd. 1 <b>FAILURE OR REFUSAL TO COOPERATE WITH BACKGROUND STUDY</b></p>	<p>An applicant's, license holder's, or other entity's failure or refusal to cooperate with the commissioner, including failure to provide additional information required under section 245C.05, is reasonable cause to disqualify a subject, deny a license application, or immediately suspend or revoke a license or registration.</p>		

<p>MN STATUTE 245C.13 Subd. 2</p> <p><b>ACTIVITIES PENDING COMPLETION OF BACKGROUND STUDY</b></p>	<p>The subject of a background study may not perform any activity requiring a background study under paragraph (c) until the commissioner has issued one of the notices under paragraph (a).</p> <p>(a) Notices from the commissioner required prior to activity under paragraph (c) include:</p> <p>(1) a notice of the study results under section 245C.17 stating that:</p> <p>(i) the individual is not disqualified; or</p> <p>(ii) more time is needed to complete the study but the individual is not required to be removed from direct contact or access to people receiving services prior to completion of the study as provided under section 245C.17, subdivision 1, paragraph (b) or (c). The notice that more time is needed to complete the study must also indicate whether the individual is required to be under continuous direct supervision prior to completion of the background study. When more time is necessary to complete a background study of an individual affiliated with a Title IV-E eligible children's residential facility or foster residence setting, the individual may not work in the facility or setting regardless of whether or not the individual is supervised;</p> <p>(2) a notice that a disqualification has been set aside under section 245C.23; or</p> <p>(3) a notice that a variance has been granted related to the individual under section 245C.30.</p> <p>(b) For a background study affiliated with a licensed child care center or certified license-exempt child care center, the notice sent under paragraph (a), clause (1), item (ii), must require the individual to be under continuous direct supervision prior to completion of the background study except as permitted in subdivision 3.</p> <p>(c) Activities prohibited prior to receipt of notice under paragraph (a) include:</p> <p>(1) being issued a license;</p> <p>(2) living in the household where the licensed program will be provided;</p> <p>(3) providing direct contact services to persons served by a program unless the subject is under continuous direct supervision;</p> <p>(4) having access to persons receiving services if the background study was completed under section 144.057, subdivision 1, or 245C.03, subdivision 1, paragraph (a), clause (2), (5), or (6), unless the subject is under continuous direct supervision;</p> <p>(5) for licensed child care centers and certified license-exempt child care centers, providing direct contact services to persons served by the program;</p> <p>(6) for children's residential facilities or foster residence settings, working in the facility or setting; or</p> <p>(7) for background studies affiliated with a personal care provider organization, except as provided in section 245C.03, subdivision 3b, before a personal care assistant provides services, the personal care assistance provider agency must initiate a background study of the personal care assistant under this chapter and the personal care assistance provider agency must have received a notice from the commissioner that the personal care assistant is:</p> <p>(i) not disqualified under section 245C.14; or</p> <p>(ii) disqualified, but the personal care assistant has received a set aside of the disqualification under section 245C.22.</p>		
<p>MN STATUTE 245C.17 Subd. 7, (a)</p> <p><b>DISQUALIFICATION NOTICE TO CHILDRENS RESIDENTIAL FACILITIES AND FOSTER RESIDENCE SETTINGS</b></p>	<p>For children's residential facilities and foster residence settings, all notices under this section that order the license holder to immediately remove the individual studied from any position allowing direct contact with, or access to a person served by the program, must also order the license holder to immediately remove the individual studied from working in the program, facility, or setting.</p>		
<p>MN STATUTE 245C.22 Subd. 5</p> <p><b>REVIEW AND ACTION ON A RECONSIDERATION REQUEST- scope of set-aside</b></p>	<p>(a) If the commissioner sets aside a disqualification under this section, the disqualified individual remains disqualified, but may hold a license and have direct contact with or access to persons receiving services. Except as provided in paragraph (b), the commissioner's set-aside of a disqualification is limited solely to the licensed program, applicant, or agency specified in the set aside notice under section 245C.23. For personal care provider organizations, the commissioner's set-aside may further be limited to a specific individual who is receiving services. For new background studies required under section 245C.04, subdivision 1, paragraph (h), if an individual's disqualification was previously set aside for the license holder's program and the new background study results in no new information that indicates the individual may pose a risk of harm to persons receiving services from the license holder, the previous set-aside shall remain in effect.</p>		

Applicable Rule or Statute	Requirements	(Y)or(N)	Notes	8
MN STATUTE 245C.30 Subd. 1 <b>VARIANCE FOR A DISQUALIFIED INDIVIDUAL</b>	<p>(a) Except for any disqualification under section 245C.15, subdivision 1, when the commissioner has not set aside a background study subject's disqualification, and there are conditions under which the disqualified individual may provide direct contact services or have access to people receiving services that minimize the risk of harm to people receiving services, the commissioner may grant a time-limited variance to a license holder or license-exempt child care center certification holder.</p> <p>(b) The variance shall state the reason for the disqualification, the services that may be provided by the disqualified individual, and the conditions with which the license holder, license-exempt child care center certification holder, or applicant must comply for the variance to remain in effect.</p> <p>(c) Except for programs licensed to provide family child care, foster care for children in the provider's own home, or foster care or day care services for adults in the provider's own home, the variance must be requested by the license holder or license-exempt child care center certification holder.</p>			
2960.3220 Subpart 1. <b>JOB DESCRIPTIONS</b>	The license holder must have written job descriptions for all position classifications and post assignments that define the responsibilities, duties, and qualifications staff need to perform those duties. The job descriptions must be readily available to all staff.			
2960.3220 Subpart 2. <b>RECRUITMENT OF CULTURALLY BALANCED STAFF</b>	To the extent permitted by law, it is the license holder's responsibility to actively recruit, hire, and retain staff who are responsive to the diversity of the population served. If the license holder's staffing plan does not meet the cultural and racial needs of the child, the license holder must <u>document</u> the reasons why and work with cultural or racial communities to meet the needs of the			
2960.3220 Subpart 3. <b>PROFESSIONAL LICENSURE</b>	The license holder must keep records showing that staff's professional licensure which is related to staff's foster care duties is current.			
2960.3220 Subpart 4. <b>STAFFING PLAN</b>	The license holder must prepare and obtain approval from the licensing agency of a <u>written staffing plan</u> that shows staff assignments and meets the needs of the children in care. The license holder must use the criteria in items A to D to develop the foster home's staffing plan.			
	A. The license holder must designate a person in charge at each facility.			
	B. In the temporary absence of the person designated as the person in charge at the facility, a different staff person must be designated as the person in charge of the facility.			
	C. The license holder must designate a person to coordinate volunteerservices, if volunteers are used by the facility. The license holder must have a system for registration and identification of volunteers. Volunteers who have unsupervised contact with			
	<p>D. The staffing plan must be appropriate for the program services offered to the children, the physical plant features and characteristics of the facility, and the condition of the children in care. The license holder must consider the factorsin subitems(1) to (8) when developing the staffing plan:</p> <ul style="list-style-type: none"> <li>(1) the age of the children served;</li> <li>(2) the children's physical and mental health;</li> <li>(3) the vulnerability of the children;</li> <li>(4) the children's capacity for self-preservation in the event of an emergency;</li> <li>(5) the degree to which the children may be a threat to self or others;</li> <li>(6) the gender of the children;</li> <li>(7) disabilities of the children; and</li> <li>(8) the number and types of service programs offered or coordinated for the children</li> </ul>			
2960.3220 Subpart 6. <b>DRUG AND ALCOHOL USE PROHIBITED</b>	The license holder must have a <b>policy</b> regarding use of illegal drugs or alcohol by staff, volunteers, and contract employees while staff, volunteers, and contract employees care for or have contact with foster children. The license holder's policy must prohibit the use of illegal drugs and use of alcohol by staff and others while caring for foster children, and require that staff and others who use illegal drugs or use alcohol while caring for foster children are subject to dismissal.			
2960.3220 Subpart 7. <b>MEDICATION ADMINISTRATION</b>	The license holder must have a <b>policy</b> on medication administration by staff. The license holder's medication administration policy must, at a minimum, require that staff <u>document</u> medication administration errors.			
<b>SERVICES AND PROGRAM EVALUATION</b>				



2960.0060 Subpart 2 <b>OUTCOME MEASURES</b>	The license holder must ensure measurement of the outcomes of the license holder's services intended to promote the resident's development as physically and mentally healthy persons. The measurement must note the degree to which the license holder's services provided to the resident or the resident's family have been successful in achieving the intended outcome of the services offered to the resident and the resident's family. The license holder must measure the success in achieving the outcomes identified in the license holder's policy statement required by subpart 1. The commissioner of human services or corrections may require license holders to measure specific factors related to the outcomes in subpart 1.		
2960.0060 Subpart 3 <b>PROGRAM EVALUATION</b>	A. The license holder must <u>annually</u> evaluate strengths and weaknesses of the program using at least the performance indicators in subitems (1) to (7): (1) accidents; (2) the use of restrictive procedures; (3) grievances; (4) adverse findings, allegations of maltreatment under Minnesota Statutes, chapter 260E, citations, and legal actions against the license holder; (5) results of a resident and family satisfaction survey required in part 2960.0140, subpart 1; (6) information from subparts 1 and 2; and (7) critical incidents. B. The program evaluation in item A must be kept for two licensing periods.		
2960.0060 Subpart 4 <b>USE OF FINDINGS</b>	The license holder must use the program evaluation reports and findings in subpart 3 as a basis to make improvements in its programs.		
2960.0060 Subpart 5 <b>INDEPENDENT PROGRAM AUDIT</b>	The license holder must comply and cooperate with independent program audits conducted by the commissioner of human services or corrections and comply with the findings of the audit. The license holder must <u>document</u> the facility's compliance with its operational policies and procedures. The license holder must retain demographic information on a resident and must document the extent of the resident's program completion on a form designated by the commissioner of human services or corrections.		
2960.0070 Subpart 2. <b>ADMISSION CRITERIA</b>	The license holder must have written specific identifiable admission criteria that are consistent with the license holder's statement of intended use in part 2960.0040. The license holder must:		
	A. have sufficient resources available and qualified staff to respond to the needs of persons with disabilities admitted to the		
	B. consider the appropriateness of placing female residents in facilities that have few other female residents and whether or not the facility could offer gender-specific program services for female residents;		
	C. consider the appropriateness of placing male residents in facilities that have few other male residents and whether or not the facility could offer gender-specific program services for male residents; and		
	D. seek the approval of the commissioner of corrections to serve EJJ's who are older than 19 years of age in the same facility with residents who are less than 19 years of age.		
<b>CAPACITY LIMITS</b>			
2960.3030 Subpart 1. <b>MAXIMUM FOSTER CHILDREN ALLOWED</b>	A foster home must have no more than six foster children. The maximum number of children allowed in a home is eight, including a foster parent's own children. The license holder must maintain a ratio of one adult for each five children.		
2960.3030 Subpart 2. <b>CAPACITY LIMITS</b>	The capacity limits in items A to C apply to foster homes. A. A foster home must have no more than three children who are under two years of age or who are nonambulatory, unless the license holder maintains a ratio of at least one adult present when children are present for every three children under two years of age or children who are nonambulatory.		
	B. A foster home must have no more than four foster children at one time if any of the children have severe or profound developmental disabilities, have severe emotional disturbance, or is a person assisted by medical technology.		

Applicable Rule or Statute	Requirements	(Y)or(N)	Notes	10
	C. The number of foster children a foster home may accept must be limited based on the factors in subitems (1) to (5): (1) the license holder's ability to supervise, considering the adult-to-child ratio in the home; (2) the license holder's training, experience, and skills related to child care; (3) the structural characteristics of the home; (4) the license holder's ability to assist children in the home during emergencies; and (5) the characteristics of the foster children, including age, disability, and emotional problems.			
<b>FOSTER HOME PHYSICAL ENVIRONMENT</b>				
2960.3040 Subpart 1. <b>FIRE, HEALTH, BUILDING, AND ZONING CODES</b>	The foster home must comply with applicable fire, health, building, and zoning codes.			
2960.3040 Subpart 2. <b>SLEEPING SPACE</b>	A foster child must be provided with a separate bed suitably sized for the child, except that two siblings of the same sex may share a double bed. A foster child must not be assigned sleeping space in a building, apartment, trailer, or other structure that is separate from the foster family home or in an unfinished attic, an unfinished basement, or a hall or any other room normally used for purposes other than sleeping. Bedrooms that are used by foster children must have two exits.			
2960.3040 Subpart 3. <b>SPACE FOR BELONGINGS</b>	A foster child must have an identified space for clothing and personal possessions with cabinets, closets, shelves, or hanging space sufficient to accommodate clothing and personal possessions.			
2960.3040 Subpart 4. <b>DINING AREA</b>	The dining area must be able to accommodate, at one time, all persons residing in the home.			
2960.3040 Subpart 5. <b>CONSTRUCTION OR REMODELING</b>	Changes in a foster home resulting from construction or remodeling must meet applicable building codes. The license holder must notify the licensing agency of changes to the licensed setting resulting from construction if those changes affect a licensing requirement.			
<b>FOSTER HOME SAFETY</b>				
2960.3050 Subpart 1. <b>INSPECTION BY LICENSING AGENCY</b>	Prior to licensure, the foster home must be inspected by a licensing agency employee using the home safety checklist from the commissioner of human services. The applicant must correct deficiencies in the foster home which were identified by the agency. The licensing agency may require a health inspection if the foster home's condition could present a risk to the health of a foster child.			
2960.3050 Subpart 2. <b>FIRE CODE INSPECTIONS REQUIRED</b>	If one of the conditions in items A to E exist, the foster home must <b>document</b> inspection and approval of the foster home according to Minnesota Statutes, section 299F.011, and the Uniform Fire Code by the state fire marshal or a local fire code inspector who is approved by the state fire marshal:			
	B. the foster home is a manufactured home as defined in Minnesota Statutes, section 327B.01, subdivision 13, and was manufactured before June 15, 1976;			
	C. the licensing agency identifies a potential hazard in a single-family detached home, or a mixed or multiple-occupancy building;			
	D. the home is to be licensed for four or more foster children; or			
	E. the foster home has a foster child sleeping in a room that is 50 percent or more below ground level.			
2960.3050 Subpart 3. <b>EMERGENCY PROCEDURES</b>	The license holder must give the licensing agency a <b>floor plan</b> of the foster home showing <b>emergency evacuation routes</b> . Emergency procedures must include a plan for care of children, evacuation, temporary shelter, and gathering at a meeting place to determine if anyone is missing. The plan must specifically address the needs of children whose behavior increases the risk of having a fire. The foster parent must give the emergency procedures to the agency, and the foster parent and licensing agency must review the emergency procedures during relicensure.			
2960.3050 Subpart 4. <b>PETS</b>	A foster home serving children less than six years of age must not keep reptiles, chickens, or ducks as pets. A foster home serving children six years of age and older that keeps reptiles, chickens, or ducks as pets must require a thorough hand washing following the handling of the animal, its food, and anything the animal has touched. Pets in family residences must be <b>immunized</b> and maintained as required by local ordinances and state law.			
<b>PLACEMENT, CONTINUED STAY, AND DISCHARGE</b>				

Applicable Rule or Statute	Requirements	(Y)or(N)	Notes	11
2960.3080 Subpart 7. <b>FOSTER CHILD DIET</b>	A foster child must be provided food and beverages that are palatable, of adequate quantity and variety, served at appropriate temperatures, and have sufficient nutritional value to promote the child's health. If the child has a medically prescribed diet, then the license holder must provide the diet as ordered by a physician or other licensed health care provider.			
<b>RESPITE AND SUBSTITUTE CARE FOR FAMILY SETTINGS</b>				
2960.3090 Subpart 1. <b>NOTICE REQUIREMENTS</b>	In nonemergency situations, the license holder, parent, and placing agency must agree on respite care and substitute care arrangements within ten working days prior to the use of respite care or substitute care or must agree on respite care according to an ongoing written agreement. In an emergency that may require the use of respite or substitute care, the license holder must notify the placing agency of the emergency as soon as possible. The license holder must notify the placing agency when respite care or long-term substitute care is being provided.			
2960.3090 Subpart 2. <b>QUALIFICATIONS OF LONG-TERM SUBSTITUTE CAREGIVER</b>	<p>A. be at least 18 years of age;</p> <p>B. have completed a background study within the past 12 months;</p> <p>C. have no statutory or rule disqualification;</p> <p>D. if providing more than 30 cumulative days of substitute care in a 12-month period:</p> <p>(1) submit a <b><u>signed statement</u></b> attesting to good health and being physically able to care for foster children; and</p> <p>(2) have at least six hours of training or 20 hours of experience in caring for children with the particular needs of the foster children to be cared for; and</p> <p>E. provide <b><u>documentation</u></b> of medical equipment training on the equipment used to care for the foster child from an appropriate training source.</p>			
2960.3090 Subpart 3. <b>SHORT-TERM SUBSTITUTE CAREGIVER</b>	As used in parts 2960.3000 to 2960.3340, "short-term substitute care" means less than 72 hours of continuous care for a child. A short-term substitute caregiver does not have to meet the requirements of subpart 2. However, the foster parent and the placing agency must agree that the short-term substitute caregiver is able to meet the needs of the foster child. The short-term substitute caregiver must provide <b><u>documentation</u></b> of medical equipment training on the equipment used to care for the foster child from an appropriate training source.			
2960.3090 Subpart 4. <b>INFORMATION TO RESPITE CAREGIVER</b>	<p>The license holder must give a respite care provider the information in items A to D related to the foster child's health, safety, and welfare:</p> <p>A. information about the foster child's emotional, behavioral, medical, and physical condition;</p> <p>B. any medication the foster child takes;</p> <p>C. the foster child's daily routine and schedule; and</p> <p>D. the names and telephone numbers of individuals to contact in case of emergency and information about medical providers and how to obtain medical care for the child.</p>			
2960.3090 Subpart 5. <b>INFORMATION TO SUBSTITUTE CAREGIVERS</b>	<p>The license holder must give a substitute care provider the information in subpart 4, and in items A to D:</p> <p>A. the location of a fire extinguisher and first aid supplies;</p> <p>B. emergency and fire evacuation plans;</p> <p>C. information about child abuse and mandatory reporting laws; and</p> <p>D. if an emergency occurs which involves the foster child, the substitute caregiver must notify the placing agency as soon as possible about the emergency.</p>			
2960.3090 Subpart 6. <b>OVERNIGHTS AND SHORT TRIPS</b>	The license holder must seek direction from the placing agency about whether or not the foster child may go on overnights or short trips outside the supervision of the license holder.			
2960.3090 Subpart 7. <b>FOSTER RESIDENCE SETTINGS</b>	Foster residence settings may not use respite caregivers, long-term substitute caregivers, and short-term substitute caregivers. Subparts 1 to 6 do not apply to foster residence settings.			
<b>RECORDS</b>				
2960.3100 Subpart 1. <b>FOSTER CARE LICENSE RECORDS</b>	<p>The license holder must cooperate with the licensing agency to ensure the agency has the following records:</p> <p>A. a copy of the application for licensure <b><u>signed by the applicant</u></b>;</p> <p>B. a license holder agreement form supplied by the Department of Human Services which is <b><u>signed by the applicant and the</u></b></p>			

C. reports and signed statements from specialists, and signed statements from the license holder, the license holder's children, and other household members concerning the physical health of the license holder, the license holder's children, and other household members;

D. a current completed commissioner's home safety checklist (D.S.-644) plus a written report from the fire marshal on any specific fire hazards, if required;

E. the precicensing home study and supporting documentation;

F. references obtained through the licensing process;

G. a documented annual evaluation of the licensed foster home, conducted jointly by the license holder and the licensing agency, including, at a minimum:

- (1) a review of all foster placements in the past year and an assessment of the impact and outcomes of the placement on the child, child's family, license holder, and development and implementation of the case plan;
- (2) a review of any comments, suggestions, or concerns raised by placing agencies and an assessment of implications for training and foster home policies or procedures;
- (3) a review of any grievances, their outcomes, and an assessment of implications for training and foster home policies or procedures;
- (4) a review of the ability of the license holder to care for children; and
- (5) the development of a plan for the next year's foster care training and development;

H. documentation for any rule variance from this chapter; and

I. a record of training received by the license holder and staff, if any, and foster parents, including a list of training on medical equipment used to sustain life or monitor a medical condition.

PERSONNEL FILES				
File 1	File 2	File 3	File 4	File 5
<b>License Holder</b> Name:  Date of hire/House open:  Age:	<b>Staff member</b> Name:  Date of hire/House open:  Age:	<b>Staff member</b> Name:  Date of hire/House open:  Age:	<b>Staff member</b> Name:  Date of hire/House open:  Age:	<b>Staff member</b> Name:  Date of hire/House open:  Age:
STAFF TRAINING AND POLICIES				
2960.0030 Subpart 9. <b>DRUG OR ALCOHOL USE PROHIBITED.</b>	The license holder must train employees, subcontractors, and volunteers about the program's drug and alcohol policy.			

File 1	File 2	File 3	File 4	File 5
2960.0080 Subpart. 11. D <b>HEALTH AND HYGIENE SERVICES</b>	(5)Facility staff responsible for medication assistance, other than a medically licensed person, must have a certificate verifying their successful completion of a trained medication aide program for unlicensed personnel offered through a postsecondary institution, or staff must be trained to provide medication assistance according to a formalized training program offered by the license holder and taught by a registered nurse. The specific medication assistance training provided by the registered nurse to staff must be documented and placed in the unlicensed staff person's personnel records. A medically licensed person must provide consultation and review of the license holder's administration of medications at least monthly.			
File 1	File 2	File 3	File 4	File 5
2960.0100 Subpart 3 <b>ORIENTATION AND IN-SERVICE TRAINING</b>	The license holder must provide training for staff that is modified annually to meet the current needs of individual staff persons. The training must be directly related to serving the program's target population and to achieving the program's outcomes. The license holder must ensure that staff who will have direct contact with residents attend and successfully complete orientation training before having unsupervised contact with residents. A. Orientation training must include at least the subjects in subitems (1) to (6): (1)emergency procedures, including evacuation routes, emergency telephone numbers, severe storm and tornado procedures, and location of facility alarms and equipment;			
File 1	File 2	File 3	File 4	File 5
	(2)relevant statutes and administrative rules and legal issues, including reporting requirements for abuse and neglect specified in Minnesota Statutes, chapter 260E and section 626.557, and other reporting requirements based on the ages of the residents;			
File 1	File 2	File 3	File 4	File 5
	(3)cultural diversity and gender sensitivity, culturally specific services, and information about discrimination and racial bias issues to ensure that caregivers have cultural sensitivity and will be culturally competent to care for residents;			
File 1	File 2	File 3	File 4	File 5
	(4)general and special needs, including disability needs, of residents and families served;			

File 1	File 2	File 3	File 4	File 5
	(5)operational policies and procedures of the license holder; and			
File 1	File 2	File 3	File 4	File 5
	(6)data practices regulations and issues.			
File 1	File 2	File 3	File 4	File 5
	B. The license holder must ensure that staff who have direct contact with residents receive ongoing training. Training must help staff meet the needs of residents and must include skills development.			
File 1	File 2	File 3	File 4	File 5
2960.0100 Subpart 4 <b>SPECIALIZED TRAINING</b>	If needed, license holders and staff must have specialized training to develop skills to care for residents. Specialized training must be directly related to serving the program's target population and to meeting the program's certification requirement, if the program has been certified.			
File 1	File 2	File 3	File 4	File 5
2960.0100 Subpart 5 <b>DOCUMENTATION OF TRAINING</b>	The license holder must document the date and number of hours of orientation and in-service training completed by each staff person in each topic area and the name of the entity that provided the training.			
File 1	File 2	File 3	File 4	File 5
2960.0100 Subpart 6 <b>LICENSE HOLDER AND STAFF QUALIFICATIONS</b>	<p>A. The license holder and staff must have the education and experience required to meet the functions and program activities that the license holder declared in the facility statement of intended use according to part 2960.0040. The license holder, or the license holder's representative acting on behalf of the license holder, must be a responsible, mature, healthy adult who is able to carry out the license holder's duties. The license holder and staff must be able to accomplish the license holder's duties to the resident's case plan and treatment plan and meet the resident's needs.</p> <p>B. Staff must be trained in gender-based needs and issues.</p> <p>C. The license holder and staff must be at least 21 years old unless stated otherwise in this chapter.</p>			

File 1	File 2	File 3	File 4	File 5
2960.3220 Subpart 5. <b>LICENSE HOLDER AND STAFF QUALIFICATIONS</b>	The license holder and staff must have the education and experience required to meet the functions and program activities that the license holder declared in the foster home's statement of intended use according to part 2960.3000, subpart 4. The license holder must be a responsible, mature, healthy adult who is able to carry out the license holder's duties. The license holder must be able to accomplish the license holder's duties and meet the child's needs as stated in the child's case plan. Staff must be at least 21 years of age.			
File 1	File 2	File 3	File 4	File 5
2960.0100 Subpart 7 <b>BACKGROUND STUDY</b>  2960.3060 Subpart 2. <b>BACKGROUND STUDY</b>	A license holder and individuals identified in Minnesota Statutes, sections 241.021 and 245A.04, subdivision 3, must submit to a background study. A. Background checks conducted by the Department of Human Services are conducted according to Minnesota Statutes, section 245A.04, subdivision 3. B. Background checks conducted by the Department of Corrections are conducted according to Minnesota Statutes, section 241.021, subdivision 6.			
File 1	File 2	File 3	File 4	File 5
MN STATUTE 245C.05 Sub 1 <b>BACKGROUND STUDY; INFORMATION AND DATA PROVIDED TO THE COMMISSIONER</b>	(a) The individual who is the subject of the background study must provide the applicant, license holder, or other entity under section 245C.04 with sufficient information to ensure an accurate study, including: (1) the individual's first, middle, and last name and all other names by which the individual has been known; (2) current home address, city, and state of residence; (3) current zip code; (4) sex; (5) date of birth; (6) driver's license number or state identification number or, for those without a driver's license or state identification card, an acceptable form of identification as determined by the commissioner; and (7) upon implementation of NETStudy 2.0, the home address, city, county, and state of residence for the past five years.  (b) Every subject of a background study conducted or initiated by counties or private agencies under this chapter must also provide the home address, city, county, and state of residence for the past five years.			
File 1	File 2	File 3	File 4	File 5



	(c) Every subject of a background study related to private agency adoptions or related to child foster care licensed through a private agency, who is 18 years of age or older, shall also provide the commissioner a signed consent for the release of any information received from national crime information databases to the private agency that initiated the background study.				
File 1	File 2	File 3	File 4	File 5	
	(d) The subject of a background study shall provide fingerprints and a photograph as required in subdivision 5.				
File 1	File 2	File 3	File 4	File 5	
	(e) The subject of a background study shall submit a completed criminal and maltreatment history records check consent form and criminal history disclosure form for applicable national and state level record checks.				
File 1	File 2	File 3	File 4	File 5	
	(f) A background study subject who has access to the NETStudy 2.0 applicant portal must provide updated contact information to the commissioner via NETStudy 2.0 any time the subject's personal information changes for as long as they remain affiliated on any roster.				
File 1	File 2	File 3	File 4	File 5	
	(g) An entity must update contact information in NETStudy 2.0 for a background study subject on the entity's roster any time the entity receives new contact information from the study subject.				
File 1	File 2	File 3	File 4	File 5	
LICENSE HOLDER QUALIFICATIONS					
2960.3060 Subpart 1. <b>EXPERIENCE</b>	The prospective license holder must agree to cooperate with the licensing agency and: A. have at least the equivalent of two years of full-time experience caring for or working with the issues presented by the children they will care for, whether they are the license holder's own children or other children;				
File 1	File 2	File 3	File 4	File 5	

	B. agree to receive training in child care and development as needed in order to meet the individual needs of the children placed in the foster home;				
File 1	File 2	File 3	File 4	File 5	
	C. be related to the child needing foster care; or D. be an important friend with whom the child has resided or had significant contact				
File 1	File 2	File 3	File 4	File 5	
2960.3060 Subpart 3. <b>PERSONAL CHARACTERISTICS OF APPLICANTS</b>	The applicant must comply with the requirements of items A to G. A. The applicant must be at least 21 years old at the time of application.				
File 1	File 2	File 3	File 4	File 5	
	B. The applicant and household members must provide a signed statement which indicates that they are receiving all necessary medical care, do not pose a risk to the child's health, and are physically able to care for foster children and indicate any limitations the applicant and household members may have.				
File 1	File 2	File 3	File 4	File 5	
	C. The applicant and adult household members must <u>sign a statement</u> that they have been free of chemical use problems for the past two years.				
File 1	File 2	File 3	File 4	File 5	
	D. The applicant must help the licensing agency obtain at least three letters of reference that provide information about the license holder's support system, the observed license holder's interactions with children, and the ability of the license holder and foster family to accept different points of view.				
File 1	File 2	File 3	File 4	File 5	
	E. The applicant must help the licensing agency get previous foster care studies completed on the applicant by any other agency to which the applicant has applied for foster care licensure.				

File 1	File 2	File 3	File 4	File 5
	<p>F. The licensing agency must make a determination as to whether a prospective license holder and foster parent can provide appropriate structure and is suitable to be licensed if a prospective license holder or foster parent has had either of the following:</p> <p>(1) a child for whom the applicant is legally responsible was removed from the applicant's home and placed in foster care, a correctional facility, or a residential treatment center for severe emotional disturbance under Minnesota Statutes, chapter 260C, within one year prior to the date of application; or</p> <p>(2) the applicant has a child in voluntary foster care under Minnesota Statutes, section 260C.193, 260C.201, 260C.227, or 260D.11.</p>			
File 1	File 2	File 3	File 4	File 5
	<p>G. The licensing agency may consult with a specialist in such areas as health, mental health, or chemical dependency to evaluate the abilities of the applicant to provide a safe environment for foster children. The licensing agency and the specialist must evaluate each applicant individually. The licensing agency must request a release of information from the applicant prior to assigning the specialist to evaluate the applicant. The licensing agency must tell the applicant why it is using a specialist to evaluate</p>			
File 1	File 2	File 3	File 4	File 5
2960.3060 Subpart 4. <b>HOME STUDY OF APPLICANT</b>	<p>The applicant must cooperate with a home study conducted by the licensing agency. At a minimum, there must be one in-home interview and <b>documented</b> interviews with all household members over seven years of age. The home study must be completed using the commissioner of human services' designated format. The applicant must demonstrate the ability to:</p> <p>A. provide consistent supervision, positive and constructive discipline, and care and training to contribute to the foster child's well-being;</p>			
File 1	File 2	File 3	File 4	File 5
	B. understand the licensing agency's programs and goals;			
File 1	File 2	File 3	File 4	File 5
	C. work within agency and state policies;			

File 1	File 2	File 3	File 4	File 5
	D. share responsibility for the foster child's well-being with the foster child's social worker, school, and legal parents;			
File 1	File 2	File 3	File 4	File 5
	E. actively support the foster child's racial or ethnic background, culture, and religion, and respect the child's sexual orientation;			
File 1	File 2	File 3	File 4	File 5
	F. accept the foster child's relationship with the child's family and relatives and to support visitation and family reunification efforts;			
File 1	File 2	File 3	File 4	File 5
	G. have a current network of support that may include extended family, and neighborhood, cultural, and community ties that the applicant can use to strengthen the applicant's abilities, and for support and help;			
File 1	File 2	File 3	File 4	File 5
	H. meet the foster child's special needs, if any, including medical needs, disabilities, or emotional disturbance;			
File 1	File 2	File 3	File 4	File 5
	I. deal with anger, sorrow, frustration, conflict, and other emotions in a manner that will build positive interpersonal relationships rather than in a way that could be emotionally or physically destructive to other persons; and			
File 1	File 2	File 3	File 4	File 5

	J. nurture children, be mature and demonstrate an ability to comply with the foster child's care plan, and meet the needs of foster children in the applicant's care.				
File 1	File 2	File 3	File 4	File 5	
<b>STAFF TRAINING REQUIREMENTS</b>					
2960.3210 Subpart 1. <b>ORIENTATION</b>	The license holder must ensure that all staff attend and successfully complete at least six hours of orientation training before having unsupervised contact with foster children. The number of hours of orientation training are not counted as part of the hours of annual training. Orientation training must include at least the topics in items A to F:				
File 1	File 2	File 3	File 4	File 5	
	A. emergency procedures, including evacuation routes, emergency telephone numbers, severe storm and tornado procedures, and location of facility alarms and equipment;				
File 1	File 2	File 3	File 4	File 5	
	B. relevant statutes and administrative rules and legal issues, including reporting requirements for abuse and neglect specified in Minnesota Statutes, chapter 260E and section 626.557, and other reporting requirements based on the ages of the children;				
File 1	File 2	File 3	File 4	File 5	
	C. cultural diversity and gender sensitivity, culturally specific services, and information about discrimination and racial bias issues to ensure that caregivers have cultural sensitivity and will be culturally competent to care for children according to Minnesota Statutes, section 260C.212, subdivision 11;				
File 1	File 2	File 3	File 4	File 5	
	D. general and special needs, including disability needs, of children and families served;				
File 1	File 2	File 3	File 4	File 5	
	E. operational policies and procedures of the license holder; and				

File 1	File 2	File 3	File 4	File 5
	F. data practices regulations and issues			
File 1	File 2	File 3	File 4	File 5
2960.3210 Subpart 2. <b>PERSONNEL TRAINING</b>	The license holder must provide training for staff that is modified annually to meet the current needs of individual staff persons. The license holder must develop an annual training plan for employees that addresses items A to C.			
File 1	File 2	File 3	File 4	File 5
	A. Full-time and part-time direct care staff and volunteers must have sufficient training to accomplish their duties. To determine the type and amount of training an employee needs, the license holder must consider the foster care program's target population, services the program delivers, and outcomes expected from the services, as well as the employee's position description, tasks to be performed, and the performance indicators for the position. The license holder and staff who care for children who rely on medical equipment to sustain life or monitor a medical condition must meet the requirements of Minnesota Statutes, section 245A.155.			
File 1	File 2	File 3	File 4	File 5
	B. Full-time staff who have direct contact with children must complete at least 18 hours of in-service training per year. One-half of the training must be skill development training. Other foster home staff and volunteers must complete in-service training requirements consistent with their duties.			
File 1	File 2	File 3	File 4	File 5
	C. Part-time direct care staff must receive sufficient training to competently care for children. The amount of training must be provided at least at a ratio of one hour of training for each 60 hours worked, up to 18 hours of training per part-time employee per year.			
File 1	File 2	File 3	File 4	File 5
2960.3210 Subpart 3. <b>DOCUMENTATION OF TRAINING</b>	The license holder must <u>document</u> the date and number of hours of orientation and in-service training completed by each staff person in each topic area and the name of the entity that provided the training.			

File 1	File 2	File 3	File 4	File 5
<b>RESIDENT FILES</b>				
2960.0080 Subpart 16 <b>RESIDENT RECORDS</b>	A license holder must: A. maintain and make available to the commissioner of human services and corrections sufficient documentation to verify that all requirements of the rules governing the care of the resident have been met; B. maintain and make available upon request the resident's records according to the requirements of rule and statute; C. comply with the requirements of the case manager for the release of information about the resident, unless prohibited by law; and D. Use forms approved by the commissioner of human services or corrections and collect demographic information about residents and their families and outcome measures about the success of services that meet the requirements of Laws 1995, chapter 226, article 3, section 60, subdivision 2, clause (1)(iii).			
File 1	File 2	File 3	File 4	File 5
Name:	Name:	Name:	Name:	Name:
Date of Birth:	Date of Birth:	Date of Birth:	Date of Birth:	Date of Birth:
Date of placement:	Date of placement:	Date of placement:	Date of placement:	Date of placement:
Discharge:	Discharge:	Discharge:	Discharge:	Discharge:
<b>PROGRAMMING</b>				
2960.0080 Subpart. 2. <b>BASIC SERVICES</b>	The license holder must provide services that fulfill the basic rights of a resident as identified in part 2960.0050, subpart 1. A.Basic services provided by the license holder must have stated objectives and measurable outcomes. B.License holders who do not provide a basic service in the facility must coordinate and ensure that the service is provided by the placement agency or by resources in the community. C.The license holder must meet the basic needs of the residents served by the facility.			
File 1	File 2	File 3	File 4	File 5
A:	A:	A:	A:	A:
B:	B:	B:	B:	B:
C:	C:	C:	C:	C:
2960.0080 Subpart. 7. <b>CULTURALLY APPROPRIATE CARE</b>	The license holder must document the provision of culturally appropriate care to each resident that includes: A. opportunities to associate with culturally and racially similar adults, peers, and role models; B. Opportunities to participate in positive experiences related to the resident's cultural and racial group; C. culturally appropriate program services that address the needs of all residents in care; and D. cultural sensitivity, including the provision of interpreters and English language skill development to meet the needs of facility residents as required by Laws 1995, chapter 226, article 3, section 60, subdivision 2, paragraph (2), clause (v).			

File 1 A: B: C: D:	File 2 A: B: C: D:	File 3: A: B: C: D:	File 4 A: B: C: D:	File 5 A: B: C: D:
2960.0080 Subpart. 8. <b>SPIRITUALITY SERVICES AND COUNSELING</b>	<p>A. Residents must be given an opportunity to participate in spirituality services, activities, and counseling on a voluntary basis. A resident must not be required to attend the services or activities. All spirituality services and activities must be held in a location that the residents who do not wish to participate are not exposed to the services or activities. Attendance or lack of attendance at religious services or activities must not be considered as a basis for any right or privilege in the facility.</p> <p>B. The license holder must arrange with the clergy or spiritual leaders within the area to provide spiritual counseling if requested by a resident. Every effort must be made by the license holder to accommodate a resident or a resident's family's request to meet the resident's spiritual needs, including spiritual needs related to the resident's culture, in the facility. If the resident's or resident's family's request cannot be met, the license holder must document the reason.</p> <p>C. The license holder shall allow residents who request private interviews or counseling regarding spiritual, personal, or family problems the opportunity to meet with a spiritual or religious person of their choice within reasonable facility rules needed to protect the facility's security and the safety of other residents and staff within the facility.</p>			
File 1	File 2	File 3	File 4	File 5
2960.0080 Subpart. 9. <b>EDUCATIONAL SERVICES</b>	<p>The license holder must ensure that educational services are provided to residents according to items A to D, except where not applicable, due to the age of the resident or the resident's short stay in the facility.</p> <p>A. The license holder must facilitate the resident's admission to an accredited public school or, if the resident is home-schooled or educated at a private school or school operated by the license holder, the school must meet applicable laws and rules. If the educational services are provided on the grounds of the facility, the license holder must:</p> <ul style="list-style-type: none"> <li>(1) arrange for educational programs that provide for instruction on a year-round basis, if required by law;</li> <li>(2) get the approval of the education services from the Department of Education; and</li> <li>(3) cooperate with the school district.</li> </ul>			
File 1	File 2	File 3	File 4	File 5
	B. The license holder must facilitate the resident's school attendance and homework activities.			
File 1	File 2	File 3	File 4	File 5
	C. The license holder must inquire at least every 90 days to determine whether the resident is receiving the education required by law and the resident's individualized education program that is necessary for the resident to make progress in the appropriate grade level. The license holder must report the resident's educational problems to the case manager or placing agency.			



File 1	File 2	File 3	File 4	File 5
	D. The license holder must provide education about chemical health to the resident who has had a problem related to inappropriate chemical use, but who does not have a sufficient chemical use history to refer to treatment. The education must provide the resident with opportunities to examine the problems associated with inappropriate chemical use.			
File 1	File 2	File 3	File 4	File 5
<b>RESIDENT ADMISSIONS</b>				
2960.0050 Subpart 3.A <b>BASIC RIGHTS INFORMATION</b>	The license holder must give the resident a written copy of the resident's basic rights information and explain to the resident in a language that the resident can understand, if the resident is incapable of understanding the written basic rights documents, information about the resident's rights related to the resident's care in the licensed facility within 24 hours of admission.			
File 1	File 2	File 3	File 4	File 5
2960.0050 Subpart 3.B <b>BASIC RIGHTS INFORMATION</b>	The license holder must tell the resident's parent, guardian, or custodian within a reasonable time after admission to the facility that the information in item A is available.			
File 1	File 2	File 3	File 4	File 5
2960.3080 Subpart 1. <b>PLACEMENT CRITERIA</b>	Foster care placement is governed by the statement of intended use developed by the licensing agency and the license holder. The license holder may decline to accept a foster child without a stated reason. The requirements of parts 2960.0510 to 2960.0530 do not apply if the foster home serves as an emergency shelter home.			
File 1	File 2	File 3	File 4	File 5
2960.0070 Subpart 3. <b>RESIDENT ADMISSION DOCUMENTATION</b>	Upon or within five working days after admission, the license holder must obtain and document the information in items A and B to the extent permitted by law:  A. legal authority for resident placement; and			
File 1	File 2	File 3	File 4	File 5

2960.0070 Subpart 3. <b>RESIDENT ADMISSION DOCUMENTATION</b>	B. in collaboration with the placing agency, gather information about the resident in subitems (1) to (12), and place that information in the resident's file: (1) date and time of admission; (2) name and nicknames; (3) last known address and permanent address; (4) name, address, and telephone number of parents, guardian, and advocate; (5) gender; (6) date and place of birth; (7) race or cultural heritage, languages the resident speaks and writes, and tribal affiliation, if any; (8) description of presenting problems, including medical problems, circumstances leading to admission, mental health concerns, safety concerns including assaultive behavior, and victimization concerns; (9) description of assets and strengths of the resident and, if available, related information from the resident, resident's family, and concerned persons in the resident's life; (10) name, address, and telephone number of the contact person for the last educational program the resident attended, if applicable; (11) spiritual or religious affiliation of the resident and the resident's family; and (12) the placing agency's case plan goals for the resident, if available.					
File 1	File 2	File 3	File 4	File 5		
2960.0070 Subpart 4. <b>INVENTORY AND HANDLING OF RESIDENT PROPERTY</b>	The license holder must inventory the resident's personal property, including clothing, and have the resident and the license holder sign the inventory upon admission. If the resident refuses to sign the inventory, two facility staff must sign the inventory. The license holder must ensure that a resident retain the use and availability of personal funds or property unless restrictions are justified in the resident's treatment plan.  A. The license holder must ensure separation of resident funds from funds of the license holder, the residential program, or program staff. B. Whenever the license holder assists a resident with the safekeeping of funds or other property, the license holder must: (1) document receipt and disbursement of the resident's funds or other property, including the signature of the resident, conservator, or payee; and (2) return to the resident funds and property in the license holder's possession subject to restrictions in the resident's treatment plan, upon request or as soon as possible but not later than three working days after the date of the resident's request. C. License holders and program staff must not: (1) borrow money from a resident; (2) purchase personal items from a resident; (3) sell merchandise, except through a canteen-type service, or sell personal services to a resident; (4) require a resident to buy items for which the license holder is eligible for reimbursement; or (5) use resident funds in a manner that would violate part 9505.0425, subpart 3.					

File 1	File 2	File 3	File 4	File 5
2960.0070 Subpart 5. (A) <b>RESIDENT SCREENING</b>	A resident admitted to a facility must be appropriately screened by a trained person, using screening instruments approved by the commissioner of human services and corrections.  A. The license holder must ensure that the screenings in subitems (1) to (6) are completed if not completed prior to admission. The form used for screening in subitems (1) to (6) must be reviewed by a licensed professional in a related field. (1) The health screening must note the resident's history of abuse and vulnerability to abuse, potential for self-injury, current medications, and most recent physician's and clinic's name, address, and telephone number. -----			
2960.0070 Subpart 5. (C) <b>RESIDENT SCREENING</b>	C. The license holder must screen or arrange to have a resident screened according to the timelines in subitems (1) to (3). (1) The health screening in item A, subitem (1), <i>must occur within 24 hours of admission</i> .			
File 1	File 2	File 3	File 4	File 5
	(2) The mental health screening must be administered. ----- (2) The other screenings in item A, subitems(2) to (6), <i>must begin within three working days of admission</i> , and be completed within six working days of admission.			
File 1	File 2	File 3	File 4	File 5
	(3) The education screening must be administered according to Minnesota Statutes, section 125A.52. ----- (2) The other screenings in item A, subitems(2) to (6), <i>must begin within three working days of admission</i> , and be completed within six working days of admission.			
File 1	File 2	File 3	File 4	File 5
	4) The substance use disorder screening must be administered. The license holder will provide or contact the resident's case manager, if applicable, to arrange a screening to determine if the resident is a chemical abuser. ----- (2) The other screenings in item A, subitems(2) to (6), <i>must begin within three working days of admission</i> , and be completed within six working days of admission.			

File 1	File 2	File 3	File 4	File 5
	<p>(5) The screening for sexually abusive behavior must determine if a resident is likely to have sexually abusive behavior. If the screening indicates that the resident is likely to have sexually abusive behavior, the license holder must have written risk management plans to protect the resident, other residents, staff, and the community.</p> <p>-----</p> <p>(2) The other screenings in item A, subitems(2) to (6), <i>must begin within three working days of admission</i> , and be completed within six working days of admission.</p>			
File 1	File 2	File 3	File 4	File 5
	<p>(6) The vulnerability assessment must determine whether the resident may be vulnerable to abuse.</p> <p>-----</p> <p>(2) The other screenings in item A, subitems(2) to (6), <i>must begin within three working days of admission</i> , and be completed within six working days of admission.</p>			
File 1	File 2	File 3	File 4	File 5
2960.0070 Subpart 5. (B) <b>RESIDENT SCREENING</b>	<p>B. The license holder must make an effort to determine the resident's culture and gender-based needs.</p> <p>(1) Cultural screening must include relevant information about the resident's cultural background that will help the license holder respond to the resident's cultural needs.</p>			
File 1	File 2	File 3	File 4	File 5
	(2) Gender-specific needs screening must identify the psychosocial needs of the resident and identify the resident's needs regarding the gender of the staff.			
File 1	File 2	File 3	File 4	File 5
2960.0070 Subpart 5. (C) <b>RESIDENT SCREENING</b>	<p>(3) The resident need not be screened if a screening or assessment completed within the last six months is already on file. If there is reason to believe that the resident's condition has changed since the last screening or assessment, a new screening must be completed. If the resident is transferred from another facility, the sending facility's records about the resident must be immediately requested by the receiving facility. The requirements in this item do not apply to residents on detention status for less than six working days in a detention facility.</p>			

File 1	File 2	File 3	File 4	File 5
2960.0070 Subpart 5. (D) <b>RESIDENT SCREENING</b>	D. The screenings must include documented inquiries and the results of the inquiries regarding the degree to which the resident's family desires to be involved during the resident's stay at the facility. The resident and resident's family response must be documented.			
2960.0070 Subpart 5. (C) <b>RESIDENT SCREENING</b>	(2) The other screenings in item A, subitems(2) to (6), <i>must begin within three working days of admission</i> , and be completed within six working days of admission.			
File 1	File 2	File 3	File 4	File 5
2960.0070 Subpart 5. (E) <b>RESIDENT SCREENING</b>	E. The license holder must follow the resident's case plan and cooperate with the case manager to: (1) take specific steps to meet the needs of the resident identified by screening and, if needed, request authorization to arrange for the resident's assessment, or medical or dental care or treatment needs, based on the information obtained from the resident's screening; (2) arrange for the resident's transportation to a hospital, if screening indicates the resident's health problems require hospitalization, and the license holder must take the necessary precautions at the facility to ensure the safety of the resident pending transfer to the hospital; (3) contact the case manager or appropriate agency, if screening indicates that the resident needs mental health services. The resident and the resident's legal guardian must be informed of the reasons for action arising from the mental health screening, unless a mental health professional states that they should not be informed of those reasons; and (4) contact the resident's case manager and recommend that a chemical use assessment of the resident be done, if screening indicates that a resident is a chemical abuser or is chemically dependent.			
File 1	File 2	File 3	File 4	File 5
2960.3080 Subpart 2. <b>SCREENING</b>	The license holder must cooperate with the placing agency to ensure that the child's needs are identified and addressed.			
File 1	File 2	File 3	File 4	File 5
2960.3080 Subpart 3. <b>CHILD'S PROPERTY</b>	The foster child must be allowed to bring personal possessions, as agreed upon between the child, the child's parent, the placing agency, and the license holder, to the foster home and must be allowed to accumulate possessions to the extent the home is able to accommodate them.			

File 1	File 2	File 3	File 4	File 5
2960.3080 Subpart 4. <b>INFORMATION ABOUT FOSTER CHILDREN</b>	<p>Before placement or within five days following placement, the placing agency shall give the license holder written information in items A to K about the child:</p> <p><i>A. the child's placement history summary;</i></p> <p><i>B. name and nicknames;</i></p> <p><i>C. date of birth;</i></p> <p><i>D. gender;</i></p> <p><i>E. name, address, and telephone number of the child's parents, guardian, and advocate;</i></p> <p><i>F. race or cultural heritage of the child, including tribal affiliation, if any;</i></p> <p><i>G. description of the child's presenting problems, including medical problems, circumstances leading to placement, mental health concerns, safety concerns including assaultive behavior, and victimization concerns;</i></p> <p><i>H. description of assets and strengths of the child and, if available, related information from the child, child's family, including siblings, and concerned persons in the child's life;</i></p> <p><i>I. name, address, and telephone number of the contact person for the last educational program the child attended, if applicable;</i></p> <p><i>J. spiritual or religious affiliation of the child and the child's family; and</i></p> <p><i>K. information about the child's medication and diet needs and the identities of the child's recent health care providers.</i></p> <p><i>The child's placing agency shall update the information in items A to K as new information becomes available.</i></p>			
File 1	File 2	File 3	File 4	File 5
2960.3080 Subpart 5. <b>COOPERATION REQUIRED</b>	<p>The license holder must cooperate with the child's placing agency according to items A and B.</p> <p>A. The license holder must provide basic services to the child.</p>			
File 1	File 2	File 3	File 4	File 5

	B. The license holder must cooperate with the child's case manager and other appropriate parties to develop and implement the child's case plan during the child's stay in the foster home. The license holder shall cooperate in the following areas: (1) identify and share information, if appropriate, with persons who are directly involved in the child's treatment plan and tell those persons about major treatment outcomes the child will achieve while in the home, including attaining developmentally appropriate life skills that the child needs to become functional in the community; (2) report the child's behaviors and other important information to the placing agency and others as indicated in the child's case plan; (3) recommend changes in the child's case plan to the case manager if needed; (4) give the placing agency additional significant information about the foster child as it becomes known; (5) facilitate the child's school attendance and enroll the child in a local school district or, if appropriate, the child's district of residence; (6) provide a child with timely access to basic, emergency, and specialized medical, mental health, and dental care and treatment services by qualified persons; and (7) maintain a record of illness reported by the child, action taken by the foster parent, and the date of the child's medical, psychological, or dental care.					
File 1	File 2	File 3	File 4	File 5		
2960.0080 Subpart 4. <b>FACILITY RULES AND DUE PROCESS SYSTEM FOR RESIDENTS</b>	The license holder must communicate verbally and in writing to a resident who is capable of understanding the facility's rules and the details of the due process system used in the facility. The rules must address the following topics. A. which behaviors are considered acceptable and unacceptable and the reasons why; B. the consequences that will be applied in recognizing and rewarding acceptable behavior and modifying unacceptable behavior; C. the circumstances, if any, that will result in time-out or the use of a restrictive procedure; D. the due process system that governs the facility's use of disciplinary consequences; and E. the relationship of the resident's individualized education program discipline recommendations, if any, to the facility's discipline plan.					
File 1	File 2	File 3	File 4	File 5		
<b>RESIDENT CASE PLAN</b>						
2960.0050 Subpart 1. <b>BASIC RIGHTS</b>	C. right to participate in development of the resident's treatment and case plan;					
File 1	File 2	File 3	File 4	File 5		

2960.0080 Subpart 3. <b>COOPERATION IN TREATMENT AND BASIC SERVICE DELIVERY</b>	The license holder must cooperate with the resident's case manager and other appropriate parties in creating and delivering basic services. In addition, the license holder must: A. Work with the resident, parent, or legal representative, and the resident's case manager and treatment team, if applicable, to implement the resident's case plan during the resident's stay in the facility. The license holder must also coordinate the license holder's plan for services to the resident with the placing agency's case plan for the resident and work with the placing agency to identify the resident's projected length of stay and conditions under which the family will be reunited, if appropriate, or specify the alternative permanency plan and what the license holder will do to help carry out the plan;				
File 1	File 2	File 3	File 4	File 5	
	B. Identify and share information about the resident's treatment and major treatment outcomes the resident will achieve while in the facility, including attaining developmentally appropriate life skills that the resident needs to have in order to be functional in a family and in the community, with persons who are directly involved in the resident's treatment plan in accordance with the resident's case plan;				
File 1	File 2	File 3	File 4	File 5	
	C. communicate as necessary with the resident's previous school and the school the resident attends while the resident is in the license holder's facility as indicated in the resident's case plan;				
File 1	File 2	File 3	File 4	File 5	
	D. Report the resident's behaviors and other important information to the placing agency and others as indicated in the resident's case plan;				
File 1	File 2	File 3	File 4	File 5	
	E. recommend case plan changes to the placing agency; and				
File 1	File 2	File 3	File 4	File 5	



	F. upon request, unless prohibited by law, share information about the resident, the resident's family, and the license holder's plans and strategies to resolve the resident's identified problems with the placing authority; agencies that are providing services to the resident, resident's therapist, physician, or professional treating the resident; and agencies that must provide services to the resident after discharge from the facility. The records also must be provided to the resident's parent and guardian, if any, and the resident, unless a court or a mental health professional determines that the disclosure would be harmful to the resident. If an authorized person requests a resident's records, or their release is authorized by court order or otherwise provided by law, the license holder must respond to requests for information in three business days.				
File 1	File 2	File 3	File 4	File 5	
2960.0080 Subpart 19. <b>FAMILY INVOLVEMENT</b>	If family involvement is a goal in a resident's case plan, the license holder must list procedures and program plans which are in accordance with a resident's case plan, that facilitate the involvement of the resident's family or other concerned adult, in the resident's treatment or program activities.				
File 1	File 2	File 3	File 4	File 5	
2960.3080 Subpart 6. <b>FOSTER CHILD SERVICES</b>	The license holder must: A. work with the child's placing agency and child's parents to develop a plan to identify and meet a foster child's immediate needs. The license holder must collaborate with the placing agency to provide the basic services to the child;				
File 1	File 2	File 3	File 4	File 5	
	B. encourage age-appropriate activities, exercise, and recreation for the foster child;				
File 1	File 2	File 3	File 4	File 5	
	C. seek consultation or direction from the placing agency if issues arise that cannot be resolved between the license holder and the foster child;				
File 1	File 2	File 3	File 4	File 5	
	D. explain house rules and tell the foster child about the license holder's expectations about behavior, the care of household items, and the treatment of others; and				

File 1	File 2	File 3	File 4	File 5
	E. know the whereabouts of the child in the license holder's care. The license holder must be guided by the case plan or court order in determining how closely to supervise the child. The license holder must immediately notify the placing agency if the child runs away or is missing.			
File 1	File 2	File 3	File 4	File 5
<b>RESIDENT DISCHARGE AND AFTERCARE</b>				
2960.0090 Subpart 2 <b>NO EJECT POLICY</b>	A license holder must have a written no eject policy. Before discharging a resident who has not reached the resident's case plan goals, or treatment plan goals for a resident who has a treatment plan, the license holder must confer with other interested persons to review the issues involved in the decision. During this review process, which must not exceed five working days, the license holder must determine whether the license holder, treatment team, interested persons, if any, and the resident can develop additional strategies to resolve the issues leading to the discharge and to permit the resident an opportunity to continue to receive services from the license holder. If the review indicates that the decision to discharge is warranted, the reasons for it and the alternatives considered or attempted must be documented. A resident may be temporarily removed from the facility during the five-day review period. This subpart does not apply to a resident removed by the placing authority or a parent or			
File 1	File 2	File 3	File 4	File 5
2960.0090 Subpart 3 <b>RETURN OF RESIDENT PROPERTY</b>	The license holder must return all of the resident's personal property to the resident along with a signed receipt upon discharge, unless prohibited to do so by law or case plan. Discrepancies between the resident's inventoried property turned over to the facility at admission and the property returned to the resident at discharge, and the resolution of the discrepancy, must be documented by facility staff.			
File 1	File 2	File 3	File 4	File 5
2960.3080 Subpart 11. <b>DISCHARGE</b>	The license holder must work with the child's placing agency to ensure a planned discharge and compliance with Minnesota Statutes, section 260C.212, subdivision 3. Before an unplanned discharge, the license holder must confer with other interested persons to review the issues involved in the decision. During this review process, which must not exceed 30 days, the license holder must determine whether the license holder, treatment team, if any, interested persons, and the child can develop additional strategies to resolve the issues leading to the discharge and to permit the child an opportunity to continue to receive services from the license holder. If the review indicates that the decision to discharge is warranted, the reasons for it and the alternatives considered or attempted must be <b>documented</b> . A child may be temporarily removed from the foster home during the review period if the child is a danger to self or others. This subpart does not apply to a child removed by the placing authority or a parent or guardian.			

File 1	File 2	File 3	File 4	File 5
<b>RECORD RETENTION</b>				
2960.0080 Subpart. 11. <b>HEALTH AND HYGIENE SERVICES</b>	B. The license holder must maintain a record of the illness reported by the resident, the action taken by the license holder, and the date of the resident's medical, psychological, or dental care.			
File 1	File 2	File 3	File 4	File 5
	D. The license holder, in consultation with a medically licensed person, must have a plan for the safe storage and delivery of medicine. The license holder must meet the requirements in subitems (1) to (5). (1)The license holder must contact a newly admitted resident's prescribing medically licensed person to verify the following information regarding prescribed medication: (a) instructions about how the medication must be administered; (b) the symptoms that the medication will alleviate; and (c) the symptoms that would warrant consultation with the physician.			
File 1	File 2	File 3	File 4	File 5
	D. (2)The license holder must document attempts to contact the child's parent or guardian to seek permission for the facility to administer the medication. If permission is denied and the parent has the legal right to deny permission, then the medication will be discontinued under the supervision of a physician unless a court order to administer the medication is obtained.			
File 1	File 2	File 3	File 4	File 5
	D. (3)The license holder must maintain at the facility a list of the side effects of medication at the facility.			
File 1	File 2	File 3	File 4	File 5
	D. (4)The license holder must document and follow the prescribing physician's directions for monitoring medications used by the resident.			
File 1	File 2	File 3	File 4	File 5

	D. (5) A medically licensed person must provide consultation and review of the license holder's administration of medications at least monthly.					
File 1	File 2	File 3	File 4	File 5		
	E. The license holder must keep records for a resident who receives prescription drugs at the facility and note: the quantity initially received from the pharmacy, amount of medication given, dosage, and time when the medication was taken. The license holder must document a resident's refusal to take prescription medication.					
File 1	File 2	File 3	File 4	File 5		
	F. Prescription medicine belonging to a resident must be given to the resident's parent or legal guardian upon the resident's release or must be disposed of according to a pharmacy-approved plan. The license holder must note the disposition of the resident's medicine in the resident's file. The license holder must give a resident who is 18 years of age or older the prescription medication prescribed for the resident.					
File 1	File 2	File 3	File 4	File 5		
2960.3100 Subpart 2. <b>FOSTER CHILD RECORDS</b>	The license holder must keep a record for each foster child in care. The record must include the child's medical records, which includes records of illnesses and medical care provided to the child; grievance records, including <u>documentation</u> of the grievance resolution; and other <u>documentation</u> as required by the child's case plan.					
File 1	File 2	File 3	File 4	File 5		
2960.3230 Subpart 1. <b>COMMUNICATION PLAN</b>	The license holder must have a communication plan that ensures that all important information about a child is communicated to the license holder and staff. At a minimum, the communication plan must ensure that: A. updated information about the child's needs, condition, care plan changes, medications, incidents, and other information which affects the health and safety of the child is <u>documented</u> and made available to staff and other persons who care for the child; and B. staff who help the child meet care plan and treatment plan goals are given the information needed to carry out the staff's					
File 1	File 2	File 3	File 4	File 5		

Applicable Rule or Statute	Requirements				(Y)or(N)	Notes	37
2960.3230 Subpart 2. <b>DOCUMENTATION</b>	A license holder must: A. maintain and make available to the commissioner of human services or corrections sufficient <u>documentation</u> to verify that all requirements of the rules governing the care of the child have been met; B. keep and share the child's records according to the requirements of statute; and C. collect demographic information about children and their families and outcome measures about the success of services that meet the requirements of Laws 1995, chapter 226, article 3,section 60, subdivision 2, clause (1)(iii).						
File 1	File 2	File 3	File 4	File 5			

FACILITY TOUR					
Applicable Rule or Statute	REQUIREMENTS			Met (Y) Not (N)	NOTES
PHYSICAL ENVIORNMENT AND EQUIPMENT					

2960.0110 Subpart 1. <b>PHYSICAL ENVIRONMENT AND EQUIPMENT</b>	The facility must be equipped and maintained in a manner that conforms to its statement of intended use.		
2960.0110 Subpart 2. <b>COMFORT, PRIVACY, AND DIGNITY</b>	The physical environment must provide for the comfort, privacy, and dignity of residents.		
2960.0110 Subpart 3. <b>ADEQUATE FACILITIES FOR SERVICES</b>	A. The license holder must ensure that food services, storage, housekeeping, laundry, and maintenance are operated on a consistent, healthy basis. B. If food service is contracted to a food service vendor, the food service vendor must meet health code requirements. C. If the license holder provides educational services on site, the classrooms must provide an atmosphere that is conducive to learning and meets the resident's special physical, sensory, and emotional needs. D. The license holder must provide adaptive equipment and furnishings to meet the resident's special needs.		
2960.0110 Subpart 4. <b>FIRST AID KITS</b>	A facility must have first aid kits readily available for use by residents and staff. The kits must be sufficient to meet the needs of residents and staff.		
2960.0120 Subpart 2. <b>CODE COMPLIANCE</b>	A facility must comply with the applicable fire, health, zoning, and building codes and meet the physical plan and equipment requirements in items A to I. A. A sleeping room must not be used to accommodate more than four residents. Multibed bedrooms must provide a minimum of 60 square feet per resident of useable floor space with three feet between beds placed side by side and one foot between beds placed end to end for ambulatory residents. For nonambulatory residents, the multibed bedrooms must provide 80 square feet per resident of useable floor space. B. A resident must have adequate space for clothing and personal possessions, with appropriate furnishings to accommodate these items. C. Facility grounds must provide adequate outdoor space for recreational activities. D. There must be one shower or bathtub and sink with hot and cold water and one toilet for every eight residents. E. The heating plant must be of a size and capacity to maintain a comfortable temperature in all resident rooms and other areas of the facility used by residents. F. The facility must have sufficient electric lighting in combination with natural lighting to provide reasonable light levels for the function of each given area. G. The facility must have sufficient space provided for indoor quiet and group program activities. H. The facility providing educational services on site must meet the physical plant and equipment requirements of the Department of Education for the provision of educational services. I. A facility providing intake or admission services must have sufficient space to conduct intake functions in a private, confidential manner or provide the opportunity to conduct private meetings, including intake activities in a separate space.		
<b>HOUSING UNITS/STAFF WORK STATION</b>			
2960.0050 Subpart 1. <b>BASIC RIGHTS</b>	A. right to reasonable observance of cultural and ethnic practice and religion;		
	B. right to a reasonable degree of privacy;		
	C. right to participate in development of the resident's treatment and case plan;		
	D. right to positive and proactive adult guidance, support, and supervision;		
	E. right to be free from abuse, neglect, inhumane treatment, and sexual exploitation;		

F. right to adequate medical care;
G. right to nutritious and sufficient meals and sufficient clothing and housing;
H. right to live in clean, safe surroundings;
I. right to receive a public education;
J. right to reasonable communication and visitation with adults outside the facility, which may include a parent, extended family
K. right to daily bathing or showering and reasonable use of materials, including culturally specific appropriate skin care and hair care products or any special assistance necessary to maintain an acceptable level of personal hygiene;
L. right of access to protection and advocacy services, including the appropriate state-appointed ombudsman;
M. right to retain and use a reasonable amount of personal property;
N. right to courteous and respectful treatment;
O. if applicable, the rights stated in Minnesota Statutes, sections 144.651 and 253B.03;
P. right to be free from bias and harassment regarding race, gender, age, disability, spirituality, and sexual orientation;
Q. right to be informed of and to use a grievance procedure;
S. for a facility licensed by the commissioner of corrections, right to be free from: (1) restraint used for a purpose other than to protect the resident from imminent danger to self or others; and (2) safety-based separation used for a purpose other than in accordance with this chapter and Minnesota Statutes, section 241.0215, subdivision 4.

2960.0050 Subpart 3. C  
**BASIC RIGHTS INFORMATION**

A copy of the resident's rights must be posted in an area of the facility where it can be readily seen by staff and the resident.

2960.0050 Subpart 3.D  
**BASIC RIGHTS INFORMATION**

A copy of the resident's rights must be posted in the staff work station.

2960.0050 Subpart 3.E  
**BASIC RIGHTS INFORMATION**

The license holder must inform residents how to contact the appropriate state-appointed ombudsman and give residents the name, address, and telephone number of the state-appointed ombudsman.

2960.0080 Subpart. 6.  
**DAILY RESIDENT ACTIVITIES**

The license holder must develop a written schedule of daily activities that generally describes the resident's activities for each day of the week.

The license holder must know the whereabouts of each resident.

The license holder must immediately notify the referring or placing agency if a resident runs away or is missing.

2960.0080 Subpart. 13.  
**RESIDENT CLOTHING, BEDDING,  
AND LAUNDRY**

The license holder must ensure that a resident has:

A. an adequate amount of clean clothing appropriate for the season;

B. an appropriate sized, clean, fire-retardant mattress; two sheets or one sheet and clean mattress cover; sufficient clean blankets to provide comfort under existing temperature conditions; and one pillow and one pillowcase that is antiallergenic, if required, to meet a resident's health care needs. Existing non-fire-retardant mattresses may continue to be used until they are replaced, provided that the existing mattresses are replaced no later than July 1, 2015; and

C. adequate bath towels and washcloths. Clean bedding and linens must be furnished upon each new admission, and bedding and linens must be cleaned once a week or more often as needed to maintain a clean and safe environment. Bedding and linens that are worn out or unfit for further use must not be used.

## PROGRAM SPACE

2960.0050 Subpart 1.  
**BASIC RIGHTS**

A. right to reasonable observance of cultural and ethnic practice and religion;

I. right to receive a public education;

J. right to reasonable communication and visitation with adults outside the facility, which may include a parent, extended family

L. right of access to protection and advocacy services, including the appropriate state-appointed ombudsman;

2960.0080 Subpart. 10.  
**EXERCISE AND RECREATION**

The license holder must develop and implement a plan that offers **appropriate recreation** for residents.

## INTAKE

2960.0050 Subpart 1.  
**BASIC RIGHTS**

P. right to be free from bias and harassment regarding race, gender, age, disability, spirituality, and sexual orientation;

Q. right to be informed of and to use a grievance procedure;

## MEDICAL

2960.0050 Subpart 1.  
**BASIC RIGHTS**

F. right to adequate medical care;

O. if applicable, the rights stated in Minnesota Statutes, sections 144.651 and 253B.03;

2960.0080 Subpart. 11.  
**HEALTH AND HYGIENE SERVICES**

The license holder must meet the conditions in items A to F.

A. The license holder must provide a resident with timely access to basic, emergency, and specialized medical, mental health, and dental care and treatment services by qualified persons that meet the resident's needs. The license holder's health services plan must include the requirements in subitems (1) to (3).

(1)A pregnant resident must receive ongoing and appropriate prenatal care from a medically licensed person. The license holder must provide information and resources on prenatal, postnatal, and parenting topics to a pregnant resident.

(2)The license holder must ensure that appropriate medical and dental services are provided for the resident. The license holder must comply with the requirements of the medical or dental insurance that covers the resident.

(3)The license holder must consider a resident's request for a male or female health care provider. If a female resident requests a female health care provider, and one is not available, the license holder must request permission from the health care provider that an adult female be allowed to be present during the health care procedure. If a male resident requests a male health care provider, and one is not available, the license holder must request permission from the health care provider that an adult male be allowed to be present during the health care procedure.

B. The license holder must maintain a record of the illness reported by the resident, the action taken by the license holder, and the date of the resident's medical, psychological, or dental care.

C. Maintaining stock supplies of prescription drugs at the facility is prohibited.



D. The license holder, in consultation with a medically licensed person, must have a plan for the safe storage and delivery of medicine. The license holder must meet the requirements in subitems (1) to (5).

(1)The license holder must contact a newly admitted resident's prescribing medically licensed person to verify the following information regarding prescribed medication:

- (a) instructions about how the medication must be administered;
- (b) the symptoms that the medication will alleviate; and
- (c) the symptoms that would warrant consultation with the physician.

(2)The license holder must document attempts to contact the child's parent or guardian to seek permission for the facility to administer the medication. If permission is denied and the parent has the legal right to deny permission, then the medication will be discontinued under the supervision of a physician unless a court order to administer the medication is obtained.

(3)The license holder must maintain at the facility a list of the side effects of medication at the facility.

(4)The license holder must document and follow the prescribing physician's directions for monitoring medications used by the resident.

(5)Facility staff responsible for medication assistance, other than a medically licensed person, must have a certificate verifying their successful completion of a trained medication aide program for unlicensed personnel offered through a postsecondary institution, or staff must be trained to provide medication assistance according to a formalized training program offered by the license holder and taught by a registered nurse. The specific medication assistance training provided by the registered nurse to staff must be documented and placed in the unlicensed staff person's personnel records. **A medically licensed person must provide consultation and review of the license holder's administration of medications at least monthly. (res file)**

E. The license holder must keep records for a resident who receives prescription drugs at the facility and note: the quantity initially received from the pharmacy, amount of medication given, dosage, and time when the medication was taken. The license holder must document a resident's refusal to take prescription medication.

F. Prescription medicine belonging to a resident must be given to the resident's parent or legal guardian upon the resident's release or must be disposed of according to a pharmacy-approved plan. The license holder must note the disposition of the resident's medicine in the resident's file. The license holder must give a resident who is 18 years of age or older the prescription medication prescribed for the resident.

## KITCHEN

2960.0050 Subpart 1.

### BASIC RIGHTS

G. right to nutritious and sufficient meals and sufficient clothing and housing;

2960.0080 Subpart. 12.

### FOOD AND NUTRITION

The license holder must provide:

- A. a balanced diet consisting of foods and beverages that are palatable, of adequate quantity and variety, and prepared and served at appropriate temperatures to protect residents from foodborne illness and conserve nutritional value;
- B. a diet medically prescribed, if ordered by a resident's physician or, in the case of a pregnant resident, recommended or ordered by a prenatal care provider; and
- C. a diet that does not conflict with the resident's religious or cultural dietary regimen.