

GUIDELINES FOR DEVELOPING POLICIES AND PROCEDURES FOR ADULT DAY CENTERS (Rule 223 programs)

Each of the required policies identified below is an individual document that must contain all items specified. Each policy is required to be submitted to the Department of Human Services (DHS) – Division of Licensing before a license application will be processed.

Pursuant to Minnesota Statutes, section 245A.04, subdivision 14, all required policies and procedures must be indexed with a table of contents or another method approved by the commissioner and must be readily accessible to staff. The license holder is responsible to provide training to program staff related to their duties in implementing the program's policies and procedures. The staff training must be documented and the license holder shall monitor implementation of the program's policies and procedures.

I. POLICY AND PROGRAM INFORMATION REQUIREMENTS – requirements found in Minnesota Rules, part 9555.9640, items A to N.

A center shall have available for review and shall distribute to participants and their caregivers upon admission written information about the points in items A to N:

- A. the scope of the programs, services, and care offered by the center;
- B. a description of the population to be served by the center;
- C. a description of individual conditions which the center is not prepared to accept, such as a communicable disease requiring isolation, a history of violence to self or others, unmanageable incontinence or uncontrollable wandering;
- D. the participants' rights developed in accordance with part 9555.9670 and additionally:
 - (1) a procedure for presenting grievances, including the name, address, and telephone number of the licensing division of the department, to which a participant or participant's caregiver may submit an oral or written complaint;
 - (2) a copy or written summary of Minnesota Statutes, section 626.557, the Vulnerable Adults Act;
- E. the center's policy on and arrangements for providing transportation;
- F. the center's policy on providing meals and snacks;

- G. the center's fees, billing arrangements, and plans for payment;
- H. the center's policy governing the presence of pets in the center;
- I. the center's policy on smoking in the center;
- J. types of insurance coverage carried by the center;
- K. a statement of the center's compliance with Minnesota Statutes, section 626.557, and rules adopted under that section;
- L. a statement that center admission and employment practices and policies comply with Minnesota Statutes, chapter 363, the Minnesota Human Rights Act;
- M. the terms and conditions of the center's licensure by the department, including a description of the population the center is licensed to serve under part 9555.9730; and
- N. the telephone number of the department's licensing division (651-431-6500).

The information in items A to N must be provided in writing to the commissioner upon request and must be available for inspection by the commissioner at the center.

II. PARTICIPANTS' RIGHTS - requirements found in Minnesota Rules, part 9555.9670, items A to E.

A center shall adopt and hold employees accountable for complying with a participant's bill of rights. The rights shall include:

- A. the right to participate in developing one's own plan of care;
- B. the right to refuse care or participation;
- C. the right to physical privacy during care or treatment;
- D. the right to confidentiality of participant records; and
- E. the right to present grievances regarding treatment or care in accordance with part 9555.9640, item D.

III. RIGHT TO CONTEST – requirements found in Minnesota Rules, part 9555.9660, subpart 3.

The center shall provide each participant with written notice ensuring that each participant or participant's guardian or caregiver has been informed of the participant's right to contest the accuracy and completeness of the data maintained in the record.

IV. MEDICAL EMERGENCIES – requirements found in Minnesota Rules, part 9555.9720, subpart 10.

The center shall have written procedures governing medical emergencies and an identified source of emergency medical care and transportation that is made known to all staff members and volunteers.

V. EMERGENCIES CAUSED BY FIRE AND WEATHER – requirements found in Minnesota Rules, part 9555.9720, subpart 9, items A to I.

The center shall have written plans for emergencies caused by fire, blizzards, and tornadoes. The plans must be posted in a visible place and be on file in the center. The plans must include items A to I:

- A. the responsibilities each staff person will assume in case of emergency;
- B. identification of primary and secondary exits;
- C. identification of building evacuation routes;
- D. identification of an emergency shelter area within the center;
- E. instructions for evacuating or rescuing participants;
- F. instructions for calling the fire department and emergency phone numbers;
- G. procedures for the quarterly fire drill;
- H. instructions on location and use of fire extinguishers; and
- I. instructions on closing off the fire area.

The fire escape plan must be rehearsed at least four times each year and the dates of rehearsals must be recorded in the file of emergency plans.

VI. HEALTH SERVICES – requirements found in Minnesota Rules, part 9555.9710, subpart 3, items A to E.

The center shall offer health services developed in consultation with a registered nurse. A registered nurse shall provide consultation and review of the health services at least monthly. Health services must include:

- A. monitoring participants' health status and reporting changes to the participant's caregiver and physician and the center director;
- B. educating and counseling participants on good health practices;
- C. maintaining a listing of professional health resources available for referrals as needed by participants;
- D. developing policies and monitoring procedures for participant self administration of medications for training unlicensed personnel who provide medication assistance; and
- E. supervising staff distribution of medication and assistance with participant self administration of medication and ensuring compliance with part 9555.9680, subpart 2, item C.

VII. PROGRAM DRUG AND ALCOHOL POLICY – requirements found in Minnesota Statutes, section, 245A.04, subdivision 1, paragraph (c).

An applicant or license holder must have a policy that prohibits license holders, employees, subcontractors, and volunteers, when directly responsible for persons served by the program, from abusing prescription medication or being in any manner under the influence of a chemical that impairs the individual's ability to provide services or care. The license holder must train employees, subcontractors, and volunteers about the program's drug and alcohol policy.

VIII. PROGRAM ABUSE PREVENTION PLAN – requirements found in Minnesota Statutes, section 245A.65, subdivision 2; and section 626.557, subdivision 14.

All license holders shall establish and enforce ongoing written program abuse prevention plans and individual abuse prevention plans as required under section 626.557, subdivision 14.

Program Abuse Prevention Plan – Minnesota Statutes, section 245A.65, subdivision 2, paragraph (a); and section 626.557, subdivision 14, paragraph (a)

Minnesota Statutes, section 626.557, subdivision 14, paragraph (a) – Each facility shall establish and enforce an ongoing written abuse prevention plan. The plan shall contain

an assessment of the physical plant, its environment, and its population identifying factors which may encourage or permit abuse, and a statement of specific measures to be taken to minimize the risk of abuse.

Minnesota Statutes, section 245A.65, subdivision 2, paragraph (a) – All license holders shall establish and enforce ongoing written program abuse prevention plans and individual abuse prevention plans as required under section 626.557, subdivision 14.

(a) The scope of the program abuse prevention plan is limited to the population, physical plant, and environment within the control of the license holder and the location where licensed services are provided. In addition to the requirements in section 626.557, subdivision 14, the program abuse prevention plan shall meet the requirements in clauses (1) to (5).

(1) Population assessment. The assessment of the population shall include an evaluation of the following factors: age, gender, mental functioning, physical and emotional health or behavior of the client; the need for specialized programs of care for clients; the need for training of staff to meet identified individual needs; and the knowledge a license holder may have regarding previous abuse that is relevant to minimizing risk of abuse for clients.

(2) Physical plant assessment. The assessment of the physical plant where the licensed services are provided shall include an evaluation of the following factors: the condition and design of the building as it relates to the safety of the clients; and the existence of areas in the building which are difficult to supervise.

(3) Environment assessment. The assessment of the environment for each facility and for each site when living arrangements are provided by the agency shall include an evaluation of the following factors: the location of the program in a particular neighborhood or community; the type of grounds and terrain surrounding the building; the type of internal programming; and the program's staffing patterns.

(4) The license holder shall provide an orientation to the program abuse prevention plan for clients receiving services. If applicable, the client's legal representative must be notified of the orientation. The license holder shall provide this orientation for each new person within 24 hours of admission, or for persons who would benefit more from a later orientation, the orientation may take place within 72 hours.

(5) The license holder's governing body shall review the plan at least annually using the assessment factors in the plan and any substantiated maltreatment findings that occurred since the last review. The governing body shall revise the plan, if necessary, to reflect the review results.

(6) A copy of the program abuse prevention plan shall be posted in a prominent location in the program and be available upon request to mandated reporters, persons receiving services, and legal representatives.

IX. MALTREATMENT OF VULNERABLE ADULTS – requirements found in Minnesota Statutes, chapter 245A.65 and 626.557.

To meet these requirements, it is recommended that you use the sample policy titled “Maltreatment of Vulnerable Adults Reporting Policy for DHS Licensed Programs” available in the online adult day center form list on the DHS-Licensing website. It is recommended that you use this form as a template to develop your mandated reporting policy. When using this sample form, you must individualize your mandated reporting policy by filling in the blanks with information specific to your program.

Minnesota Statutes, section 245A.65 - All license holders serving vulnerable adults shall establish and enforce written policies and procedures related to suspected or alleged maltreatment, and shall orient clients and mandated reporters who are under the control of the license holder to these procedures, as defined in section 626.5572, subdivision 16.

(a) License holders must establish policies and procedures allowing but not mandating the internal reporting of alleged or suspected maltreatment. License holders shall ensure that the policies and procedures on internal reporting:

(1) meet all the requirements identified for the optional internal reporting policies and procedures in section 626.557, subdivision 4a; and

(2) identify the primary and secondary person or position to whom internal reports may be made and the primary and secondary person or position responsible for forwarding internal reports to the common entry point as defined in section 626.5572, subdivision 5. The secondary person must be involved when there is reason to believe that the primary person was involved in the alleged or suspected maltreatment.

(b) The license holder shall:

(1) establish and maintain policies and procedures to ensure that an internal review is completed and that corrective action is taken as necessary to protect the health and safety of vulnerable adults when the facility has reason to know that an internal or external report of alleged or suspected maltreatment has been made. The review must include an evaluation of whether related policies and procedures were followed, whether the policies and procedures were

adequate, whether there is a need for additional staff training, whether the reported event is similar to past events with the vulnerable adults or the services involved, and whether there is a need for corrective action by the license holder to protect the health and safety of vulnerable adults. Based on the results of this review, the license holder must develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by individuals or the license holder, if any.

(2) identify the primary and secondary person or position who will ensure that, when required, internal reviews are completed. The secondary person shall be involved when there is reason to believe that the primary person was involved in the alleged or suspected maltreatment; and

(3) document and make internal reviews accessible to the commissioner upon the commissioner's request. The documentation provided to the commissioner by the license holder may consist of a completed checklist that verifies completion of each of the requirements of the review.

(c) The license holder shall provide an orientation to the internal and external reporting procedures to all persons receiving services. The orientation shall include the telephone number for the license holder's common entry point as defined in section 626.5572, subdivision 5. If applicable, the person's legal representative must be notified of the orientation. The program shall provide this orientation for each new person within 24 hours of admission, or for persons who would benefit more from a later orientation, the orientation may take place within 72 hours.

(d) The license holder shall post a copy of the internal and external reporting policies and procedures, including the telephone number of the common entry point as defined in section 626.5572, subdivision 5, in a prominent location in the program and have it available upon request to mandated reporters, persons receiving services, and the person's legal representatives.

X. ALZHEIMER'S DISEASE OR RELATED DISORDER – requirements found in Minnesota Statutes, section 245A.04, subdivision 12.

If an adult day care facility markets or otherwise promotes services for persons with Alzheimer's disease or related disorders, the facility's direct care staff and their supervisors must be trained in dementia care.

Areas of required training include:

- (1) an explanation of Alzheimer's disease and related disorders;
- (2) assistance with activities of daily living;
- (3) problem solving with challenging behaviors; and
- (4) communication skills.

The facility shall provide to consumers in written or electronic form a description of the training program, the categories of employees trained, the frequency of training, and the basic topics covered.