

9050.1070 RESIDENT RIGHTS AND RESPONSIBILITIES.

Subpart 1. **Scope.** Residents of each facility operated by the commissioner of veterans affairs are guaranteed all rights expressed in Minnesota Statutes, section 144.651. Residents also have the right to exercise freedom of expression and assembly as guaranteed by the United States Constitution, Amendment I, the Minnesota Constitution, and Minnesota Statutes, section 198.32.

Residents shall cooperate with facility rules as specified in this chapter.

Subp. 2. **Information about rights.** On admission, a resident, resident's guardian, legal representative, family member, conservator, or other person designated by the resident must be informed of and given a copy of the Patient's and Resident's Bill of Rights expressed in Minnesota Statutes, section 144.651. If changes occur in the Patient's and Resident's Bill of Rights during the resident's stay at the facility operated by the commissioner of veterans affairs, a resident, resident's guardian, legal representative, family member, conservator, or other person designated by the resident must be informed of and given a copy of the changes.

The Patient's and Resident's Bill of Rights must be posted in a conspicuous place in each facility operated by the commissioner of veterans affairs.

Subp. 3. **Resident care.** Residents have the right to appropriate and regular medical and personal care based on individual needs to promote continuity of care by facility staff and other persons providing health care services according to Minnesota Statutes, section 144.651. "Appropriate care" means care designed to enable residents to achieve their highest level of physical and mental functioning. Residents must be treated courteously and with respect.

Competent residents have the right to refuse treatment according to Minnesota Statutes, section 144.651, subdivision 12. Residents who refuse treatment, medication, or dietary restrictions must be informed of the likely medical or major psychological results of the refusal, with documentation in the resident's medical record. If a resident is incapable of understanding the circumstances but has not been adjudicated incompetent, or if legal requirements limit the right to refuse treatment, the conditions and circumstances must be fully documented by the attending physician in the resident's medical record.

A resident whose care needs cannot be met according to part 9050.0070, subparts 3 and 4, must be denied continued stay subject to the appeals procedures in part 9050.0220.

Resident care must meet the standards of the Vulnerable Adults Protection Act found in Minnesota Statutes, section 626.557.

Subp. 4. **Resident care plan participation.** Residents have the right to participate in care planning and implementation of the care plan according to Minnesota Statutes, section

144.651, subdivision 10, unless medically contraindicated. Medical contraindication must be documented by the attending physician in the resident's chart.

Subp. 5. **Resident handbook.** On admission, a resident must be given a resident handbook. The handbook must be reviewed by social services staff or nursing staff with the resident or the resident's representative.

After reviewing the handbook, the resident or resident's representative must sign a statement indicating that the resident or representative received a copy of the handbook and reviewed the handbook. This statement must be kept with the resident's admission agreement.

The resident handbook must contain:

- A. general information about the facility and resident care;
- B. rules and regulations of the facility;
- C. services available at the facility;
- D. Patient's and Resident's Bill of Rights found in Minnesota Statutes, section 144.651; and
- E. grievance procedures.

If changes occur concerning the information in the resident handbook, a resident must be informed of and given a copy of the changes. The resident or resident's representative must sign a statement indicating that the resident or representative received a copy of the changes.

Subp. 6. **Resident councils.** Residents may organize, maintain, and participate in a resident advisory council with elected officers to express feelings and thoughts about the facility, facility policies, and resident care issues according to Minnesota Statutes, sections 144.651, subdivision 27, and 144A.33; United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards. United States Department of Veterans Affairs publications shall be available for review at each facility operated by the commissioner of veterans affairs.

Space for resident council meetings must be provided at each facility operated by the commissioner of veterans affairs. Staff or visitors may only attend resident council meetings at the council's invitation.

The administrator shall designate a staff person, with approval of the resident council, to assist the council and respond to written requests that result from council meetings.

Minutes of resident council meetings must be kept and made available to residents and other persons as the resident council determines. Minutes of resident council meetings must also be made available to the Department of Health and the United States Department of Veterans Affairs to show that resident council meetings are being held at each facility.

The designated staff person or other appropriate staff persons shall inform the resident council of:

- A. resident rights and responsibilities;
- B. resident council organization and maintenance;
- C. laws and rules that apply to the facility and residents;
- D. resident care in the facility;
- E. human relations; and
- F. resident self-help methods to increase quality of care and quality of life at the facility.

Subp. 7. **Family councils.** Each facility operated by the commissioner of veterans affairs shall have a family council that gives members an opportunity to express feelings and thoughts about the facility and facility conditions, resident care, rules and the effect of rules, policies, and procedures according to Minnesota Statutes, sections 144.651, subdivision 20, and 144A.33.

The facility shall support and encourage development of and participation in family councils and shall provide a private meeting place and necessary administrative support through a staff liaison appointed by the administrator and approved by the council. Attendance at family council meetings of individuals other than family council members must be at council invitation only.

Minutes of family council meetings must be kept and made available to family council members and other persons as the family council determines. Minutes must also be made available to the Department of Health to show that family council meetings are being held at each facility.

Subp. 8. **Legal assistance for residents.** Residents have the right of reasonable access to outside advocacy and legal services according to Minnesota Statutes, section 144.651, subdivision 30. On a resident's request, a designated staff person shall instruct and assist that resident in obtaining advocacy and legal assistance.

The opportunity for private communication between the resident and the resident's representative must be provided at the facility operated by the commissioner of veterans affairs.

Subp. 9. **Resident grievances and complaints.** A resident may voice grievances and complaints and recommend changes in rules, policies, and services of the facility operated by the commissioner of veterans affairs without retaliation according to Minnesota Statutes, sections 198.32, 144.651, subdivision 20, and 144A.13; United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards. United States Department of Veterans Affairs publications shall be available for review at each facility operated by the commissioner of veterans affairs.

On admission, each resident must be informed in writing of the right to complain. A notice of the right to complain must be posted in a conspicuous place in each facility operated by the commissioner of veterans affairs.

Residents may complain through the facility grievance and complaint procedures. A resident may also voice grievances to the administrator, the commissioner of veterans affairs, the commissioner of health, facility staff, other residents, the family council, or outside representatives of the resident's choice.

The grievance procedure at each facility operated by the commissioner of veterans affairs must include the following:

- A. a list of internal resources for use by the resident, such as the resident council or a grievance committee, and a list of community resources available to the resident;
- B. resident access to use of facility-approved forms for written grievances;
- C. the time limits for decisions to be made by the facility;
- D. an offer of assistance by social services staff, at the resident's request, in development and process of the grievance;
- E. a written response to each resident filing a formal grievance; and
- F. a statement that the resident making a complaint or grievance is free from retaliation, including freedom from restraint, interference, coercion, discrimination, and reprisals.

Subp. 10. **Restraints.** A resident has the right to be free from physical and chemical restraints imposed for purposes of discipline or convenience and not required to treat the resident's medical condition according to part 4655.6600.

Chemical and physical restraints may be imposed on a resident only on written order of a physician that specifies the duration and circumstances under which the restraints are to be used, except in emergency circumstances when administrative nursing staff takes temporary emergency measures until an order can reasonably be obtained. If the resident's

behavior poses a significant threat of harm to self or others, the resident may be discharged or transferred to an appropriate care facility.

Locked restraints must not be used on residents. Doors to resident rooms must not be locked in a manner that would prevent immediate opening in case of an emergency.

Use of restraints must be recorded in the resident's record. The record must include a description of the precipitating behavior, the expected behavioral outcome, the actual behavioral outcome, an assessment of the need for continued use of the restraint, and the duration of use of the restraint.

Subp. 11. **Right to associate; visitors.** A resident may meet with or refuse to meet with visitors and participate in activities of commercial, religious, political, and community groups without interference, unless the activities infringe on the rights of other residents. This subpart complies with Minnesota Statutes, section 144.651, subdivisions 21 and 26.

Residents may receive visitors during visiting hours and, on request and availability, be provided privacy for visits during visiting hours. Visiting hours must be established by the facility administrator and be posted in plain view. Visitors to each facility operated by the commissioner of veterans affairs must follow facility rules.

Residents may receive private visits at any time from the resident's personal physician, religious advisor, or attorney. Residents diagnosed as critically ill may have visits from relatives, guardians, conservators, legal representatives, and persons designated by the resident at any time according to part 4655.1910.

Subp. 12. **Identity of physician and outside service providers.** In accordance with Minnesota Statutes, section 144.651, subdivision 7, facility staff shall give a resident, in writing, the name, business address, telephone number, and specialty of the physician responsible for coordination of the resident's care.

Residents receiving services from approved outside providers must be given, on request from the resident or resident's guardian, written information about the identity of the provider, including the name of the outside provider, address, telephone number, specialty of the physician, and a description of the service to be given.

Subp. 13. **Personal and treatment privacy.** A resident has a right to respect for the resident's privacy, individuality, and cultural identity as related to the resident's social, religious, and psychological well-being.

Privacy must be respected by other residents, staff, volunteers, and visitors. Individuals must knock on the door of a resident's room and obtain the resident's consent before entering, except in an emergency or when clearly inadvisable.

A resident has the right to privacy for the resident's medical and personal care program. Privacy must be respected during toileting, bathing, and other personal hygiene activities,

except as needed for resident safety or assistance. Documentation of assistance given to or needed by a resident in personal hygiene activities must be maintained in the resident's chart.

Subp. 14. **Married residents.** Married residents have a right to privacy for spousal visits according to Minnesota Statutes, section 144.651, subdivision 28. If both spouses are residents of the facility, the couple must be permitted to share a room unless medically contraindicated and documented by the attending physicians in the medical records.

Subp. 15. **Privacy of resident records.** A resident has a right to confidential treatment of personal and medical records and may approve or refuse release of the records to any individual outside the facility operated by the commissioner of veterans affairs.

Medical records must be made available to persons at the facility operated by the commissioner of veterans affairs who are responsible for the direct care of the resident. All information contained in the resident's records must be handled in a manner consistent with chapters 1205 and 4655; the Government Data Practices Act under Minnesota Statutes, chapter 13, and sections 144.291 to 144.298 and 144.651, subdivision 16.

Written consent of the resident or the resident's guardian or conservator is required for the release of information concerning the resident to persons not otherwise authorized to receive it. Written consent of the resident must be handled in a manner consistent with Minnesota Statutes, section 13.04, subdivision 2.

Information to be released is limited to the items or information specified in the consent form.

Written consent for release of information need not be given when:

- A. consent may be implied from circumstances in which a reasonable person would believe the resident would have consented had the resident been able to consent;
- B. information released does not identify the individual resident;
- C. information is to be used within the facility for routine or other legitimate purposes such as evaluation, education, research, or financial audits; or
- D. release is mandated by statute, regulation, or court order.

Subp. 16. **Resident access to records.** On request, a resident must be given access to personal, financial, and medical records concerning the resident as provided under Minnesota Statutes, sections 13.04 and 144.291 to 144.298, and Code of Federal Regulations, title 42, part 2, section 2.23.

The facility staff shall supply to a resident complete and current information concerning diagnosis and treatment of the resident in terms and language the resident can reasonably be expected to understand. If it is medically inadvisable that the information

be given to the resident, as documented by the attending physician in the resident's medical record, the information may be given to the resident's guardian, representative, or appropriate third party as specified in Minnesota Statutes, section 144.292. The resident, guardian, or appropriate third party must be shown the data without any charge.

On a resident's written request, facility staff shall furnish to the resident copies of the resident's records within five days, excluding Saturdays, Sundays, and legal holidays. With the consent of the resident, a summary of the record may be furnished instead. A reasonable fee related to the costs of copying may be requested.

If facility staff is unable to comply with a resident's request for information within five days, excluding Saturdays, Sundays, and legal holidays, staff shall inform the resident and may have an additional five days within which to comply with the resident's request, excluding Saturdays, Sundays, and legal holidays. If records are required in fewer than five days, facility staff shall make all reasonable efforts to comply with the request.

Subp. 17. **Mail.** Residents have the right to send and receive mail without interference according to Minnesota Statutes, section 144.651, subdivision 21. A resident with a legal guardian or conservator shall have mail handled according to written instructions from the guardian or conservator according to part 4655.1910, subpart 5. On request by the resident, the resident shall be given a written or oral statement regarding any restrictions on the resident's mail.

Subp. 18. **Telephone access and use.** Residents must have access to a pay telephone, at a convenient location within the facility operated by the commissioner of veterans affairs, where residents can make and receive calls. There must be at least one non-coin-operated telephone accessible at all times in case of an emergency according to part 4655.1910, subpart 4. "Emergency" has the meaning given in part 9050.0040, subpart 39.

For residents who need to speak privately, reasonable arrangements must be made by facility staff to accommodate the privacy of the resident's calls.

If restrictions on telephone access are medically advisable, the restrictions must be documented by the attending physician in the resident's medical record according to Minnesota Statutes, section 144.651, subdivision 21.

Subp. 19. **Resident vehicles.** Nonskilled care residents may keep one passenger vehicle, motorcycle, or motorized bicycle on the grounds of the facility operated by the commissioner of veterans affairs in which the resident resides. "Passenger vehicle" means a passenger automobile as defined in Minnesota Statutes, section 168.002, subdivision 24; a pickup truck as defined in Minnesota Statutes, section 168.002, subdivision 26; or a van as defined in Minnesota Statutes, section 168.002, subdivision 40. "Motorcycle" has the meaning given in Minnesota Statutes, section 168.002, subdivision 19. "Motorized bicycle" has the meaning given in Minnesota Statutes, section 168.002, subdivision 20.

A resident who wants to maintain a vehicle on the grounds of the facility shall register the make, model, color, year, and license number of the vehicle with the transportation service of the facility. The resident shall comply with applicable state statutes, including Minnesota Statutes, chapter 169, regarding payment of taxes, registration of vehicles, and safety standards; Minnesota Statutes, chapter 171, regarding operators' licenses and driving privileges; Minnesota Statutes, chapter 65B, regarding insurance coverage; and relevant rules.

Resident vehicles must be parked in designated parking areas with properly displayed facility identification decals.

A resident vehicle that is an abandoned vehicle as defined in Minnesota Statutes, section 168B.02, subdivision 2, must be handled in a manner consistent with Minnesota Statutes, chapter 168B.

Subp. 20. **Pets.** The administrator at each facility operated by the commissioner of veterans affairs, after consultation with facility staff and residents, shall determine whether pets, such as dogs and cats, will be allowed in the facility and whether individual residents will be permitted to keep the pets.

If pets are allowed in the facility, the requirements in items A to C, in accordance with part 4638.0200, must be met.

A. The facility staff, in consultation with a veterinarian and physician, shall develop and implement written policies and procedures describing the types of pets allowed and the procedures for maintaining and monitoring the health and behavior of the pets, and identify areas in the facility where pets are not permitted. Pets are not permitted in kitchen areas, medication storage and administration areas, or clean or sterile supply storage areas. Guide dogs accompanying a blind or deaf individual are permitted at each facility operated by the commissioner of veterans affairs.

B. A staff person, as designated in writing by the facility administrator, shall be responsible for monitoring or providing for the care, cleanliness, and maintenance of the pets, including fish. Residents or other individuals may also provide pet care.

C. The facility staff shall ensure that pets, including fish, do not jeopardize the health, safety, comfort, treatment, or well-being of residents or others, and shall assume overall responsibility for pets in the facility.

Pets or animals brought to the facility for visits must be preapproved by facility recreation staff and comply with this subpart.

Subp. 21. **Resident work therapy programs.** A resident may take part in a resident work therapy program on approval of the resident's attending physician or as recommended by the resident's attending physician and the resident's care team as part of the individual treatment or care plan.

The labor or services that the resident performs must be for therapeutic purposes and appropriately goal-related in the resident's care plan according to Minnesota Statutes, section 144.651, subdivision 23.

The labor performed by the resident must be other than labor of a housekeeping nature with respect to the resident's own living area and the resident must be compensated appropriately and in compliance with Minnesota law and the Federal Fair Labor Standards Act.

Earnings derived from participating in a resident work therapy program while the resident is living at the home may not be considered a means of support according to part 9050.0700, subpart 3, item A, and Minnesota Statutes, section 198.03.

Subp. 22. **Resident funds.** Resident funds must be handled according to parts 4655.1910, subpart 6; 4655.4100 to 4655.4170; and Minnesota Statutes, sections 144.651, subdivision 25; and 198.265, and be in compliance with items A to E.

A. A competent resident may manage personal financial affairs, or must be given at least a quarterly accounting of financial transactions on the resident's behalf if the resident delegates the responsibility to the facility for any period of time according to law.

B. If the facility staff determines that a resident is unable to manage personal financial affairs, the administrator or designee shall take appropriate steps to ensure that the resident's personal financial affairs will be appropriately managed, including, but not limited to, having the facility authorized to receive benefit payments on behalf of the resident from the Social Security Administration and the United States Department of Veterans Affairs and seeking appointment of a conservator or guardian.

C. Residents may keep money in a personal fund account at the facility operated by the commissioner of veterans affairs, as defined in part 9050.0040, subpart 90, and according to Minnesota Statutes, section 198.265, or in fund accounts off facility premises.

Resident fund accounts at the facility are solely for the resident's use, and the facility cashier shall retain sufficient liquid funds to satisfy normal demand withdrawal requests of residents and other anticipated needs. Resident accounts of \$100 or more must be credited with interest earned from the investment of resident accounts. Interest must be credited to each resident's account on a quarterly basis. The commissioner of veterans affairs is not required to pay interest on any resident accounts of less than \$100. If the commissioner of veterans affairs does not pay interest on a resident account of less than \$100, the interest must be used by the commissioner of veterans affairs only for the direct benefit of the residents of the homes. Before depositing money in a fund account at the facility, a resident must sign an agreement that the resident is willing to have money in an account that may not draw interest directly to the resident, if the account balance is less than \$100.

Restrictions placed on a resident's personal funds by the resident, resident's guardian, or person responsible for the resident's fund account must be documented in the resident's treatment plan.

D. The cashier at the facility shall have regular posted hours during which residents may deposit or withdraw funds. The cashier shall give a receipt to persons depositing funds and ensure that withdrawal forms are signed when funds are withdrawn.

E. Unclaimed account balances at the facility must be disposed of according to Minnesota Statutes, sections 198.23 and 198.231.

Subp. 23. **Laundry service.** Boarding care residents must have access to laundry facilities in the domiciliary units for the laundering of personal clothing. The administration of each facility may determine and post hours for use of the laundry facilities.

Each resident must be provided clean linens weekly, or as needed, according to parts 4655.8300, 4658.1405, and 4658.1410. Boarding care residents may choose to launder their own linens.

Laundry services consisting of laundering of linens and personal clothing must be provided to nursing care residents.

Subp. 24. **Resident clothing.** Each resident must have a supply of personal clothing relative to individual needs. The administrator at each facility operated by the commissioner of veterans affairs shall determine the standards for marking the resident's clothing for laundering and identification purposes.

A resident or resident's representative is responsible for the condition of the resident's personal clothing and should contact the facility for assistance in maintenance of clothing.

Subp. 25. **Resident hygiene.** Residents shall maintain a reasonable state of body and oral hygiene based on the resident's physical and mental capabilities. Each resident shall receive nursing care or personal and custodial care and supervision based on individual needs according to parts 4655.6400, 4658.0520, and 4658.0525.

Subp. 26. **Room cleanliness and conditions.** Residents shall maintain personal rooms and personal items in a manner consistent with the safety, sanitary, and health regulations required by the Department of Health, United States Department of Veterans Affairs, state fire marshal, and other regulatory agencies.

Candles, oil lamps, or other items identified as flammable or hazardous by the state fire marshal are not allowed in resident rooms.

Floors in resident rooms must be clear of boxes, luggage, debris, and other materials to prevent congestion and health and safety hazards.

Residents may have electrical personal grooming items, clocks, audio and visual equipment, and approved portable fans as space and electrical capacity of the resident's room permits. Other electrical items may be permitted on written approval of administration or on written order of the resident's attending physician, and must be documented in the resident's medical record.

Items such as unapproved extension cords, hot plates, coffee makers, and electrical food appliances are prohibited in resident rooms.

Subp. 27. **Resident facility keys.** Each resident issued a personal room key or a key to locked spaces within the room shall return those keys to the facility on transfer or discharge. The resident may be charged the cost of replacing any lost keys.

Subp. 28. **Resident and facility property.** A resident may not damage another resident's property or the facility's property. A resident may be held financially responsible for property damaged or destroyed by the resident.

Subp. 29. **Resident's personal property.** In accordance with Minnesota Statutes, section 144.651, subdivision 22, a resident may retain personal possessions in the resident's personal living area as space permits, unless to do so would infringe on rights of other residents, or unless contraindicated for documented medical or safety reasons.

Personal property of deceased residents must be handled according to Minnesota Statutes, section 198.23. Personal property of discharged residents must be handled according to Minnesota Statutes, section 198.231.

Subp. 30. **Storage of resident's property.** Storage of a resident's property must be handled in compliance with items A to C.

A. The administration of each facility operated by the commissioner of veterans affairs may determine an assigned amount of storage space for a resident needing storage space for personal property outside of the resident's personal living area. Particular kinds of personal property may be excluded from the facility for reasons of space limitations or safety.

Facility staff shall maintain an updated, itemized inventory of each resident's property in storage, including the resident's name and signature, guardian's signature, date of the inventory, a detailed listing of the resident's property, and the storage location. The list must be kept in a separate location, with one copy kept with the inventoried property and one copy given to the resident.

Residents must have access to storage areas during hours that are determined by administration and must be accompanied by the facility staff member who is in charge of storage, or that person's designee. The hours for access to storage areas must be posted in one or more conspicuous places in each of the facilities operated by the commissioner of veterans affairs.

Cash may not be placed into storage.

Secure and temporary storage of a resident's possessions may be provided during a resident's emergency absence from the facility or on a specific request to the nursing staff from a resident leaving the facility on a personal absence.

The facility shall not accept resident possessions that cannot be accommodated in the facility storage areas.

B. A central, locked depository or locked storage area over which the facility has responsibility, in which residents may store valuables for safekeeping, must be provided at each facility operated by the commissioner of veterans affairs.

Facility staff shall maintain an updated, itemized inventory of each resident's valuables in storage, including the resident's name and signature, guardian's signature, date of the inventory, a detailed listing of the resident's property, and the storage location. The list must be kept in a separate location, with one copy kept with the inventoried property and one copy given to the resident.

C. The facility may provide compensation for or replacement of lost or stolen items according to Minnesota Statutes, section 144.651, subdivision 22, if the loss was caused by the facility's negligence, as required under Minnesota Statutes, section 3.732.

Subp. 31. **Smoking.** The administrator of each facility operated by the commissioner of veterans affairs shall designate smoking and nonsmoking areas according to chapter 4620 and Minnesota Statutes, sections 144.411 to 144.417. Residents may smoke in designated smoking areas only.

Smoking in resident rooms is prohibited, except that a bedridden resident may smoke with direct assistance from a staff person and only under written orders of the resident's attending physician. The orders must be documented in the resident's care plan.

Subp. 32. **Leaving the facility campus.** Residents shall notify administration or direct care staff before leaving the facility campus. The resident shall indicate to the appropriate staff member when the resident is leaving the facility campus, the expected time of return, and, if possible, the destination and telephone number where the resident can be contacted in case of an emergency. The resident shall notify direct care staff on return to the facility.

If a resident's departure is likely to cause immediate serious physical harm to the resident or others, reasonable efforts may be made to inform the resident of the likely consequences of the resident's actions or departure.

Subp. 33. **Coffee shop and canteen.** Depending on space, resources, and available funds, a coffee shop with posted hours may be provided at each facility operated by the

commissioner of veterans affairs. A canteen with posted hours where persons may purchase personal care items may also be provided.

Where canteens and coffee shops are operated by the facility, profits derived must be used only for the direct benefit of the residents of the homes according to Minnesota Statutes, section 198.261.

Subp. 34. **Alcoholic beverages.** The sale, distribution, consumption, and possession of alcoholic beverages are not allowed on the campuses of the Minnesota veterans homes or during facility-sponsored events according to Minnesota Statutes, section 198.33, except when consumption is prescribed by the resident's attending physician and documented in the resident's chart. An alcoholic beverage is a beverage containing any amount of alcohol.

Subp. 35. **Room inspections.** A resident room is subject to routine inspections by facility staff for compliance with safety, sanitation, health, and facility rules and regulations.

Subp. 36. **Searches of resident rooms.** Residents have the right to a legitimate expectation of privacy in their persons and property against unreasonable searches and seizures. A search of a resident's room or property must be conducted when necessary to protect the residents or others from contraband or other articles that are potentially injurious to residents, staff, volunteers, and visitors. All procedures of the search must be according to Minnesota Statutes, section 198.33, subdivision 1.

Subp. 37. **Contraband.** A resident may not possess contraband items at the facility campus. Contraband includes all illegal articles, firearms, weapons, ammunition, alcoholic beverages, nonprescribed prescription drugs, including narcotics and controlled substances.

Contraband is subject to seizure according to Minnesota Statutes, section 198.33, and must be disposed of according to applicable laws. A receipt must be given to the resident and the information must be documented in the resident's chart.

Subp. 38. **Double beds.** Double beds are not allowed in resident rooms at the Minnesota veterans homes.

Subp. 39. **Photographs, voice recordings, or videotapes.** Informed written consent is required before a resident may be photographed, voice recorded, or videotaped. Consent is not needed for identification photographs of the resident that are kept in the resident's chart at the facility operated by the commissioner of veterans affairs.

Statutory Authority: *MS s 144A.04; 144A.08; 198.003; 256B.431*

History: *16 SR 1945; 18 SR 2254; 20 SR 303; 20 SR 2095; 21 SR 196; 28 SR 1251; L 2007 c 147 art 10 s 15; L 2008 c 297 art 2 s 29*

Published Electronically: *October 15, 2008*