## 4665.0200 AUTHORITY AND PURPOSE.

Subpart 1. **Authority.** Minnesota Statutes 1971, sections 245.78, 252.28, and 257.081 to 257.123 provide for regulation by the Department of Human Services of residential facilities and services for persons with certain disabilities. The statute permits the incorporation of rules suggested by the commissioner of health.

These rules have been developed pursuant to a cooperative agreement with the Minnesota Department of Human Services, under which the Department of Human Services regulates the habilitative, rehabilitative, and social service programs provided to residents of these facilities and the commissioner of health, under provisions of Minnesota Statutes 1971, section 144.56 (Standards), establishes a supervised living facility (SLF) as a facility, licensed by both the Minnesota Department of Health and the Minnesota Department of Human Services, in which appropriate programs and services are provided. These rules establish minimum standards as to the construction, equipment, maintenance, and operation of supervised living facilities insofar as they relate to sanitation and safety of the buildings, and to the health, treatment, comfort, safety, and well-being of the persons accommodated for care, except for standards of the Department of Public Safety, which has the exclusive jurisdiction to enforce state fire and safety standards.

Subp. 2. **Purpose.** The purpose of a supervised living facility is to provide a residential, home-like setting for persons who are developmentally disabled, adult mentally ill, chemically dependent, or physically disabled and who are able to live safely under supervision provided through programs licensed by the Department of Human Services.

Supervised living facilities are facilities in which certain services are provided. Among these services are the provision of meals, lodging, housekeeping services, health services, and other services, provided either by staff or by residents under supervision, but in all cases, in accordance with sanitary standards which must be observed in a group situation to prevent the creation of unsanitary conditions which endanger the health of individual residents and staff.

Subp. 3. **Evaluation.** Of concern to the commissioner of health is that residents are provided appropriate services in a safe, sanitary, and healthful setting. Germane to this concern is the necessity for a procedure which will effectively ascertain at the time of admission of the resident and periodically thereafter, that persons admitted to a supervised living facility are persons who have disabilities that prevent or limit independent living, but who are not in need of continuing medical or nursing care. This procedure is implemented through program licensure by the Minnesota Department of Human Services.

Individualized ongoing evaluation is provided through licensed programs to help each resident reach the resident's maximum level of functional capabilities. Periodic evaluation of residents by representatives of the commissioner of health are made to assure that the

needs of the residents do not exceed these services which the licensee is authorized to provide.

Subp. 4. **Services.** Supervised living facilities may, but are not required to provide treatment, educational training, personal care, or sheltered workshop services on a 24 hour-a-day basis. Some of these services may be provided to residents either by having the service brought into the facility or by assuring that the resident receives appropriate services elsewhere.

The range of services required by residents of supervised living facilities includes services for persons who are dependent for reasons other than degenerative processes of aging as well as services for persons young or old, who are living and working in the community or are in transition from residential to independent community life.

- Subp. 5. **Licensure.** In all cases, only those facilities will receive and retain licensure as supervised living facilities that can demonstrate to the satisfaction of the commissioner of health that:
- A. functional services are provided in safe, healthful, and sanitarily operated and maintained buildings; and
- B. only those persons are accepted as residents whose needs can be met by the facility directly or in cooperation with other resources with which there is evidence of acceptable agreements or arrangements.

**Statutory Authority:** MS s 144.56

**History:** L 1977 c 305 s 39; L 1984 c 654 art 5 s 58; 17 SR 1279; L 2005 c 56 s 2

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