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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETY-FOURTH SESSION

H. F. No. 3935

03/05/2026 Authored by Klevorn, Noor, Acomb, Hicks, Johnson, P., and others
The bill was read for the first time and referred to the Committee on Human Services Finance and Policy

1.1 A bill for an act
1.2 relating to health; modifying policies and procedures required at assisted living
1.3 facilities; modifying training requirements for unlicensed personnel at assisted
1.4 living facilities; amending Minnesota Statutes 2024, sections 144G.31, subdivision
1.5 7; 144G.41, subdivisions 1, 2; 144G.61, subdivision 2.

1.6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.7 Section 1. Minnesota Statutes 2024, section 144G.31, subdivision 7, is amended to read:

1.8 Subd. 7. Additional penalties. In addition to any fine imposed under this section, the
1.9 commissioner may:

1.10 (1) assess a penalty amount based on costs related to an investigation that results in a
1.11 final order assessing a fine or other enforcement action authorized by this chapter; and

1.12 (2) increase a fine if the violation results in serious injury or death and the commissioner
1.13 determines the licensee's conduct was sufficiently egregious to warrant an increase,
1.14 notwithstanding the fine amount provided in subdivision 4, paragraph (a), clause (5).

1.15 Sec. 2. Minnesota Statutes 2024, section 144G.41, subdivision 1, is amended to read:

1.16 Subdivision 1. Minimum requirements. All assisted living facilities shall:

1.17 (1) distribute to residents the assisted living bill of rights;

1.18 (2) provide services in a manner that complies with the Nurse Practice Act in sections
1.19 148.171 to 148.285;

1.20 (3) utilize a person-centered planning and service delivery process;

2.1 (4) have and maintain a system for delegation of health care activities to unlicensed
2.2 personnel by a registered nurse, including supervision and evaluation of the delegated
2.3 activities as required by the Nurse Practice Act in sections 148.171 to 148.285;

2.4 (5) provide a means for residents to request assistance for health and safety needs 24
2.5 hours per day, seven days per week;

2.6 (6) allow residents the ability to furnish and decorate the resident's unit within the terms
2.7 of the assisted living contract;

2.8 (7) permit residents access to food at any time;

2.9 (8) allow residents to choose the resident's visitors and times of visits;

2.10 (9) allow the resident the right to choose a roommate if sharing a unit;

2.11 (10) notify the resident of the resident's right to have and use a lockable door to the
2.12 resident's unit. The licensee shall provide the locks on the unit. Only a staff member with
2.13 a specific need to enter the unit shall have keys, and advance notice must be given to the
2.14 resident before entrance, when possible. An assisted living facility must not lock a resident
2.15 in the resident's unit;

2.16 (11) develop and implement a staffing plan for determining its staffing level that:

2.17 (i) includes an evaluation, to be conducted at least twice a year, of the appropriateness
2.18 of staffing levels in the facility;

2.19 (ii) ensures sufficient staffing at all times to meet the scheduled and reasonably
2.20 foreseeable unscheduled needs of each resident as required by the residents' assessments
2.21 and service plans on a 24-hour per day basis; and

2.22 (iii) ensures that the facility can respond promptly and effectively to individual resident
2.23 emergencies and to emergency, life safety, and disaster situations affecting staff or residents
2.24 in the facility;

2.25 (12) ensure that one or more persons are available 24 hours per day, seven days per
2.26 week, who are responsible for responding to the requests of residents for assistance with
2.27 health or safety needs. Such persons must be:

2.28 (i) awake;

2.29 (ii) located in the same building, in an attached building, or on a contiguous campus
2.30 with the facility in order to respond within a reasonable amount of time;

2.31 (iii) capable of communicating with residents;

- 3.1 (iv) capable of providing or summoning the appropriate assistance; and
- 3.2 (v) capable of following directions; ~~and~~
- 3.3 (13) provide staff access to an on-call registered nurse 24 hours per day, seven days per
- 3.4 week;
- 3.5 (14) ensure a plan to immediately attend to resident needs in an emergency; and
- 3.6 (15) ensure that a person trained in emergency response is on site 24 hours per day,
- 3.7 seven days per week.

3.8 Sec. 3. Minnesota Statutes 2024, section 144G.41, subdivision 2, is amended to read:

3.9 Subd. 2. **Policies and procedures.** (a) Each assisted living facility must have policies

3.10 and procedures in place to address the following ~~and keep them current~~:

3.11 (1) requirements in section 626.557, reporting of maltreatment of vulnerable adults;

3.12 (2) conducting and handling background studies on employees;

3.13 (3) orientation, training, and competency evaluations of staff, and a process for evaluating

3.14 staff performance;

3.15 (4) handling complaints regarding staff or services provided by staff;

3.16 (5) conducting initial evaluations of residents' needs and the providers' ability to provide

3.17 those services;

3.18 (6) conducting initial and ongoing resident evaluations and assessments of resident

3.19 needs, including assessments by a registered nurse or appropriate licensed health professional,

3.20 and how changes in a resident's condition are identified, managed, and communicated to

3.21 staff and other health care providers as appropriate;

3.22 (7) orientation to and implementation of the assisted living bill of rights;

3.23 (8) infection control practices;

3.24 (9) reminders for medications, treatments, or exercises, if provided;

3.25 (10) conducting appropriate screenings, or documentation of prior screenings, to show

3.26 that staff are free of tuberculosis, consistent with current United States Centers for Disease

3.27 Control and Prevention standards;

3.28 (11) ensuring that nurses and licensed health professionals have current and valid licenses

3.29 to practice;

3.30 (12) medication and treatment management;

- 4.1 (13) delegation of tasks by registered nurses or licensed health professionals;
- 4.2 (14) supervision of registered nurses and licensed health professionals; ~~and~~
- 4.3 (15) supervision of unlicensed personnel performing delegated tasks; and
- 4.4 (16) emergency procedures initiated when a resident is experiencing an emergency event,
- 4.5 including but not limited to a resident falling, having a heart event, having difficulty
- 4.6 breathing, bleeding, or choking.

- 4.7 (b) Each assisted living facility must keep all policies and procedures current and make
- 4.8 them available to a resident or the resident's representative upon request. Policies and
- 4.9 procedures covering emergency situations must be provided to prospective residents before
- 4.10 admission to an assisted living facility and provided to current residents at the time of a
- 4.11 nursing assessment as required under section 144G.70, subdivision 2.

4.12 Sec. 4. Minnesota Statutes 2024, section 144G.61, subdivision 2, is amended to read:

4.13 Subd. 2. **Training and evaluation of unlicensed personnel.** (a) Training and competency

4.14 evaluations for all unlicensed personnel must include the following:

- 4.15 (1) documentation requirements for all services provided;
- 4.16 (2) reports of changes in the resident's condition to the supervisor designated by the
- 4.17 facility;
- 4.18 (3) basic infection control, including blood-borne pathogens;
- 4.19 (4) maintenance of a clean and safe environment;
- 4.20 (5) appropriate and safe techniques in personal hygiene and grooming, including:
- 4.21 (i) hair care and bathing;
- 4.22 (ii) care of teeth, gums, and oral prosthetic devices;
- 4.23 (iii) care and use of hearing aids; and
- 4.24 (iv) dressing and assisting with toileting;
- 4.25 (6) training on the prevention of falls;
- 4.26 (7) standby assistance techniques and how to perform them;
- 4.27 (8) medication, exercise, and treatment reminders;
- 4.28 (9) basic nutrition, meal preparation, food safety, and assistance with eating;
- 4.29 (10) preparation of modified diets as ordered by a licensed health professional;

- 5.1 (11) communication skills that include preserving the dignity of the resident and showing
5.2 respect for the resident and the resident's preferences, cultural background, and family;
- 5.3 (12) awareness of confidentiality and privacy;
- 5.4 (13) understanding appropriate boundaries between staff and residents and the resident's
5.5 family;
- 5.6 (14) procedures to use in handling various emergency situations, including but not limited
5.7 to a resident falling, having a heart event, having difficulty breathing, bleeding, or choking;
5.8 and
- 5.9 (15) awareness of commonly used health technology equipment and assistive devices.
- 5.10 (b) In addition to paragraph (a), training and competency evaluation for unlicensed
5.11 personnel providing assisted living services must include:
- 5.12 (1) observing, reporting, and documenting resident status;
- 5.13 (2) basic knowledge of body functioning and changes in body functioning, injuries, or
5.14 other observed changes that must be reported to appropriate personnel;
- 5.15 (3) reading and recording temperature, pulse, and respirations of the resident;
- 5.16 (4) recognizing physical, emotional, cognitive, and developmental needs of the resident;
- 5.17 (5) safe transfer techniques and ambulation;
- 5.18 (6) range of motioning and positioning; and
- 5.19 (7) administering medications or treatments as required.