

Home Safety Checklist

For Community Residential Settings

Community Residential Setting (CRS) – The fire marshal inspection of a community residential setting must verify the residence is a dwelling unit within a residential occupancy as defined in section 9.117 of the State Fire Code. A home safety checklist, approved by the commissioner, must be completed for a community residential setting by the license holder and the commissioner before the satellite license is reissued. Reference Minnesota Statutes, section 245D.21, Subdivision 2 (2).

Name of License Holder/Program: _____

Emergency Procedures

The following items must be posted and/or readily accessible in a prominent location in a common area of the home where they can be easily observed by a person responding to an incident:

- Yes No 1. A list of emergency phone numbers. (reference 245D.22, subdivision 7)
- Yes No 2. A non-coin operated telephone.
- Yes No 3. A written plan for responding to emergencies to assure the safety of persons served in the facility. (reference 245D.22, subdivision 5)
- Yes No 4. A flashlight and a portable radio or television set that does not require electricity.
- Yes No 5. A first aid kit that meets the needs of persons receiving services and staff.

Physical Environment

- Yes No 1. The interior and exterior of buildings, structures, or enclosures used by the facility are maintained in good repair and in a sanitary and safe condition.
- Yes No 2. The facility is clean and free from accumulations of dirt, grease, garbage, peeling paint, mold, vermin and insects.
- Yes No 3. Extension cords are not used in place of permanent wiring.
- Yes No 4. A fire extinguisher with a minimum rating of 2A:10BC is maintained in the facility.
- Yes No 5. All smoke detectors are properly installed, appropriately located, and maintained in proper operating condition.
- Yes No 6. Interior and exterior runways, stairways, and ramps have handrails and nonslip surfaces.
- Yes No 7. Stairways, ramps, and corridors are free of obstructions.
- Yes No 8. Outside property is free from debris and safety hazards. Exterior stairs and walkways are free of ice and snow.
- Yes No 9. Heating, ventilation, air conditioning units, and other hot surfaces and moving parts of machinery are shielded or enclosed.
- Yes No 10. If there are elevators in the facility, inspections must be completed and documented annually.
- N/A
(no elevators)

Home Safety & Health

- Yes No 1. Individual clean bed linens appropriate for the season and the person's comfort including towels and wash cloths, are available for each person.
- Yes No 2. Personal health and hygiene items are stored in a safe and sanitary manner.
- Yes No 3. Communally used usual or customary goods for persons receiving services are provided by the license holder, including household items for meal preparation, cleaning supplies, window coverings for privacy, toilet paper, and hand soap.
- Yes No 4. Food is obtained, handled and properly stored to prevent contamination, spoilage, or a threat to the health of a person.
- Yes No 5. Chemicals, detergents, and other hazardous or toxic substances are not stored with food products or in any way that poses a hazard to persons receiving services.
- Yes No 6. Schedule II controlled substances are stored in a locked storage area permitting access only by persons and staff authorized to administer the medication.
 N/A
(no Schedule II controlled substances)
- Yes No 7. There is a safe water supply in the residence. Water from privately-owned wells is tested annually by a Department of Health-certified laboratory.
- Yes No 8. The water temperature of faucets do not exceed 120 degrees Fahrenheit to prevent scalding.
- Yes No 9. Weapons and ammunition are stored separately in locked areas that are inaccessible to a person receiving services. Weapons include firearms and other instruments or devices designed for and capable of producing bodily harm.
 N/A
(no weapons)
- Yes No 10. License holder complies with the requirements of the Minnesota Clean Indoor Air Act when smoking is permitted in the residence.
 N/A
(no smoking permitted)
- Yes No 11. Pets and service animals housed within the residence must be immunized and maintained in good health.
 N/A
(no pets)

Comments/explanation for no responses and obvious safety hazards or concerns:

PROVIDER SIGNATURE	DATE
LICENSING WORKER	DATE

This is the Home Safety Checklist approved by the commissioner and items on it may not be deleted or altered. Refer to Minnesota Statutes, section 245D.21, Subdivision 2 (2).