

CHAPTER 9570

DEPARTMENT OF HUMAN SERVICES

SERVICES; PHYSICALLY HANDICAPPED

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RESIDENTIAL PROGRAMS AND SERVICES FOR PHYSICALLY HANDICAPPED

9570.2000 STATUTORY AUTHORITY.

Minnesota Statutes, chapter 245A, establish the authority of the commissioner of human services to set rules governing the operation of residential programs and services for the physically handicapped. The commissioner of human services hereby promulgates parts 9570.2000 to 9570.3600 to establish standards for residential programs and services for the physically handicapped.

Statutory Authority: *MS s 245A.09*

History: *L 1984 c 654 art 5 s 58; 13 SR 1448*

9570.2100 GENERAL OBJECTIVES OF PROGRAM.

Subpart 1. **Aims.** At least these essential aims shall be incorporated in the general philosophy and subsequent policies of the program:

- A. to promote the greatest degree of independence possible for each resident;
- B. to enhance the ability of each resident to cope with the resident's environment;
- C. to maximize and foster the human qualities of each resident; and

D. to provide a homelike atmosphere to the greatest possible extent, in which the resident is recognized as an individual whose personal interests are maintained and developed and whose personal dignity is respected and safeguarded.

Subp. 2. **Culturally normal behavior.** The residential program shall attempt to elicit and maintain behavior that is as culturally normative as possible, taking into account local and subcultural differences.

Subp. 3. **Location of program.** The residential program should be located within and conveniently accessible to the population served, so as to have access to necessary generic community services.

Subp. 4. **Sharing with the community.** The residential program and the surrounding community should be encouraged to share their services and resources on a reciprocal basis.

Subp. 5. **Use of community services.** Residents should be integrated to the greatest possible extent with the general population. To this end, generic and specialized community services, rather than program services, should be used extensively or, if possible, completely.

Statutory Authority: *MS s 245A.09*

History: *13 SR 1448; 17 SR 1279*

9570.2200 DEFINITIONS.

Subpart 1. **Active community service.** "Active community service" pertains to any human service provider (including but not limited to individuals, agencies, organizations, or institutions offering health, educational, financial, psychological, social, or vocational services) that is independent of and located apart from the residential program in the community and plans to or is presently providing service to the resident.

Subp. 2. **Common living areas.** "Common living areas" refers to all portions of the residential facility designated for the shared usage of its residents.

Subp. 3. **Developmental/rehabilitative services.** "Developmental/rehabilitative services" include those services that are designed to promote the resident's gradual and synchronized progression toward differentiation, complexity, and ultimate integration of structure, function, and behavior and those that are designed to attain maximum reduction of disability and restoration of the resident to the best possible functional level.

Subp. 4. **In-residence medical services.** "In-residence medical services" means that organized programs of care and services provided within the confines of the residential facility pertaining to medical care that are performed by or at the direction of a physician on behalf of residents by physicians, dentists, nurses, and other professional and technical personnel.

Subp. 5. **Mobility categories.** "Mobility categories" denotes the following four classifications of ease and independence with which a person can move from one place to another:

A. Ambulatory: ability to walk independently and at least negotiate any barriers such as ramps, doors, stairs, corridors, etc., as may be necessary to get in and out of the facility.

B. Mobile: ability to move from place to place with the use of devices such as walkers, crutches, wheelchairs, wheeled platforms, etc.

C. Nonambulatory: inability to walk independently.

D. Nonmobile: inability to independently move from place to place.

Subp. 6. **Operator.** "Operator" means the person or persons, whether or not owners, who manage the residential program and are responsible for the general program of the facility and the individual programs of the residents.

Subp. 7. **Physically handicapped.** "Physically handicapped" encompasses those orthopedic, incoordinative, sight, and hearing disabilities that culminate in the significant reduction of mobility, flexibility, coordination, or perceptiveness and that, singly or in combination, interfere with the individual's ability to live and function independently; that are not the result of the normal aging process; and that are considered to be chronic conditions.

Subp. 8. **Program.** "Program" means the planned and purposeful set of conditions and events established by or through the residential program that covers all or a portion of the major areas of the resident's life.

Subp. 9. **Resident.** "Resident" means any individual who resides in or receives service from a residential program, including current and former residents as well as those persons being considered for residence.

Subp. 10. **Resident living area.** "Resident living area" means that building or distinct portion thereof that contains sleeping, living, or recreation, and, in some instances, dining and kitchen, areas.

Subp. 11. **Residential facility.** "Residential facility" refers to any institution, building, agency, or place offering some element of congregate care or service in which an individual lives or dwells on a regular basis and at least uses for sleeping; for maintaining personal clothing, papers, and other personal possessions; and as the designated mailing address.

Statutory Authority: *MS s 245A.09*

History: *13 SR 1448; 17 SR 1279*

9570.2300 PROGRAM CLASSIFICATION.

Subpart 1. **Basis.** Residential programs will be classified on the basis of the level of care and service needs of their residents.

Subp. 2. **Level I.** Level I will include all residential programs serving five or more physically handicapped persons in the various mobility categories who can live independently in the community with modification of certain architectural barriers and who:

- A. are capable of performing substantially all of their own personal-care functions;
- B. are capable of using regular public and/or private transportation; and
- C. are 16 years of age or older.

These shall be interpreted as the minimum criteria to be applied to any physically handicapped resident in a Level I program.

Subp. 3. **Level II.** Level II will include all residential programs serving five or more physically handicapped persons in the various mobility categories who have some limitations on their ability to live independently in the community even with the modification of certain architectural barriers and who:

- A. are in need of assistance in varying degrees with personal-care functions;
- B. have service needs that exclude continuing in-residence medical care; and
- C. are either children or adults.

These shall be interpreted as the minimum criteria to be applied to any physically handicapped resident in a Level II program.

Subp. 4. **Level III.** Level III will include all residential programs serving five or more physically handicapped persons in the various mobility categories whose ability to live independently in the community is severely circumscribed even with the modification of certain architectural barriers and who:

- A. are in need of some form of continuing in-residence medical service, irrespective of other services needed;
- B. are in need of assistance with a substantial portion of personal-care functions; and
- C. are either children or adults.

These shall be interpreted as the minimum criteria to be applied to any physically handicapped resident in a Level III program.

Statutory Authority: *MS s 245A.09*

History: *13 SR 1448*

9570.2400 ADMISSION, TRANSFER, AND DISCHARGE POLICIES AND PROCEDURES.

The program's admission, transfer, and discharge policies and procedures shall:

- A. provide for participation by the resident and/or parent, guardian, or a designated representative in all such decisions;
- B. include an initial and periodic assessment of all relevant physical, emotional, social, cognitive, vocational, and other significant factors by program staff and the appropriate active community service representatives;

C. prohibit discrimination in all such considerations on the basis of race, color, religion, nationality, or sex where it is the general policy of the program to serve persons of both sexes;

D. insure that adequate information about the facility and its program is disseminated to all interested and involved parties; and

E. base all such decisions on the individual program needs of the present or prospective resident and their compatibility with the facility's capacity to formally arrange or directly provide program resources and the facility's physical and spatial constraints.

Statutory Authority: *MS s 245A.09*

History: *13 SR 1448; 17 SR 1279*

9570.2500 DEVELOPMENTAL AND REHABILITATIVE SERVICES.

As determined by the resident's abilities and individual program needs, the residential program shall:

A. provide directly or otherwise formally arrange developmental and rehabilitative services in order to strengthen and sustain the resident's capacity to function independently;

B. ensure that developmental and rehabilitative services are sufficient in variety and scope to satisfy each resident's needs and are of a quality comparable to those services provided in the wider community; and

C. arrange for developmental and rehabilitative services, including a periodic review, on the basis of an individual service plan developed by facility staff and appropriate active community service representatives.

Statutory Authority: *MS s 245A.09*

History: *13 SR 1448*

9570.2600 RESIDENT AND STAFF POLICIES AND PROCEDURES.

The manner in which staff members provide service and care to the residents is vital to the effectiveness of the facility's program. In this respect, the program's resident-staff policies and procedures shall:

A. establish the care and development of the residents as the primary responsibility of its staff;

B. provide for a fair, impartial, and humane governing and management process that protects the interests of the residents singly and as a group while taking into account resident views on those matters affecting them;

C. ensure that staff members participate in the development of and have access to resident program plans and recommendations; and

D. seek to create and maintain a warm, personal, supportive environment that is conducive to the well-being of the resident and that promotes maximum independent functioning.

Statutory Authority: *MS s 245A.09*

History: *13 SR 1448*

9570.2700 RECORDS.

Records are to be maintained by the program for residents, employees, and administrative operations and shall:

A. contain sufficient and accurate information for and be accessible to the appropriate and authorized persons to plan, implement, review, and evaluate the care and services to individual residents as well as the broader programs offered through or arranged by the program;

B. provide adequate legal protection of the rights of the residents, the program, and its staff through correct documentation of the various activities; and

C. be considered confidential and subject to proper consent procedures for all but those program staff members and active community service representatives who are actually involved in and require such information for the provision of care and services to residents.

Statutory Authority: *MS s 245A.09*

History: *13 SR 1448*

9570.2800 ADMINISTRATIVE ORGANIZATION.

Policies and procedures pertaining to the program's administrative organization shall:

A. specify its philosophy, purpose, and goals, making them available to all interested parties;

B. define its organizational structure;

C. have available documentary evidence of its source of operating authority;

D. provide for the sound management of all facets of the facility's operations for which a qualified person designated as director is responsible; and

E. ensure that the facility's operations are organized and managed in a manner appropriate to the program needs of the residents.

Statutory Authority: *MS s 245A.09*

History: *13 SR 1448*

9570.2900 STAFFING AND PERSONNEL.

The program's personnel policies and practices shall:

A. ensure that a sufficient number of adequately trained and qualified staff members who are administratively responsible to persons of appropriate program training and experience are on duty during each 24-hour period to provide suitable care and service to the residents in a manner consistent with the facility's stated program objectives;

B. delineate staff responsibilities to cover emergency situations;

C. provide for an initial and periodic assessment of the health status of staff members;

D. establish and maintain job descriptions for all personnel;

E. promote the development and upgrading of staff by making available opportunities for in-service training; and

F. provide for the periodic, at least annual, evaluation of each employee.

Statutory Authority: *MS s 245A.09*

History: *13 SR 1448*

9570.3000 ORGANIZATION OF RESIDENT LIVING AREAS.

The placement and grouping of residents within the context of the spatial confines of the facility are prominent considerations for the effective use of care and services. To this extent the program policies and procedures pertaining to the organization of resident-living areas shall:

A. seek to create and maintain an environment that promotes the development of meaningful interpersonal relationships among residents and between residents and staff;

B. maintain resident-living areas separate from other program areas in the facility;

C. establish and follow criteria for placement of residents within the facility that will promote the growth and development of all those together in residence; and

D. not exclude persons from residence that the program is otherwise equipped to serve solely on the basis of the program's internal placement criteria.

Statutory Authority: *MS s 245A.09*

History: *13 SR 1448*

9570.3100 RESIDENT LIVING SERVICES.

Resident living services (including, but not limited to, food, laundry, housekeeping, and plant maintenance services) shall:

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A. approximate the patterns of a family home from the standpoint of scheduling, frequency, and manner of provision of such services;

B. be provided in accordance with the customs of the resident population and its developmental levels; and

C. be provided in a manner that assures the maintenance of a high level of health, safety, and sanitation within the facility that complies with all such applicable federal, state, and local regulations.

Statutory Authority: *MS s 245A.09*

9570.3200 DESIGN AND EQUIPAGE OF LIVING AREAS.

The design, construction, and furnishing of resident living areas shall:

A. be consistent with the developmental levels and programmatic needs of the resident;

B. simulate the arrangements of a family home;

C. provide for adequate space and equipment to carry out the program's expressed functions and activities; and

D. assure continued compliance with all applicable state and local fire, safety, sanitation, building, and zoning regulations.

Statutory Authority: *MS s 245A.09*

History: *13 SR 1448*

9570.3300 REMOVAL AND REDUCTION OF ARCHITECTURAL BARRIERS.

The program's policies and procedures to remove and reduce architectural barriers shall:

A. seek to minimize physical, social, and psychological isolation of the residents;

B. provide for the residents' accessibility to living, recreational, and other program areas within the facility, as well as such resources in the community; and

C. provide for and protect the health and safety of the residents.

Statutory Authority: *MS s 245A.09*

History: *13 SR 1448*

9570.3400 LICENSING PROCEDURES.

Residential programs for the physically handicapped must be licensed under parts 9543.1000 to 9543.1060.

Statutory Authority: *MS s 245A.09*

History: *18 SR 2748*

9570.3500 [Repealed, 18 SR 2748]

9570.3600 [Repealed, 18 SR 2748]

SERVICES FOR THE DEAF

9570.4000 SCOPE.

Parts 9570.4000 to 9570.4300 govern the provisions of specialized services to deaf and hearing impaired individuals.

Statutory Authority: *MS s 256.01 subd 4; 256.971; 256C.27*

9570.4100 AGENCY RESPONSIBILITY.

Services for the deaf are provided by a subdivision of the Minnesota Department of Human Services responsible for providing specialized social services throughout the state to deaf and hard-of-hearing individuals and their families needing or requesting such services.

Statutory Authority: *MS s 256.01 subd 4; 256.971; 256C.27*

History: *L 1984 c 654 art 5 s 58*

9570.4200 SPECIALIZED SERVICES; DEFINITION.

Specialized services provided include counseling, information and referral, manual communication interpretation through the use of the language of signs, consultation, and the maintenance of the Registry of the Deaf.

Statutory Authority: *MS s 256.01 subd 4; 256.971; 256C.27*

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9570.4300 ELIGIBILITY FOR SERVICES.

Eligibility of deaf and hard-of-hearing residents of the state for services shall be based solely on the existence of a hearing impairment, without regard to financial status or other limiting factors.

The applicant shall provide medical documentation of hearing loss upon request.

Statutory Authority: *MS s 256.01 subd 4; 256.971; 256C.27*