

CHAPTER 9535**DEPARTMENT OF HUMAN SERVICES****PROGRAM GRANTS; PERSONS WHO ARE MENTALLY ILL****DISTRIBUTION OF GRANTS**

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DISTRIBUTION OF GRANTS

9535.1700 PURPOSE.

Parts 9535.1700 to 9535.1760 establish standards for the receipt and distribution of state grants to assist county boards in the delivery of children's community-based mental health services and to assist county boards in the delivery of adult community support and case management services.

Statutory Authority: *MS s 245.484; 245.4886; 256E.12*

History: *17 SR 922; L 2003 1Sp14 art 11 s 11*

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9535.1705 DEFINITIONS.

Subpart 1. **Scope.** Unless otherwise defined in this part, the terms used in parts 9535.1700 to 9535.1760 have the meanings given them in Minnesota Statutes, sections 245.462 and 245.4871. For the purposes of parts 9535.1700 to 9535.1760, the terms defined in subparts 2 to 4 have the meanings given them.

Subp. 2. MR 2001 [Removed, L 2003 1Sp14 art 11 s 11]

Subp. 3. **County funds.** "County funds" means funds available to a county through county levies, state block grants, federal block grants, family preservation grants under Minnesota Statutes, section 256F.05, and state revenues distributed in lieu of property taxes or other revenue sharing.

Subp. 4. **Grant period.** "Grant period" means the time period in the grant application approved by the commissioner.

Statutory Authority: *MS s 245.484; 245.4886; 256E.12*

History: *17 SR 922; L 2003 1Sp14 art 11 s 11*

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9535.1710 ELIGIBILITY TO RECEIVE GRANT.

Only county boards that submit and obtain the commissioner's approval for the grant application as required under parts 9535.1700 to 9535.1760 are eligible to receive grants under parts 9535.1700 to 9535.1760.

Statutory Authority: *MS s 245.484; 245.4886; 256E.12*

History: *17 SR 922*

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9535.1715 GRANT APPLICATION.

Subpart 1. **Application for grants.** A county board or two or more county boards jointly applying for a grant under part 9535.1710 shall submit to the commissioner a grant application that includes budget information for the use of the grant funds. The grant application must be completed in the manner prescribed on forms provided by the commissioner. Beginning with calendar years 1994 and 1995, the grant application must be part of the county board's biennial community social services plan, except that any grant application for a special project under part 9535.1730 need not be included in the county board's biennial community social services plan.

Subp. 2. **County board signature or copy of approving resolution.** As evidence of the county board's approval, the grant application submitted to the commissioner by the county board must be:

- A. signed by the chair of the county board; or
- B. accompanied by a copy of the county board resolution approving the submission.

If two or more county boards jointly apply for a grant, the chair of each county board participating in the joint application shall either sign the grant application or submit a copy of the county board's resolution approving the submission.

Statutory Authority: *MS s 245.484; 245.4886; 256E.12*

History: *17 SR 922*

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9535.1720 FUNDING CRITERIA.

The commissioner shall distribute grants to county boards whose grant applications meet the criteria in items A to E.

A. The grant application must be consistent with the respective mental health component of the county's community social services plan that is approved by the commissioner.

B. For grants to provide children's community-based mental health services, the grant application must describe how the county board is collaborating or will collaborate in the development, funding, and delivery of children's community-based mental health services with other agencies in the local system of care.

C. The grant application must comply with parts 9535.1700 to 9535.1760 and with Minnesota Statutes, sections 245.461 to 245.4887.

D. In the grant application submitted to the commissioner according to part 9535.1715, the county board shall agree that:

(1) it considered the advice of the local adult or children's mental health advisory council, or the adult or children's mental health subcommittee of the existing local mental health advisory council when developing the grant application;

(2) it will consider the advice of the local adult or children's mental health advisory council, or the adult or children's mental health subcommittee of the existing local mental health advisory council if the grant application is amended;

(3) services will be provided in accordance with the needs identified in each client's individual or family community support plan;

(4) where available, the following will be used instead of grant funds under parts 9535.1700 to 9535.1760:

- (a) medical assistance, under Minnesota Statutes, section 256B.0625;
- (b) general assistance medical care, under Minnesota Statutes, section 256D.03;
- (c) MinnesotaCare, under Minnesota Statutes, section 256L.01 to 256L.10;
- (d) private insurance and other third-party payors;
- (e) client fees, under Minnesota Statutes, section 245.481; and
- (f) other funds; and

(5) the cost per unit of service as determined by the commissioner will be comparable to the cost of similar services in the same or similar local trade area. "Local trade area" has the meaning given it in part 9505.0175, subpart 22.

E. The grant application must state that grant funds will only be used for:

- (1) the services defined in Minnesota Statutes, section 245.4871; or
- (2) the services defined in Minnesota Statutes, section 245.462; and
- (3) other services that:
 - (a) have minor costs;
 - (b) cannot be paid for from the funds listed in item D, subitem (4); and
 - (c) are approved by the commissioner.

If the commissioner determines that a grant application merits funding but does not meet the criteria in parts 9535.1700 to 9535.1760, the commissioner shall specify the conditions the grant application must meet in order to receive the grant.

Statutory Authority: *MS s 245.484; 245.4886; 256E.12*

History: *17 SR 922; L 1993 c 247 art 4 s 11; L 1994 c 625 art 8 s 72; L 1995 c 234 art 8 s 56; L 2003 1Sp14 art 11 s 11*

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9535.1725 DISTRIBUTION FORMULA.

At or before the beginning of the grant period, the commissioner shall use the formulas in items A to F to distribute grants under parts 9535.1700 to 9535.1760 to county boards whose grant applications meet the requirements in parts 9535.1700 to 9535.1760.

A. Within the limits of appropriations, the commissioner shall allocate to each county board whose grant application is approved under part 9535.1720, the greater of the following:

(1) an annual allocation equal to the county's allocation for the preceding year, excluding any supplemental funds reallocated from other counties, plus a cost of living increase based on the legislative appropriation for that purpose;

(2) at least \$22,000 annually for children with severe emotional disturbance, or at least \$41,000 annually for adults with serious and persistent mental illness; or

(3) \$2.25 per capita for children with severe emotional disturbance, or \$2.10 per capita for adults with serious and persistent mental illness. Per capita must be based on the respective county adult or child population as determined by the most recent data of the state demographer.

B. The amount under item A, subitem (1), does not include special project funds under part 9535.1730 unless the commissioner determines a special project is more appropriately funded as part of the ongoing allocation under this part.

C. The commissioner shall increase the amounts in item A, subitems (2) and (3), to the extent funds are available, to enable more services to be provided as required by Minnesota Statutes, sections 245.461 to 245.4887.

D. If the appropriations under this part are decreased from the appropriations for the preceding year, then the per-county allocations in item A must be decreased in the same proportion as the decrease in the appropriation and must not be adjusted to reflect new data of the state demographer.

E. If the appropriations under this part remain the same as the appropriations in the preceding year, the per-county allocations in item A must be the same as those in the preceding year and must not be adjusted to reflect new data of the state demographer.

F. Two or more county boards that apply jointly for a grant shall receive a multicounty grant equal to the sum of the individual county board allocations in items A to E. Actual utilization of grants by each participating county board may be different from the individual county board allocation in items A to E if the county boards demonstrate to the commissioner that the differences are based on differing service needs of each county.

Statutory Authority: *MS s 245.484; 245.4886; 256E.12*

History: *17 SR 922; L 2003 1Sp14 art 11 s 11*

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9535.1730 FUNDING SPECIAL PROJECTS.

In addition to grants distributed under part 9535.1725, a county board may apply to the commissioner for grants for special projects designed to help children with severe emotional disturbance to function and remain with their families in the community and to help adults with serious and persistent mental illness to function and remain in the community.

Within the limits of appropriations available, the commissioner may award grants to county boards for special projects the commissioner believes will help children with severe emotional disturbance to function and remain with their families in the community and will help adults with serious and persistent mental illness to function and remain in the community.

Statutory Authority: *MS s 245.484; 245.4886; 256E.12*

History: *17 SR 922; L 2003 1Sp14 art 11 s 11*

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9535.1735 BUDGET REQUIREMENTS.

Subpart 1. **Estimated budget required.** When applying for a grant, the county board shall submit to the commissioner a budget covering all children's community-based mental health services or all adult community support and case management services to be provided by the county board, its contracting service providers, and any subcontracting service providers.

Additionally, the county board's budget must show the total projected revenue from the following sources:

- A. grant funds under parts 9535.1700 to 9535.1760;
- B. county funds;
- C. medical assistance;
- D. general assistance medical care;
- E. client fees;
- F. private insurance and other third-party payors;
- G. other public agencies, including schools, colleges, health departments, and corrections;
- H. other sources; and
- I. MinnesotaCare, under Minnesota Statutes, section 256.936.

Subp. 2. **Submittal of contracting service provider budgets.** The county board shall submit to the commissioner the name, budgeted expenditures, budgeted revenues, and a list of services provided by the county board's contracting service providers or subcontracting service providers.

Subp. 3. **Provider contracts and subcontracts.** All contracts for services between a county board and a service provider, and all contracts for services between a contracting service provider and a subcontracting service provider must be in accordance with parts 9535.1700 to 9535.1760.

Subp. 4. **Joint applications.** When two or more county boards apply jointly for grants, they shall designate which county board will:

- A. act as the host county to receive the grant; and
- B. designate a contact person.

County boards applying jointly shall agree by resolution on the assignment of responsibilities in parts 9535.1700 to 9535.1760.

Subp. 5. **Matching funds required for grants for adult community support and case management services.** When applying for a grant for adult community support and case management services, the county board shall provide matching funds of at least ten percent of the budget estimated under subpart 1. For purposes of this subpart, "matching funds" means the revenue from the sources listed in subpart 1, items B to H.

Statutory Authority: *MS s 245.484; 245.4886; 256E.12*

History: *17 SR 922; L 1993 c 247 art 4 s 11; L 1994 c 625 art 8 s 72; L 1995 c 234 art 8 s 56; L 2003 1Sp14 art 11 s 11*

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9535.1740 PAYMENT TO COUNTY BOARD.

Subpart 1. **Fiscal reports.** The commissioner shall specify requirements for fiscal reporting under Minnesota Statutes, section 256.01, subdivision 2, clause (17).

Additionally, if the commissioner requests, the county board shall submit, by service provider, a year-end summary of the total expenditures and the total revenues by revenue sources listed in part 9535.1735, subpart 1.

Subp. 2. **Grant payments.** The commissioner shall make quarterly grant payments under this part to a county board whose grant application is approved under parts 9535.1710 to 9535.1760. The commissioner shall make an initial advance in an amount sufficient to cover the time period from the beginning of the grant period to the next scheduled payment. The commissioner shall make subsequent quarterly grant payments on a reimbursement basis for actual expenditures reported by a county board to the commissioner. The commissioner shall adjust the quarterly grant payments for anticipated spending patterns and additional income according to subpart 3.

Total payments for a grant period must not exceed the lesser of the following, made according to a budget approved under parts 9535.1710 to 9535.1760:

- A. the grant award;
- B. 90 percent of actual expenditures under Minnesota Statutes, section 256.12; or

C. 100 percent of actual expenditures.

Subp. 3. **Disposition of additional income.** If a county board, its contracting service providers, or subcontracting service providers receive revenue for the services specified in the grant application approved by the commissioner exceeding the amount of revenue estimated in the budget, the county board shall:

A. use the additional income to provide additional children's community-based mental health services, or adult community support and case management services within the grant period in which the additional income is received;

B. use the additional income in place of the county board funds committed to services in the county board's approved budget, if the county board's total mental health expenditure, after the reduction in county funds, complies with the maintenance of effort provisions in Minnesota Statutes, section 245.48; or

C. notify the commissioner on an annual basis of the amount of actual excess revenue and request the commissioner to authorize the transfer of some or all of these excess funds to the subsequent grant period. The commissioner shall authorize the transfer or adjust the subsequent payment by an amount equal to the excess revenue.

Statutory Authority: *MS s 245.484; 245.4886; 256E.12*

History: *17 SR 922; L 2003 1Sp14 art 11 s 11*

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9535.1745 TERMINATION AND REPAYMENT OF FUNDS.

If the commissioner determines that state grants for services allocated to the county board are not being used as specified in a county board's approved grant application, the commissioner may terminate all or part of the grant funds and may require repayment according to Minnesota Statutes, section 245.483.

Statutory Authority: *MS s 245.484; 245.4886; 256E.12*

History: *17 SR 922; L 2003 1Sp14 art 11 s 11*

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9535.1750 REALLOCATION OF GRANT FUNDS.

The commissioner may reallocate returned or unused grant funds to other eligible county boards as a supplemental allocation under parts 9535.1700 to 9535.1760, or for special projects under part 9535.1730. For purposes of this part, "unused grant funds" means:

A. grant funds not awarded to a county board; or

B. grant funds awarded to a county board but not used.

Statutory Authority: *MS s 245.484; 245.4886; 256E.12*

History: 17 SR 922

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9535.1755 BUDGET AMENDMENTS.

A county board that finds it necessary to amend the budget approved by the commissioner shall follow the procedures for amending the adult mental health component of a county's community social services plan or the children's mental health component of a county's community social services plan. The commissioner shall give approval if a county board demonstrates a need to change the services funded based on an assessment of unmet needs of children with severe emotional disturbance and their families or adults with serious and persistent mental illness and if all the requirements of Minnesota Statutes, sections 245.461 to 245.4887, are met.

Statutory Authority: MS s 245.484; 245.4886; 256E.12

History: 17 SR 922; L 2003 1Sp14 art 11 s 11

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9535.1760 RECORDS.

Subpart 1. **Maintenance of financial records.** The county board, its contracting service providers, and any subcontracting service providers shall maintain financial records using generally accepted accounting principles so that:

- A. expenditures for services funded under parts 9535.1700 to 9535.1760 can be easily compared to the county board's approved budget for those services;
- B. all sources of income can be readily identified; and
- C. documentation is available for all expenditures.

Budget records must include copies of all fiscal reports submitted to meet state or federal requirements.

Subp. 2. **Maintenance of service records and required reporting.** The county board, its contracting service providers, and any subcontracting service providers shall maintain data specified by the commissioner on services funded under parts 9535.1700 to 9535.1760, so the commissioner can determine the effectiveness of the services in achieving the purpose specified under Minnesota Statutes, sections 245.461 to 245.4887.

The county board must submit periodic reports in the manner prescribed and on forms provided by the commissioner.

Subp. 3. **Availability and access.** The county board, its contracting service providers, and any subcontracting service providers shall upon request make all budget, expenditure, and service records pertaining to the provision of services funded under parts 9535.1700 to 9535.1760 available to the commissioner for audit purposes.

The commissioner shall be given access without prior notice to the physical plant and grounds of contracting service providers and subcontracting service providers and to documents and information relevant to services funded under parts 9535.1700 to 9535.1760. The commissioner shall be given access whenever the commissioner deems necessary. The requirements of Minnesota Statutes, chapter 13, pertaining to government data practices must be followed.

Additionally, the county board, its contracting service providers, and any subcontracting service providers shall allow the commissioner to make photocopies, photographs, and audio and videotape recordings at the commissioner's expense and in accordance with Minnesota Statutes, chapter 13.

Subp. 4. **Retention of records.** The county board, its contracting service providers, and any subcontracting service providers shall retain a copy of the records required under subpart 1 for three years plus the current year unless an audit requires a longer retention period. The records may be microfilmed at the end of the third year after the record was made. For purposes of this subpart, "copy of the records" means a photocopy or a computer-generated reproduction.

Statutory Authority: *MS s 245.484; 245.4886; 256E.12*

History: *17 SR 922; L 2003 1Sp14 art 11 s 11*

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FAMILY COMMUNITY SUPPORT SERVICE

9535.4000 APPLICABILITY AND SCOPE.

Subpart 1. **Applicability.** Parts 9535.4000 to 9535.4070 establish standards and procedures for the provision of family community support services to children with severe emotional disturbance and their families as authorized by Minnesota Statutes, sections 245.487 to 245.4889. Parts 9535.4000 to 9535.4070 are intended to comply with, and must be read in conjunction with, Minnesota Statutes, sections 245.461 to 245.4887 and chapter 256G. The county board of each county is responsible for administering, planning, monitoring, and evaluating family community support services under parts 9535.4000 to 9535.4070 as community social services.

Subp. 2. **Family community support services to children and their families; scope.** Minnesota Statutes, section 245.487, subdivision 3, requires the commissioner to create and ensure a comprehensive and coordinated set of mental health and other necessary services for children. Minnesota Statutes, section 245.4873, requires coordination of the development and delivery of mental health services for children to occur on the state and local levels and, in subdivision 3, requires coordination of the local system of care for children. Family community support services, a component of the local system of care, are children's community-based mental health services that are to be provided by a county board, directly or under contract, to a child who resides in the county and the child's family as part of Minnesota's children's mental health service system. Family community support services are designed to provide within the community the kind of support that historically has more commonly been provided to children in residential treatment. Minnesota Statutes, section 245.4873, subdivision 4, requires the child's case manager designated by the local agency to develop the child's family community support plan in a manner that reflects coordination among the local service system providers serving the child.

Family community support services must be provided in a manner that is consistent with the core values set forth by the Child Adolescent Service System Program (CASSP) in "A System of Care for Severely Emotionally Disturbed Children and Youth" is incorporated by reference and published by CASSP Technical Assistance Center, Georgetown University Child Development Center, 3800 Reservoir Road, NW, Washington, D.C. 20007 (Washington, D.C., 1986). It is not subject to frequent change. A copy is available at the Legislative Reference Library, 6th Floor, 100 Rev. Dr. Martin Luther King Jr. Blvd., St. Paul, MN 55155. This publication and the values and system it endorses are referred to as "the CASSP System of Care."

Statutory Authority: *MS s 245.484*

History: *18 SR 1519; L 2003 1Sp14 art 11 s 11; L 2007 c 147 art 8 s 38*

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9535.4010 DEFINITIONS.

Subpart 1. **Scope.** The terms used in parts 9535.4000 to 9535.4070 have the meanings given them in this part.

Subp. 2. **Adult with serious and persistent mental illness.** "Adult with serious and persistent mental illness" means a person 18 years of age or older who has serious and persistent mental illness as defined in Minnesota Statutes, section 245.462, subdivision 20, paragraph (c).

Subp. 3. **Case management services.** "Case management services," for a child, has the meaning given in Minnesota Statutes, section 245.4871, subdivision 3.

Subp. 4. **Child.** "Child" means a person less than 18 years old who is eligible for mental health case management and family community support services under Minnesota Statutes, section 245.4871, subdivision 6.

Subp. 5. **Child with severe emotional disturbance.** "Child with severe emotional disturbance" has the meaning given in Minnesota Statutes, section 245.4871, subdivision 6.

Subp. 6. **Clinical supervision.** "Clinical supervision," for a child, has the meaning given in Minnesota Statutes, section 245.4871, subdivision 7.

Subp. 7. **Commissioner.** "Commissioner" means the commissioner of human services or the commissioner's designated representative.

Subp. 8. **County board.** "County board" means the county board of commissioners or board established under the Joint Powers Act in Minnesota Statutes, section 471.59, or the Human Services Board Act in Minnesota Statutes, sections 402.01 to 402.10.

Subp. 9. **County of financial responsibility.** "County of financial responsibility" has the meaning given in Minnesota Statutes, section 256G.02, subdivision 4.

Subp. 10. **Crisis assistance.** "Crisis assistance," for a child, has the meaning given in Minnesota Statutes, section 245.4871, subdivision 9a. For purposes of family community support services to a child, crisis placement and respite care are components of crisis assistance, as specified in Minnesota Statutes, section 245.4871, subdivision 17, clause (6).

Subp. 11. **Day treatment.** "Day treatment," for a child, has the meaning given in Minnesota Statutes, section 245.4871, subdivision 10.

Subp. 12. **Diagnostic assessment.** "Diagnostic assessment," for a child, has the meaning given in Minnesota Statutes, section 245.4871, subdivision 11.

Subp. 13. **Emergency services.** "Emergency services," for a child, has the meaning given in Minnesota Statutes, section 245.4871, subdivision 14.

Subp. 14. **Emotional disturbance.** "Emotional disturbance" has the meaning given in Minnesota Statutes, section 245.4871, subdivision 15.

Subp. 15. **Family.** "Family" has the meaning given in Minnesota Statutes, section 245.4871, subdivision 16.

Subp. 16. **Family community support services.** "Family community support services" has the meaning given in Minnesota Statutes, section 245.4871, subdivision 17. Family community support services are not acute care hospital inpatient treatment as defined in Minnesota Statutes, section 245.4871, subdivision 2; residential treatment as defined in Minnesota Statutes, section 245.4871, subdivision 32; or regional treatment center services as specified in Minnesota Statutes, section 245.490. Family community support services are:

- A. client outreach to a child and the child's family as specified in part 9535.4038;
- B. medication monitoring where necessary as specified in part 9535.4041;
- C. assistance in developing independent living skills as specified in part 9535.4044;
- D. assistance in developing parenting skills necessary to address the needs of the child as specified in part 9535.4047;
- E. assistance with leisure and recreational activities as specified in part 9535.4050;
- F. crisis assistance including crisis placement and respite care as specified in part 9535.4035;
- G. professional home-based family treatment as specified in part 9535.4059;
- H. foster care with therapeutic supports as specified in part 9535.4062;
- I. day treatment as specified in part 9535.4056;
- J. assistance in locating respite care and special needs day care as specified in part 9535.4052; and
- K. assistance in obtaining potential financial resources, including those benefits specified in Minnesota Statutes, section 245.4884, subdivision 5, and specified in part 9535.4053.

Subp. 17. **Foster care with therapeutic support or therapeutic support of foster care.** "Foster care with therapeutic support" or "therapeutic support of foster care" has the meaning given in Minnesota Statutes, section 245.4871, subdivision 34.

Subp. 18. **Functional assessment.** "Functional assessment," for a child, means an assessment by the case manager of the child's:

- A. mental health symptoms as presented in the child's diagnostic assessment;
- B. mental health needs as presented in the child's diagnostic assessment;
- C. use of drugs and alcohol;
- D. vocational and educational functioning;
- E. social functioning, including the use of leisure time;

- F. interpersonal functioning, including relationships with the child's family;
- G. self-care and independent living capacity appropriate to the child's chronological age;
- H. medical and dental health;
- I. financial assistance needs;
- J. housing and transportation needs; and
- K. other needs and problems.

Subp. 19. **Individual family community support plan.** "Individual family community support plan" has the meaning given in Minnesota Statutes, section 245.4871, subdivision 19.

Subp. 20. **Individual treatment plan.** "Individual treatment plan" has the meaning given in Minnesota Statutes, section 245.4871, subdivision 21.

Subp. 21. **Legal representative.** "Legal representative" means a person specified in Minnesota Statutes, section 245.4871, subdivision 22.

Subp. 22. **Local agency.** "Local agency" means the county agency under the authority of the county board that is responsible for arranging and providing mental health services required under Minnesota Statutes, sections 245.487 to 245.4889, as a component of community social services.

Subp. 23. **Mental health professional.** "Mental health professional" means a person who has the qualifications as defined in Minnesota Statutes, section 245.4871, subdivision 27.

Subp. 24. [Repealed, 29 SR 1367]

Subp. 25. **Parent.** "Parent" means the birth or adoptive mother or father of a child. This definition does not apply to a person whose parental rights in relation to the child have been terminated by a court.

Subp. 26. **Professional home-based family treatment.** "Professional home-based family treatment" has the meaning given in Minnesota Statutes, section 245.4871, subdivision 31.

Subp. 27. **Service provider.** "Service provider" has the meaning given in Minnesota Statutes, section 245.4871, subdivision 33.

Subp. 28. **Special mental health consultant.** "Special mental health consultant" has the meaning given in Minnesota Statutes, section 245.4871, subdivision 33a.

Statutory Authority: *MS s 14.388; 245.484*

History: *18 SR 1519; L 2003 1Sp14 art 11 s 11; 29 SR 1367; L 2007 c 147 art 8 s 38*

Published Electronically: *October 15, 2013*

9535.4020 GENERAL PROVISIONS.

Subpart 1. **Design of family community support services.** The design for providing the components of family community support services must be based on the unique and changing needs

of the children eligible for the service who reside in the county and on the availability of community sources of services for the children and their families. A county board shall design family community support services to reduce the need for and use of more intensive, more costly, or restrictive placements of children both in number of admissions of children and the length of their stays in residential treatment facilities or regional treatment centers and to meet the requirements of Minnesota Statutes, sections 245.4874, 245.4876, 245.4881, and 245.4884, and parts 9535.4000 to 9535.4070. The county board must provide family community support services.

Subp. 2. **Joint county provision of services.** A county or two or more counties jointly may provide one or more of the components of family community support services directly or through a contract with another agency.

Subp. 3. **Denial of services.** A county board must assure that family community support services are not denied to children with severe emotional disturbance.

Subp. 4. **Notice of eligibility for family community support services.** The county board shall send a written notice about a child's eligibility for family community support services as required under Minnesota Statutes, section 245.4881, subdivision 2, paragraph (b).

Subp. 5. **Availability of special mental health consultant.** The county board must assure that a special mental health consultant is available as necessary to assist the county board in assessing and providing appropriate family community support and other mental health services for a child of a minority race or minority ethnic heritage.

Subp. 6. **Procedures to assure coordination.** The county board must establish procedures to assure ongoing contact and coordination between a child's case manager, the providers of the child's family community support services, the child's other mental health services, and the educational and social services related to the child's mental health needs. In the case of a child receiving case management services under parts 9520.0900 to 9520.0926, the case manager is responsible for ongoing coordination with any other person responsible for the planning, development, and delivery of mental health services for the child.

Subp. 7. **Referral of child for case management services.** The provider of family community support services to a child who is not receiving case management services must inform the child and the child's parent or legal representative as required under part 9535.4023 of the availability and potential benefits to the child of case management services according to Minnesota Statutes, section 245.4876, subdivision 4.

Subp. 8. **Refusal of case management services.** The refusal of case management services by a child or the parent or legal representative of a child who is determined eligible for case management services does not affect the child's eligibility to receive family community support services or other mental health services for which the child is eligible. If a child or a child's parent or legal representative has refused case management services for the child under parts 9520.0900 to 9520.0926, the providers of the child's family community support services shall coordinate the child's service delivery in the manner established by the county board to assure continuity of the child's services and avoid duplication of services.

Subp. 9. **Clinical supervision of family community support services.** The county board must assure, either directly or under contract, the clinical supervision of family community support services as specified in Minnesota Statutes, section 245.4871, subdivisions 7, 17, and 27.

Subp. 10. **Services needed and required plan.** A child's need for family community support services must be based on the mental health needs identified from a functional assessment and a diagnostic assessment of the child and on the child's strengths. A plan for the delivery of each family community support service identified as a mental health need must be developed for the child. The child's parent or legal representative and, unless clinically inappropriate, the child must be involved in all phases of the development and implementation of the plan. The plan shall identify the goals and outcomes of the services and how the outcomes are to be measured. Additionally, the plan shall be developed as specified in item A or B.

A. If the child is receiving case management services under parts 9520.0900 to 9520.0926, the child's individual family community support plan may serve as the required plan if it complies with part 9520.0918 and was developed with the participation of family community support services staff.

B. If the child does not have a case manager because the child or the parent or legal representative of the child has refused case management services under parts 9520.0900 to 9520.0926, the family community support service provider or providers of the child's services shall follow the procedures established under subpart 6 to coordinate and incorporate the child's family community support and other mental health services into a single planning document. The single planning document also must incorporate the child's individual treatment plans, if any.

Any other service plan developed by an agency providing services to the child may substitute for the single planning document required under this part if the other plan meets the requirements of this part.

Subp. 11. **Review and revision of plan required under subpart 10.** Family community support services staff, together with the child, unless clinically inappropriate, and the child's parent or legal representative must review and, if necessary, revise the goals and the child's progress toward the outcomes specified in the plan required for the child under subpart 10. The review and, if necessary, revision of the child's plan must be done at least once every 180 days after the development of the initial plan under subpart 10 or more often if necessary to reflect changes in the child's goals, strengths, and needs and in community resources while the child and the child's family are receiving family community support services. The review and any necessary revision must be based on an assessment of the child's functioning in the area of the family community support services the child is receiving.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519; L 2003 1Sp14 art 11 s 11*

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9535.4023 PERSONS TO RECEIVE INFORMATION AND PLAN SERVICES.

Subpart 1. **Persons to receive information and plan the child's services.** Except as specified in subparts 3 and 4, when family community support services are requested for a child or the child is referred for family community support services, the child's parent or legal representative, if any, has the right to:

- A. receive the notices and information specified in parts 9535.4000 to 9535.4070;
- B. make decisions about family community support services for the child; and

C. be included in planning the family community support services available to the child under parts 9535.4000 to 9535.4070.

Subp. 2. **Child's receipt of information and inclusion in planning services.** A child who is at least 12 years of age has the right to receive and a child who is less than 12 years of age may receive the notices and information specified under parts 9535.4000 to 9535.4068 and be included in planning family community support services available to the child under parts 9535.4000 to 9535.4068 unless these actions are determined by a mental health professional to be clinically inappropriate for the child's mental health needs. If the mental health professional determines that receiving information and participating are clinically inappropriate for the child's mental health needs, the reasons for the determination must be documented in the child's case record.

Subp. 3. **Circumstances when person other than parent has the right to consent and authorize family community support services.** Consent and authorization for family community support services must be obtained from the child's parent unless otherwise obtained in accordance with Minnesota Statutes, section 245.4876, subdivision 5.

Subp. 4. **Petition filed or court order issued.** If a petition has been filed under Minnesota Statutes, chapter 260, or a court order has been issued under Minnesota Statutes, section 260C.148 or 260C.151, and a guardian ad litem appointed, and if consent for family community support services has not been otherwise obtained from the child's parent or legal representative or the child, the local agency may request a court order under Minnesota Statutes, chapter 260, to authorize family community support services for the child.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519; L 1999 c 139 art 4 s 2*

Published Electronically: *October 15, 2013*

9535.4025 DETERMINATION OF CHILD'S ELIGIBILITY FOR SERVICES.

Subpart 1. **Determining eligibility.** To be eligible for family community support services, a child must have the characteristics defined and described in Minnesota Statutes, section 245.4871, subdivisions 6 and 15.

Subp. 2. **Request or referral for family community support services.** When a child or the parent or legal representative of a child requests an assessment or consents, as described in part 9535.4023, to the child's being assessed to determine eligibility for family community support

services, the family community support service provider must obtain an authorization to release information as required under Minnesota Statutes, section 245.4876, subdivision 5. Consent or authorization must be obtained from the child's parent, except when a condition in Minnesota Statutes, section 245.4876, subdivision 5, paragraph (b), clauses (1) and (2), applies. The family community support service provider must determine whether the child meets a criterion of eligibility for the family community support services as defined in Minnesota Statutes, section 245.4871, subdivision 6. If the child has had a diagnostic assessment or an updated diagnostic assessment as specified in Minnesota Statutes, section 245.4876, subdivision 2, the family community support provider must, upon obtaining the authorization required in this subpart, obtain a copy or, at least, confirm by telephone or letter the date of the assessment, and the findings and recommendations made in the diagnostic assessment about the family community support services needed by the child. If a child has not had a diagnostic assessment within 180 days before a request for family community support services for the child, the local agency must offer to assist the child and the child's family in obtaining one.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4028 TERMINATION OF FAMILY COMMUNITY SUPPORT SERVICES.

Family community support services to a child with severe emotional disturbance shall terminate when one of the events listed in items A to D occurs.

A. A mental health professional who has provided mental health services to the child furnishes a written opinion that the child no longer meets the eligibility criteria in Minnesota Statutes, section 245.4871, subdivision 6. Upon receipt of the mental health professional's written opinion that the child no longer meets the eligibility criteria, the family community support service provider must inform, as described in part 9535.4023, the child and the child's parent or legal representative of the ability to appeal the decision.

B. The child or the child's parent or legal representative as described in part 9535.4023, together with the child's family community support service provider and the child's case manager, if any, mutually decide that the child no longer needs the family community support service identified in the child's individual family community support plan because the child has achieved the goals and outcomes specified in the plan.

C. The child or the child's parent or legal representative as described in part 9535.4023 refuses further family community support services.

D. The child becomes age 18.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4030 OUTCOMES OF FAMILY COMMUNITY SUPPORT SERVICES.

The persons assigned by or under contract with the local agency to provide family community support services to a child shall use a process designed to assist the child with severe emotional disturbance to pursue the outcomes of the child's improved or maintained functioning and mental health and the child's remaining with the child's family in the community. To assist the child to meet these outcomes, family community support services must be provided in a manner consistent with the mission of the Minnesota comprehensive children's mental health act as specified in Minnesota Statutes, section 245.487, subdivision 3, and the outcomes of case management services as specified in part 9520.0904. Additionally, a child's family community support services must be designed to:

A. assist the child and the child's family to achieve the outcomes identified in the plan required for the child under part 9535.4020, subpart 10, and the service priorities agreed to by the child, the child's parent, and the service provider. The plan must be consistent with the outcomes of family community support services as specified in Minnesota Statutes, section 245.4884, subdivision 1. These outcomes are to improve the ability of the child to:

- (1) manage basic activities of daily living;
- (2) function appropriately in home, school, and community settings;
- (3) participate in leisure time or community youth activities;
- (4) set goals and plans;
- (5) reside with the family in the community; and
- (6) participate in after-school and summer activities;

B. assist the child to make a smooth transition among mental health, vocational rehabilitation, and education services;

C. ensure that the state and local agencies providing transition services to the child work together so the child has the opportunity to access vocational rehabilitation and educational services that will assist the child to live and function independently within the community;

D. at least six months before the 18th birthday of a child who is not receiving case management services under parts 9520.0900 to 9520.0926, assist the child and, as appropriate, the child's parent or legal representative in assessing the child's need to receive case management services to adults with serious and persistent mental illness, community support services, and other mental health services;

E. improve overall family functioning if clinically appropriate to the child's needs;

F. assist the child to live in families or settings that offer a safe, permanent relationship with nurturing parents or caretakers; and

G. for the child whose best interest is to reside away from the child's own home, ensure the continuation of family community support services appropriate to the child's mental health

needs in a setting as similar to and as geographically near the child's family and community as feasible.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4035 CRISIS ASSISTANCE SERVICES.

Subpart 1. **Crisis assistance services, including crisis placement and crisis respite care.** Crisis assistance services for a child, including crisis placement and crisis respite care, must be coordinated with, but must not duplicate, emergency services as defined in Minnesota Statutes, section 245.4871, subdivision 14. The crisis assistance services must meet the requirements of Minnesota Statutes, section 245.4871, subdivision 9a.

Subp. 2. **Crisis assistance placement.** When the child is in crisis and needs care outside of the child's home and the child or the child's parent or legal representative as described in part 9535.4023 requests crisis assistance, the provider of crisis assistance services shall help the child and the child's parent or legal representative to locate and access a crisis setting appropriate to the child's needs.

Subp. 3. **Crisis respite care services.** Crisis respite care services shall be designed to provide temporary or periodic care and supervision of a child for the purpose of providing relief to the child's caregiver. The crisis respite care service may be provided in the child's home or in a setting other than the child's home.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4038 CLIENT OUTREACH SERVICES.

The county board shall provide client outreach services designed to locate children within the community who may have a severe emotional disturbance, inform them and their families of available children's community-based mental health services, including family community support and case management services, and assure that they have access to those services by assisting the family to arrange for transportation, if necessary. Client outreach services must:

- A. be conducted throughout the calendar year;
- B. occur at the site requested by the child and the child's parent or legal representative;
- C. be provided in a manner which promotes the involvement of the child and the child's family;
- D. occur face-to-face whenever possible;
- E. be provided in a manner which is sensitive to cultural differences and special needs; and

F. provide the child and the child's parent or legal representative, in writing, the information specified in part 9535.4070.

Outreach services to providers in the local system of care and to families must include the development and distribution of information on the availability of family community support services and case management services and how to access these services.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4041 MEDICATION MONITORING SERVICES.

When a child is taking psychotropic medication prescribed by a physician, medication monitoring services must be designed to assist the child, the child's parent or legal representative, and, with the written consent of the child or the child's parent or legal representative, other persons who provide direct care to the child. The services must assist the child, parent or representative, or direct caregiver to:

A. obtain information about the psychotropic medication that has been prescribed for the child;

B. watch for physical or behavioral changes in the child which may be caused by the child's use of, misuse of, or failure to take the prescribed psychotropic medication; and

C. obtain access to and assistance from the child's source of medical care.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4044 ASSISTANCE IN DEVELOPING INDEPENDENT LIVING SKILLS.

Independent living skills services including transition services to a child must be designed to assist the child to develop the skills needed to remain and participate with others in the child's family, child care setting, school, place of employment, if any, community, and in recreational or social activities. Services must address skills that are appropriate for the child's age.

Assistance in developing independent living skills may include a variety of methods or strategies appropriate to the child's developmental age that help children with severe emotional disturbance carry out the tasks of daily living, develop a positive regard for self, problem solve, learn skills to advocate on their own behalf, and make transitions to community resources in order to secure, maintain, and support employment and make educational choices.

Services may be provided in individual or group settings as specified in the individual family community support plan or other plan required in part 9535.4020, subpart 10.

If a child who is at least 14 years of age receives independent living skills services or transition services from more than one provider, or as part of the child's individualized education program, the family community support providers must attempt to coordinate the child's services with the other providers and with the child's school in order to avoid duplicating services, assure the child's access to needed services, and make transitions between education and employment.

For purposes of this part, "transition services" means a set of activities to promote movement from school to postschool activities, including postsecondary education when applicable, vocational training, integrated employment, including supported employment, continuing and adult education, and independent living skills. Independent living skills are based on individual needs, taking into account a child's preferences and interests, and must include instruction, community experience, and the development of employment and other postschool adult living objectives.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519; L 2011 1Sp11 art 3 s 12*

Published Electronically: *October 15, 2013*

9535.4047 ASSISTANCE IN DEVELOPING PARENTING SKILLS NECESSARY TO ADDRESS THE NEEDS OF THE CHILD.

Assistance in developing parenting skills identified as needed or requested by a child's parent must be designed to address the individual, unique needs of the child and the child's parent. In assisting parents to develop parenting skills, the provider may use written information, direct assistance, support services, or other means as requested and accepted by the child's parents or the child as specified in part 9535.4023. The information must include but is not limited to information about parenting techniques and interventions that address specific behaviors or issues directly related to, or the result of, the child's severe emotional disturbance. Services commonly available in a county to provide information about parenting techniques may be used to meet the requirements of this part if the service is modified or augmented in a manner that addresses the individual, unique needs of the child and the child's parent.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4050 ASSISTANCE WITH LEISURE AND RECREATIONAL ACTIVITIES.

Assistance with leisure and recreational activities provided as a family community support service to a child must be designed to:

A. assist the child with severe emotional disturbance and the child's parent or legal representative in locating, accessing, and participating in leisure and recreational services for the child;

B. assist the child to gain the physical, mental, and social skills necessary to participate in age-appropriate activities;

C. promote the use of community recreation programs and community education programs or activities that are identified on the child's individual family community support plan or other plan prepared according to part 9535.4020, subpart 10; and

D. address specific therapeutic objectives.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4052 ASSISTANCE IN LOCATING RESPITE CARE AND SPECIAL NEEDS DAY CARE.

Assistance in locating respite care and special needs day care for a child must be provided to a child's parent or legal representative who requests respite care or special needs day care if these services are identified in the child's plan required by part 9535.4020, subpart 10. The assistance may include recruiting respite care providers and training them in the special needs of children with severe emotional disturbance.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4053 ASSISTANCE IN OBTAINING POTENTIAL FINANCIAL RESOURCES.

Assistance in obtaining potential financial resources for a child or the parent or legal representative of a child for whom the county is financially responsible and who may be eligible for benefits shall be designed to:

A. inform and offer to help the child, parent, or legal representative to apply for and obtain Supplemental Security Income, medical assistance, Medicare, SNAP, the Minnesota family investment program, and other federal benefits if appropriate;

B. if requested, assist the child or the child's parent or legal representative to apply for programs and benefits under item A;

C. if the child or the child's parent or legal representative is not eligible for the benefits in item A, inform the child or the child's parent or legal representative and offer to assist in applying for MinnesotaCare, general assistance, general assistance medical care, health services funded under section 134 of the Tax Equity and Fiscal Responsibility Act of 1982 (TEFRA), Public Law 97-248, or other benefits for which the child may be eligible. For purposes of this item and item B, "assist" means accompanying the child and the child's parent or legal representative to the agency through which application is made, to obtain and help the child or the child's parent or legal representative complete forms required to apply for the benefits, and to contact agencies that determine eligibility for benefits about the possible eligibility of the child or the child's parent or legal representative. Assist does not mean the provider will complete the application for the child or the child's parent or legal representative;

D. offer, and, if requested, assist the child or the child's parent or legal representative in determining the process and completing the materials related to appealing a denial, suspension, reduction, or termination of benefits.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519; L 2003 1Sp14 art 1 s 106; L 2006 c 212 art 1 s 25; L 2019 1Sp9 art 1 s 42*

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9535.4056 DAY TREATMENT SERVICES.

Unless a county board has requested a waiver from including day treatment services as a component of family community support services under Minnesota Statutes, section 245.4884, subdivision 2, paragraph (b), and the commissioner has approved the request, a county board shall make day treatment services available as specified in Minnesota Statutes, section 245.4884, subdivision 2, paragraph (a). Even with an approved waiver, however, a county must make day treatment services available to a child with severe emotional disturbance who is eligible for day treatment under medical assistance. When a medical assistance-eligible child receives day treatment services, the county board must require the services provider to maintain records of the child's day treatment services as required under Minnesota Statutes, section 256B.0943, for mental health services. These records are to be maintained in addition to those required by part 9535.4069.

Statutory Authority: *MS s 245.484; 256B.04*

History: *18 SR 1519; 35 SR 1967*

Published Electronically: *October 15, 2013*

9535.4059 PROFESSIONAL HOME-BASED FAMILY TREATMENT.

Professional home-based family treatment services must be available to a child who is at risk of out-of-home placement, who is in out-of-home placement due to the child's emotional disturbance, or who is returning to the home from out-of-home placement. The services must be an appropriate alternative to residential treatment and must provide intensive, time-limited intervention to help the child and the child's family learn the skills necessary to keep the child within the home and community. The professional home-based family treatment services must be provided as specified in Minnesota Statutes, section 245.4884, subdivision 3. Additionally, if the child receiving the professional home-based mental health services is eligible for medical assistance, the services must comply with the requirements of part 9505.0324.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4062 FOSTER CARE WITH THERAPEUTIC SUPPORTS.

Foster care with therapeutic supports or therapeutic support foster care must be designed to provide a child a therapeutic family environment and to provide support to foster families caring for children with severe emotional disturbance. The foster care with therapeutic supports must incorporate the child's treatment process into the family environment. Additionally, the foster care with therapeutic supports must provide the foster family with training about severe emotional disturbances in children and the effects of the disturbances on the children's behaviors.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4065 RELEASE OF INFORMATION ABOUT A CHILD.

The release of a record or information about a child receiving family community support services under parts 9535.4000 to 9535.4070 to another person or entity must comply with Minnesota Statutes, section 245.4876, subdivision 5.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4068 ORIENTATION AND TRAINING.

Subpart 1. **Orientation.** The local agency must ensure that each person who is employed for pay or under contract to provide family community support services takes part in:

A. orientation before the person begins to provide family community support services. The orientation shall include:

(1) the provisions, applicability, and reporting requirements of the Minnesota Government Data Practices Act in Minnesota Statutes, sections 13.01 to 13.48, and parts 9560.0210 to 9560.0234 and 9535.4000 to 9535.4070; and

(2) training in procedures for responding to a child's crisis according to part 9535.4035;

B. further training in the areas specified in subitems (1) and (2), no later than 30 calendar days after the person begins to provide family community support services unless the person can document having skills and knowledge about subitems (1) and (2). The training shall address:

(1) the different diagnostic classifications of emotional disturbance and the specific characteristics of the classifications; and

(2) the use of psychotropic medications in children and the potential side effects of the medication.

Subp. 2. **Continuing training.** The local agency must ensure that a person who is employed for pay or under contract to provide family community support services receives at least 20 hours of continuing training in a two-year period. Training topics shall be chosen from the items specified in subpart 1 and:

A. the provisions of the Minnesota Comprehensive Children's Mental Health Act in Minnesota Statutes, sections 245.487 to 245.4889;

B. the core values and principles of the Child Adolescent Service System Program (CASSP);

C. how to coordinate services between the public education system and the mental health system;

D. procedures for providing crisis assistance services according to Minnesota Statutes, section 245.4871, subdivision 9a;

E. information about eligibility for the programs specified in part 9535.4053;

F. skills needed to be supportive of a parent of a child with severe emotional disturbance;

G. how to provide services effectively to a child of a minority race or minority ethnic heritage; and

H. how to provide services for children with developmental disabilities or other special needs.

Completion of required training must be documented in the training participant's personnel record.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519; L 2007 c 147 art 8 s 38*

Published Electronically: *October 15, 2013*

9535.4069 PROVIDER'S RECORDS OF SERVICES TO A CHILD.

A family community support services provider employed by or under contract to a county must maintain a record for each child receiving family community support services from the provider. The record must contain a copy of the individual family community support plan, if any, and the plan required for the child under part 9535.4020, subpart 10, the names of the child's parents or legal representative, evidence of the child's eligibility for family community support services, names of medications, if any, prescribed for the child, and name and telephone number of the prescribing physician.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

Published Electronically: *October 15, 2013*

9535.4070 APPEAL RIGHTS.

A child or the parent or legal representative of a child who applies for and receives family community support services has the right to receive the information specified in Minnesota Statutes, section 245.4887, and to appeal according to Minnesota Statutes, section 256.045.

Statutory Authority: *MS s 245.484*

History: *18 SR 1519*

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