

Public Welfare and Related Activities

CHAPTER 245

DEPARTMENT OF PUBLIC WELFARE

Sec.		Sec.	
245.03	Department of public welfare established; commissioner	245.69	Additional duties of commissioner of public welfare
245.0311	Transfer of personnel	245.691	Group homes; pilot program certain counties
245.0312	Designating special units and regional centers	245.692	Alcoholism and drug abuse; detoxification center
245.0313	Aid to the disabled; mentally retarded	245.693	Acquisition of facilities
245.033	Payments under manpower development training act excluded from computation of need under certain assistance acts	245.694	Alcoholic and drug counselors
245.04	Transfer of powers and duties	245.695	State administration
245.05	Succession to rights and obligations of former agencies	245.70	Mentally ill and mentally retarded; federal aid
245.06	Pending proceedings and business	245.71	Conditions to federal aid for mentally ill and mentally retarded
245.07	Transfer of property and employees of former agencies	245.75	Federal grants for Indians
245.072	Mental retardation division	245.76	Indian relief; reimbursement of costs
245.46	Residential treatment center	245.765	Reimbursement of county for certain Indian welfare costs
245.51	Interstate compact on mental health	245.77	Legal settlement of persons receiving assistance, acceptance of federal funds
245.52	Commissioner of public welfare as compact administrator	245.78	Licensing of day care facilities and services for mentally ill, inebriate and physically handicapped
245.53	Transmittal of copies of act	245.79	Exclusions
245.61	Commissioner of public welfare may make grants for local mental health programs	245.80	Revocation and renewal; fee
245.62	Community mental health program; tax levy	245.81	County welfare placement
245.63	Assistance or grant	245.82	Staff; delegation of duties
245.64	Funds allocated	245.83	Grants for child care service; definitions
245.65	Limitation on grants	245.84	Authorization to make provisional grants
245.66	Community health boards	245.85	Termination of all or part of a grant
245.67	Members of community health boards; terms, vacancies, removal	245.86	Authorization to certain municipalities to make grants
245.68	Duties of community health boards	245.87	Allocations to cities of first class

245.01 [Repealed, 1953 c 593 s 6]

245.02 [Repealed, 1953 c 593 s 6]

245.03 DEPARTMENT OF PUBLIC WELFARE ESTABLISHED; COMMISSIONER. There is hereby created and established a department of public welfare. A commissioner of public welfare shall be appointed by the governor with the advice and consent of the senate for a four year term which shall coincide with the term of the governor and until his successor is duly appointed and has qualified. The governor may remove the commissioner at any time for cause after notice and hearing. In case of a vacancy, the governor may appoint a commissioner, who shall immediately take office and shall carry on all of the duties of the office until the next session of the legislature, when his appointment shall be submitted to the senate for approval. The commissioner, who shall be in unclassified service, shall be selected on the basis of ability and experience in welfare and without regard to political affiliations. Subject to the provisions of sections 245.03 to 245.12 and other applicable laws, now or hereinafter enacted, the commissioner shall have the power to organize his department in such manner as he may deem necessary, and to appoint a deputy commissioner in unclassified service. He shall also appoint such other subordinate officers, employees and agents as he may deem necessary to discharge the functions of the department; and define the duties of such officers, employees and agents and to delegate to them any of his powers or duties subject to his control and under such conditions as he may prescribe. Appointments to exercise delegated powers shall be written orders filed with the secretary of state. The commissioner shall give bond in the sum of \$10,000. On January 4, 1971, the term of the incumbent commissioner shall expire.

[1953 c 593 s 1; 1965 c 45 s 17; 1969 c 1129 art 8 s 6]

245.031 [Obsolete]

245.0311 TRANSFER OF PERSONNEL. (a) Notwithstanding any other law to the contrary, the commissioner of public welfare shall transfer authorized positions between institutions under his control in order to properly staff the institutions, taking into account the differences between programs in each institution.

(b) Notwithstanding any other law to the contrary, the commissioner of

corrections may transfer authorized positions between institutions under his control in order to more properly staff the institutions.

[1971 c 961 s 18]

245.0312 DESIGNATING SPECIAL UNITS AND REGIONAL CENTERS. Notwithstanding any provision of law to the contrary, during the biennium, the commissioner of public welfare, upon the approval of the governor after consulting with the legislative advisory committee, may designate portions of hospitals for the mentally ill under his control as special care units for mentally retarded or inebriate persons, or as nursing homes for persons over the age of 65, and he likewise may designate portions of the hospitals designated in Minnesota Statutes 1969, Section 252.025, Subdivision 1, as special care units for mentally ill or inebriate persons, and he may plan to develop all hospitals for mentally ill, mentally retarded, or inebriate persons under his control as multi-purpose regional centers for programs related to all of the said problems.

If approved by the governor, the commissioner may rename the state hospital as a state regional center and appoint the hospital administrator as administrator of the center, in accordance with section 246.0251.

The directors of the separate program units of regional centers shall be responsible directly to the commissioner in his discretion.

[1971 c 961 s 19]

245.0313 AID TO THE DISABLED; MENTALLY RETARDED. Notwithstanding any provision of law to the contrary, the commissioner of public welfare may license all or any portion of a public institution under his control as a medical facility for skilled nursing home care of the mentally retarded as prescribed by the provisions of section 144.583.

Notwithstanding any provision of law to the contrary, the cost of care not met by federal funds for any mentally retarded patient eligible for the medical assistance program or aid to the disabled program in institutions under the control of the commissioner of public welfare shall be paid for from state funds.

[1971 c 961 s 20]

245.032 [Obsolete]

245.033 PAYMENTS UNDER MANPOWER DEVELOPMENT TRAINING ACT EXCLUDED FROM COMPUTATION OF NEED UNDER CERTAIN ASSISTANCE ACTS. With respect to any program of old age assistance, medical assistance, aid to the blind, or aid to the disabled, administered pursuant to chapters 245, or 256B, or any program of relief of the poor administered pursuant to chapter 261, the following amounts are excluded from a person's income or resources for the purposes of determining the person's need under any of the above mentioned programs:

(1) \$20 per week training incentive allowance under the manpower development and training act of 1962, as amended, and

(2) Such sums as are paid to defray training expenses under the same act.

[1967 c 741 s 25; 1969 c 6 s 31; 1969 c 334 s 1]

245.04 TRANSFER OF POWERS AND DUTIES. All powers and duties now vested in or imposed upon the director of social welfare and the division of social welfare and upon the director of public institutions and the division of public institutions, by the laws of this state or by any law of the United States are hereby transferred to, vested in, and imposed upon the commissioner of public welfare. The commissioner of public welfare is hereby constituted the "state agency" as defined by the social security act of the United States.

[1953 c 593 s 2]

245.05 SUCCESSION TO RIGHTS AND OBLIGATIONS OF FORMER AGENCIES. The department of public welfare to which the functions, powers, and duties of a previously existing department or other agency are by sections 245.03 to 245.12 assigned and transferred shall be deemed and held to constitute a continuation of the former department or agency as to matters within the jurisdiction of the former department or agency, and not a new authority, for the purpose of succession to all rights, powers, duties, and obligations of the former department or agency as constituted at the time of such assignment or transfer, except as otherwise provided by such sections, with the same force and effect as if such functions, powers and duties had not been assigned or transferred.

[1953 c 593 s 3]

MINNESOTA STATUTES 1971

2737

DEPARTMENT OF PUBLIC WELFARE 245.072

245.06 PENDING PROCEEDINGS AND BUSINESS. Any proceeding, court action, prosecution, or other business or matter undertaken or commenced prior to April 21, 1953, by a department or other agency, the functions, powers, and duties whereof are by sections 245.03 to 245.12 assigned and transferred to the department of public welfare, and are still pending on April 21, 1953, may be conducted and completed by the new department in the same manner and under the same terms and conditions and with the same effect as though it were undertaken or commenced and were conducted or completed by the former department or agency prior to said transfer.

[1953 c 593 s 4]

245.07 TRANSFER OF PROPERTY AND EMPLOYEES OF FORMER AGENCIES. The head of a department or other agency whose functions, powers, and duties are by sections 245.03 to 245.12 assigned and transferred to the department of public welfare shall transfer and deliver to such department of public welfare all contracts, books, maps, plans, papers, records, and property of every description within his jurisdiction or control, and shall also transfer thereto any or all employees engaged in the exercise of such functions, powers, or duties. The commissioner of public welfare to which such assignment or transfer is made is hereby authorized to take possession of said property, and shall take charge of said employees and shall employ them in the exercise of their respective functions, powers, and duties transferred as aforesaid, without reduction of compensation, subject, however, to change or termination of employment or compensation as may be otherwise provided by law.

[1953 c 593 s 5]

245.071 [Repealed, 1969 c 334 s 2]

245.072 MENTAL RETARDATION DIVISION. A mental retardation division is created in the department of public welfare which shall coordinate those laws administered and enforced by the commissioner of public welfare relating to mental retardation and mental deficiency which the commissioner may assign to the division. The mental retardation division shall be under the supervision of a director whose responsibility it shall be to maximize the availability of federal or private moneys for programs to assist mentally retarded and mentally deficient persons. The commissioner shall appoint the director who shall serve in the classified service of the state civil service. The commissioner may employ additional personnel with such qualifications and in such numbers as are reasonable and are necessary to carry out the provisions of this section.

[1971 c 486 s 1]

245.08 [Obsolete]

245.09-245.12 [Unnecessary]

245.21 [Renumbered 256.451]

245.22 [Renumbered 256.452]

245.23 [Renumbered 256.453]

245.24 [Renumbered 256.454]

245.25 [Renumbered 256.455]

245.26 [Renumbered 256.456]

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245.31 [Renumbered 256.462]

245.32 [Renumbered 256.463]

245.33 [Renumbered 256.464]

245.34 [Renumbered 256.465]

245.35 [Renumbered 256.466]

245.36 [Renumbered 256.467]

245.37 [Renumbered 256.468]

245.38 [Renumbered 256.469]

245.39 [Renumbered 256.471]

245.40 [Renumbered 256.472]

245.41 [Renumbered 256.473]

245.42 [Renumbered 256.474]

245.43 [Renumbered 256.475]

245.46 RESIDENTIAL TREATMENT CENTER. Subdivision 1. **Establishment, location, control.** There is hereby established the Minnesota Residential Treatment Center to be located within 25 miles of the Minneapolis campus of the University of Minnesota which shall be a treatment center for emotionally disturbed and psychotic children and shall be under the general control and management of the commissioner of public welfare.

Subd. 2. **Persons eligible for admission.** The commissioner may transfer or admit to the center any child who, in his opinion, will benefit from the services available thereat and who is under commitment to a state hospital as mentally ill, or who is under guardianship of the commissioner, or who is under temporary custody of a county welfare board and referred by the board to the commissioner or whose parents or guardian seek his admission as a voluntary patient.

Subd. 3. **Power of superintendent of center.** The superintendent of the center shall have the same powers in regard to provisional and final discharge of patients under commitment as mentally ill as the superintendent of a state hospital for the mentally ill.

Subd. 4. **Acquisition of site.** The commissioner of administration is authorized to acquire by purchase with the approval of the governor, by gift, or condemnation, a suitable tract of land for the construction of the center.

Subd. 5. **Costs of care and treatment, payment.** Ninety percent of the costs of care and treatment at the center shall be paid by the state. The remaining ten percent shall be paid by county of commitment for children under guardianship of the commissioner, by the county liable for cost of state mental hospital care for children under commitment as mentally ill, and by the county of settlement for poor relief purposes for other children admitted to the center.

[1957 c 957 s 1-5]

245.51 INTERSTATE COMPACT ON MENTAL HEALTH. The interstate compact on mental health is hereby enacted into law and entered into by this state with all other states legally joining therein in the form as follows:

INTERSTATE COMPACT ON MENTAL HEALTH

The contracting states solemnly agree that:

ARTICLE I

The party states find that the proper and expeditious treatment of the mentally ill and mentally deficient can be facilitated by cooperative action, to the benefit of the patients, their families, and society as a whole. Further, the party states find that the necessity of and desirability for furnishing such care and treatment bears no primary relation to the residence or citizenship of the patient but that, on the contrary, the controlling factors of community safety and humanitarianism require that facilities and services be made available for all who are in need of them. Consequently, it is the purpose of this compact and of the party states to provide the necessary legal basis for the institutionalization or other appropriate care and treatment of the mentally ill and mentally deficient under a system that recognizes the paramount importance of patient welfare and to establish the responsibilities of the party states in terms of such welfare.

ARTICLE II

As used in this compact:

(a) "Sending state" shall mean a party state from which a patient is transported pursuant to the provisions of the compact or from which it is contemplated that a patient may be so sent.

(b) "Receiving state" shall mean a party state to which a patient is transported pursuant to the provisions of the compact or to which it is contemplated that a patient may be so sent.

(c) "Institution" shall mean any hospital or other facility maintained by a party state or political subdivision thereof for the care and treatment of mental illness or mental deficiency.

(d) "Patient" shall mean any person subject to or eligible as determined by the laws of the sending state, for institutionalization or other care, treatment, or supervision pursuant to the provisions of this compact.

(e) "After-care" shall mean care, treatment and services provided a patient, as defined herein, on convalescent status or conditional release.

(f) "Mental illness" shall mean mental disease to such extent that a person so afflicted requires care and treatment for his own welfare, or the welfare of others, or of the community.

(g) "Mental deficiency" shall mean mental deficiency as defined by appropriate clinical authorities to such extent that a person so afflicted is incapable of managing himself and his affairs, but shall not include mental illness as defined herein.

(h) "State" shall mean any state, territory or possession of the United States, the District of Columbia, and the Commonwealth of Puerto Rico.

ARTICLE III

(a) Whenever a person physically present in any party state shall be in need of institutionalization by reason of mental illness or mental deficiency, he shall be eligible for care and treatment in an institution in that state irrespective of his residence, settlement or citizenship qualifications.

(b) The provisions of paragraph (a) of this article to the contrary notwithstanding, any patient may be transferred to an institution in another state whenever there are factors based upon clinical determinations indicating that the care and treatment of said patient would be facilitated or improved thereby. Any such institutionalization may be for the entire period of care and treatment or for any portion or portions thereof. The factors referred to in this paragraph shall include the patient's full record with due regard for the location of the patient's family, character of the illness and probable duration thereof, and such other factors as shall be considered appropriate.

(c) No state shall be obliged to receive any patient pursuant to the provisions of paragraph (b) of this article unless the sending state has given advance notice of its intention to send the patient; furnished all available medical and other pertinent records concerning the patient; given the qualified medical or other appropriate clinical authorities of the receiving state an opportunity to examine the patient if said authorities so wish; and unless the receiving state shall agree to accept the patient.

(d) In the event that the laws of the receiving state establish a system of priorities for the admission of patients, an interstate patient under this compact shall receive the same priority as a local patient and shall be taken in the same order and at the same time that he would be taken if he were a local patient.

(e) Pursuant to this compact, the determination as to the suitable place of institutionalization for a patient may be reviewed at any time and such further transfer of the patient may be made as seems likely to be in the best interest of the patient.

ARTICLE IV

(a) Whenever, pursuant to the laws of the state in which a patient is physically present, it shall be determined that the patient should receive after-care or supervision, such care or supervision may be provided in a receiving state. If the medical or other appropriate clinical authorities having responsibility for the care and treatment of the patient in the sending state shall have reason to believe that after-care in another state would be in the best interest of the patient and would not jeopardize the public safety, they shall request the appropriate authorities in the receiving state to investigate the desirability of affording the patient such after-care in said receiving state, and such investigation shall be made with all reasonable speed. The request for investigation shall be accompanied by complete information concerning the patient's intended place of residence and the identity of the person in whose charge it is proposed to place the patient, the complete medical history of the patient, and such other documents as may be pertinent.

(b) If the medical or other appropriate clinical authorities having responsibility for the care and treatment of the patient in the sending state and the appropriate authorities in the receiving state find that the best interest of the patient would be served thereby, and if the public safety would not be jeopardized thereby, the patient may receive after-care or supervision in the receiving state.

(c) In supervising, treating, or caring for a patient on after-care pursuant to the terms of this article, a receiving state shall employ the same standards of visitation, examination, care, and treatment that it employs for similar local patients.

ARTICLE V

Whenever a dangerous or potentially dangerous patient escapes from an institution in any party state, that state shall promptly notify all appropriate authorities within and without the jurisdiction of the escape in a manner reasonably calculated to facilitate the speedy apprehension of the escapee. Immediately upon the apprehension and identification of any such dangerous or potentially dangerous patient, he shall be detained in the state where found pending disposition in accordance with law.

ARTICLE VI

The duly accredited officers of any state party to this compact, upon the establishment of their authority and the identity of the patient, shall be permitted to transport any patient being moved pursuant to this compact through any and all states party to this compact, without interference.

ARTICLE VII

(a) No person shall be deemed a patient of more than one institution at any given time. Completion of transfer of any patient to an institution in a receiving state shall have the effect of making the person a patient of the institution in the receiving state.

(b) The sending state shall pay all costs of and incidental to the transportation of any patient pursuant to this compact, but any two or more party states may, by making a specific agreement for that purpose, arrange for a different allocation of costs as among themselves.

(c) No provision of this compact shall be construed to alter or affect any internal relationships among the departments, agencies and officers of and in the government of a party state, or between a party state and its subdivisions, as to the payment of costs, or responsibilities therefor.

(d) Nothing in this compact shall be construed to prevent any party state or subdivision thereof from asserting any right against any person, agency or other entity in regard to costs for which such party state or subdivision thereof may be responsible pursuant to any provision of this compact.

(e) Nothing in this compact shall be construed to invalidate any reciprocal agreement between a party state and a non-party state relating to institutionalization, care or treatment of the mentally ill or mentally deficient, or any statutory authority pursuant to which such agreements may be made.

ARTICLE VIII

(a) Nothing in this compact shall be construed to abridge, diminish, or in any way impair the rights, duties, and responsibilities of any patient's guardian on his own behalf or in respect of any patient for whom he may serve, except that where the transfer of any patient to another jurisdiction makes advisable the appointment of a supplemental or substitute guardian, any court of competent jurisdiction in the receiving state may make such supplemental or substitute appointment and the court which appointed the previous guardian shall upon being duly advised of the new appointment, and upon the satisfactory completion of such accounting and other acts as such court may by law require, relieve the previous guardian of power and responsibility to whatever extent shall be appropriate in the circumstances; provided, however, that in the case of any patient having settlement in the sending state, the court of competent jurisdiction in the sending state shall have the sole discretion to relieve a guardian appointed by it or continue his power and responsibility, whichever it shall deem advisable. The court in the receiving state may, in its discretion, confirm or reappoint the person or persons previously serving as guardian in the sending state in lieu of making a supplemental or substitute appointment.

(b) The term "guardian" as used in paragraph (a) of this article shall include any guardian, trustee, legal committee, conservator, or other person or agency however denominated who is charged by law with power to act for or responsibility for the person or property of a patient.

ARTICLE IX

(a) No provision of this compact except Article V shall apply to any person institutionalized while under sentence in a penal or correctional institution or while

MINNESOTA STATUTES 1971

2741

DEPARTMENT OF PUBLIC WELFARE 245.52

subject to trial on a criminal charge, or whose institutionalization is due to the commission of an offense for which, in the absence of mental illness or mental deficiency, said person would be subject to incarceration in a penal or correctional institution.

(b) To every extent possible, it shall be the policy of states party to this compact that no patient shall be placed or detained in any prison, jail or lockup, but such patient shall, with all expedition, be taken to a suitable institutional facility for mental illness or mental deficiency.

ARTICLE X

(a) Each party state shall appoint a "compact administrator" who, on behalf of his state, shall act as general coordinator of activities under the compact in his state and who shall receive copies of all reports, correspondence, and other documents relating to any patient processed under the compact by his state either in the capacity of sending or receiving state. The compact administrator or his duly designated representative shall be the official with whom other party states shall deal in any matter relating to the compact or any patient processed thereunder.

(b) The compact administrators of the respective party states shall have power to promulgate reasonable rules and regulations to carry out more effectively the terms and provisions of this compact.

ARTICLE XI

The duly constituted administrative authorities of any two or more party states may enter into supplementary agreements for the provision of any service or facility or for the maintenance of any institution on a joint or cooperative basis whenever the states concerned shall find that such agreements will improve services, facilities, or institutional care and treatment in the fields of mental illness or mental deficiency. No such supplementary agreement shall be construed so as to relieve any party state of any obligation which it otherwise would have under other provisions of this compact.

ARTICLE XII

This compact shall enter into full force and effect as to any state when enacted by it into law and such state shall thereafter be a party thereto with any and all states legally joining therein.

ARTICLE XIII

(a) A state party to this compact may withdraw therefrom by enacting a statute repealing the same. Such withdrawal shall take effect one year after notice thereof has been communicated officially and in writing to the governors and compact administrators of all other party states. However, the withdrawal of any state shall not change the status of any patient who has been sent to said state or sent out of said state pursuant to the provisions of the compact.

(b) Withdrawal from any agreement permitted by Article VII(b) as to costs or from any supplementary agreement made pursuant to Article XI shall be in accordance with the terms of such agreement.

ARTICLE XIV

This compact shall be liberally construed so as to effectuate the purposes thereof. The provisions of this compact shall be severable and if any phrase, clause, sentence or provision of this compact is declared to be contrary to the constitution of any party state or of the United States or the applicability thereof to any government, agency, person or circumstance is held invalid, the validity of the remainder of this compact and the applicability thereof to any government, agency, person or circumstance shall not be affected thereby. If this compact shall be held contrary to the constitution of any state party thereto, the compact shall remain in full force and effect as to the remaining states and in full force and effect as to the state affected as to all severable matters.

[1957 c 326 s 1]

245.52 COMMISSIONER OF PUBLIC WELFARE AS COMPACT ADMINISTRATOR. The commissioner of public welfare is hereby designated as "compact

administrator." He shall have the powers and duties specified in the compact, and he may, in the name of the state of Minnesota, subject to the approval of the attorney general as to form and legality, enter into such agreements authorized by the compact as he deems appropriate to effecting the purpose of the compact. He shall, within the limits of the appropriations for the care of the mentally ill and mentally deficient available therefor, authorize such payments as are necessary to discharge any financial obligations imposed upon this state by the compact or any agreement entered into under the compact.

[1957 c 326 s 2]

245.53 TRANSMITTAL OF COPIES OF ACT. Duly authenticated copies of sections 245.51 to 245.53 shall, upon its approval, be transmitted by the secretary of state to the governor of each state, the attorney general and the secretary of state of the United States, and the council of state governments.

[1957 c 326 s 3]

245.61 COMMISSIONER OF PUBLIC WELFARE MAY MAKE GRANTS FOR LOCAL MENTAL HEALTH PROGRAMS. The commissioner of public welfare is hereby authorized to make grants to assist cities, counties, towns, villages or any combinations thereof, or non-profit corporations in the establishment and operation of local mental health programs to provide the following services: (a) collaborative and cooperative services with public health and other groups for programs of prevention of mental illness, mental retardation, alcoholism, and other psychiatric disabilities; (b) informational and educational services to the general public, and lay and professional groups; (c) consultative services to schools, courts and health and welfare agencies, both public and private; (d) out-patient diagnostic and treatment services; (e) rehabilitative services for patients suffering from mental or emotional disorders, mental retardation, alcoholism, and other psychiatric conditions particularly those who have received prior treatment in an in-patient facility; (f) detoxification and alcoholism evaluation and service facilities.

[1957 c 392 s 1; 1969 c 1043 s 7]

245.62 COMMUNITY MENTAL HEALTH PROGRAM; TAX LEVY. Any city, county, town, or village, or any combination thereof, of over 50,000 population, and upon consent of the commissioner of public welfare, any city, county, town or village or combination thereof with less than 50,000 population, may establish a community mental health services program and may establish clinics and staff same with persons specially trained in psychiatry and related fields. Such programs and clinics may be administered by a city, county, town, village or non-profit corporation or a community mental health board established pursuant to sections 245.61 to 245.69.

In order to provide the necessary funds to establish and operate a mental health services program and to establish and maintain a clinic, the governing body of any city, county, town or village may levy annually upon all taxable property in such city, county, town or village, a special tax in excess of any statutory or charter limitation but such levy shall not exceed two mills. The governing body of any city, county, town or village may make such a levy, where necessary, separate from the general levy and at any time of the year. Nothing contained herein shall in any way preclude the use of funds available for this purpose under any existing statute or charter provision relating to cities, towns, counties or villages.

[1957 c 392 s 2; 1959 c 530 s 1; 1967 c 888 s 1]

245.63 ASSISTANCE OR GRANT. Any city, county, town, village, non-profit corporation or community mental health board administering a mental health services program may apply for the assistance provided by sections 245.61 to 245.69 by submitting annually to the commissioner of public welfare its plan and budget for the next fiscal year together with the recommendations of the community mental health board thereon. No programs shall be eligible for a grant hereunder unless its plan and budget have been approved by the commissioner.

[1957 c 392 s 3]

245.64 FUNDS ALLOCATED. At the beginning of each fiscal year the commissioner of public welfare shall allocate available funds to the mental health programs for disbursement during the fiscal year in accordance with such approved plans and budgets. The commissioner shall, from time to time during the fiscal year, review the budgets and expenditures of the various programs and if funds are not

needed for a program to which they were allocated, he may, after reasonable notice and opportunity for hearing, withdraw such funds as are unencumbered and reallocate them to other programs. He may withdraw funds from any program which is not being administered in accordance with its approved plan and budget.

[1957 c 392 s 4]

245.65 LIMITATION ON GRANTS. Subdivision 1. Except as hereinafter provided, grants for any program shall not exceed 50 percent of the total expenditures for (a) salaries, (b) contract facilities and services, (c) operation, maintenance, rental and service costs, (d) per diem and travel expense of members of community mental health boards, (e) mortgage or other financial costs specifically approved by the commissioner of public welfare for buildings and facilities constructed under the auspices of community mental health centers construction programs sponsored by the government of the United States, (f) mortgage or other financial costs specifically approved by the commissioner of public welfare for buildings and facilities which are not constructed under the auspices of community mental health centers construction programs sponsored by the government of the United States, providing such grants do not exceed 25 percent of total construction costs, and (g) other expenditures specifically approved and authorized by the commissioner of public welfare. Where any county served by a program hereunder has an assessed valuation of real and personal property of less than \$13,000,000 and the required total mill levy for all costs, including administrative costs, for all forms of public assistance exceeds by 50 percent or more the average required mill levy for such costs in all counties of the state, and the levy is insufficient to pay the county's share of such costs, grants hereunder, attributable to such county's proportionate share of the total expenditures based on the ratio of such county's population to the total population of the area served by the program, may exceed 50 percent of the total expenditures but shall not exceed 75 percent of the total expenditure for the mental health program of such county. No grants shall be made for capital expenditures, except as herein provided. Grants may be made for expenditures for mental health services whether provided by operation of a local facility or through contract with other public or private agencies.

Subd. 2. Where local funds from any source other than the department of public welfare are being used to finance community mental health services prior to the effective date of sections 245.61 to 245.69, such funds shall not be used for matching state funds hereunder except that such local funds may be used for matching state funds for expansion of the existing services if such existing and expanded services conform to the provisions of sections 245.61 to 245.69.

Subd. 3. Existing local out-patient psychiatric clinic services now 100 percent state supported shall continue to receive such support until local funds are secured to provide 50 percent of such support but in no event beyond four years from the effective date hereof. Nothing in sections 245.61 to 245.69 shall be construed to limit the power of the commissioner of public welfare to establish clinics pursuant to section 246.014(10).

[1957 c 392 s 5; 1963 c 796 s 1; 1965 c 389 s 1; 1967 c 888 s 2; 1967 c 889 s 1]

245.66 COMMUNITY HEALTH BOARDS. Every city, county, town or village, or combination thereof establishing a community mental health services program shall, before it may come within the provisions of sections 245.61 to 245.69, establish a community mental health board. When a combination of four or less of such political subdivisions establish such a program the board shall consist of nine members. When a combination of five or six of such political subdivisions establish such a program the board shall consist of at least nine members but not more than twelve members at the option of the selection committee. When seven or more of such political subdivisions establish such a program the board shall consist of at least nine members but not more than fifteen members at the option of the selecting committee. When any city, county, town or village singly establishes such a program, such board shall be appointed by the chief executive officer of such city or village or the chairman of the governing body of such county or town. When a non-profit corporation is the administrator of such a program not established by a city, county, town or village, such corporation shall select a community mental health board which shall be representative of the groups herein enumerated, but the number of members need not be nine. When any combination of the political subdivision herein enumerated es-

establishes a community mental health services program, the chief executive officer of each participating city or village and the chairman of the governing body of each participating county or town shall appoint two members to a selecting committee which shall select the members of the board. Membership of the community mental health boards shall be representative of local health departments, medical societies, county welfare boards, hospital boards, lay associations concerned with mental health, labor, agriculture, business, civic and professional groups and the general public. Nothing in this section shall be construed to preclude the appointment to the community mental health board of individuals who are also members of a board of county commissioners so long as the mental health board retains the representative character indicated above.

[1957 c 392 s 6; 1959 c 303 s 1; 1963 c 796 s 2]

245.67 MEMBERS OF COMMUNITY HEALTH BOARDS; TERMS, VACANCIES, REMOVAL. Except for boards appointed by non-profit corporations, the term of office of each member of the community mental health board shall be for three years measured from the first day of the year of appointment except that of the members first appointed, one-third shall be appointed for a term of one year, one-third for a term of two years, and one-third for a term of three years if there is a nine, twelve, or fifteen member board. Any remaining members first appointed shall serve the three year term. Vacancies shall be filled for the unexpired term in the same manner as original appointments. Any member of a board may be removed by the appointing authority for neglect of duty, misconduct or malfeasance in office, after being given a written statement of charges and an opportunity to be heard thereon.

[1957 c 392 s 7; 1963 c 796 s 3]

245.68 DUTIES OF COMMUNITY HEALTH BOARDS. Subject to the provisions of this section and the rules and regulations of the commissioner of public welfare, each community mental health board shall:

(a) Facilitate and implement programs in mental health, mental retardation and inebriacy so as to assure delivery of services;

(b) Review and evaluate community mental health service provided pursuant to sections 245.61 to 245.69, and report thereon to the commissioner of public welfare, the administrator of the program, and, when indicated, the public, together with recommendations for additional services and facilities;

(c) Recruit and promote local financial support for the program from private sources such as community chests, business, industrial and private foundations, voluntary agencies and other lawful sources, and promote public support for municipal and county appropriations;

(d) Promote, arrange and implement working agreements with other social service agencies, both public and private, and with other educational and judicial agencies;

(e) Advise the administrator of the community mental health program on the adoption and implementation of policies to stimulate effective community relations;

(f) Review the annual plan and budget and make recommendations thereon;

(g) When so determined by the authority establishing the program, act as the administrator of the program;

(h) Approve applications for grants made pursuant to section 245.693;

(i) Establish and operate a detoxification center;

(j) Encourage and assist innovative private treatment programs;

(k) Provide services for drug dependent persons; and

(l) Appoint advisory committees in at least the areas of mental health, mental retardation and inebriacy. A committee shall consist of residents of the area served who are interested and knowledgeable in the area governed by such committee. These advisory committees shall report regularly to the board.

[1957 c 392 s 8; 1971 c 109 s 1; 1971 c 892 s 4]

245.69 ADDITIONAL DUTIES OF COMMISSIONER OF PUBLIC WELFARE. In addition to the powers and duties already conferred upon him by law the commissioner of public welfare shall:

(a) Promulgate rules and regulations governing eligibility of community mental health programs to receive state grants, prescribing standards for qualification of personnel and quality of professional service and for in-service training and educational leave programs for personnel, governing eligibility for service so that no

person will be denied service on the basis of race, color or creed, or inability to pay, providing for establishment, subject to the approval of the commissioner, of fee schedules which shall be based upon ability to pay and the guiding principle of which shall be that no one who can afford to pay for his own treatment at the rate customarily charged in private practice shall be treated in the community mental health services clinic except as hereinafter provided, regulating fees for consultation and diagnostic services which services may be provided to anyone without regard to his financial status when referred by the courts, schools, or health or welfare agencies whether public or private, and such other rules and regulations as he deems necessary to carry out the purposes of sections 245.61 to 245.69.

(b) Review and evaluate local programs and the performance of administrative and psychiatric personnel and make recommendations thereon to community mental health boards and program administrators;

(c) Provide consultative staff service to communities to assist in ascertaining local needs and in planning and establishing community mental health programs; and

(d) Employ qualified personnel, including a director of community mental health services, under the supervision of the medical director to implement sections 245.61 to 245.69.

[1957 c 392 s 9]

245.691 GROUP HOMES; PILOT PROGRAM CERTAIN COUNTIES. Subdivision 1. In order to better ascertain the effectiveness of caring for the mentally ill, mentally retarded, and juvenile delinquents in a small home-personalized environment as opposed to institutional care, the counties of Becker, Clay, Douglas, Grant, Otter Tail, Pope, Stevens, Traverse, and Wilkin may, as a pilot program, establish not more than ten group homes, no more than two of which shall be located in any one of the above enumerated counties, for the care and rehabilitation of the mentally ill, mentally retarded, and juvenile delinquents.

Subd. 2. The homes authorized under this section shall be subject to the provisions of the Community Mental Health Act (Minnesota Statutes 1967, Sections 245.61 to 245.69), and the provisions of this section.

Subd. 3. Not more than ten patients shall be cared for in any group home established under this section. Minnesota Statutes 1967, Sections 144.50 to 144.58, are not applicable to group homes established by this section.

Subd. 4. The Lakeland Area Program Board established by the counties enumerated in subdivision 1 of this section under Minnesota Statutes 1967, Section 245.66, is designated as the regional agency to receive grants for the purposes of this section from the commissioner of public welfare, subject to the limitations of Minnesota Statutes 1967, Section 245.65. No grants may be made under this section for the costs of construction or remodeling of any building. The commissioner of public welfare is authorized to make reasonable rules not inconsistent with the provisions of this section.

Subd. 5. The commissioner of public welfare may permit personnel of the Fergus Falls State Hospital to assist in developing and carrying out the programs authorized by this section.

[1969 c 904 s 1]

245.692 ALCOHOLISM AND DRUG ABUSE; DETOXIFICATION CENTER. Subdivision 1. **Establishment.** Every area mental health board shall have the responsibility for providing one or more detoxification centers for the purpose of custody, care, and treatment of inebriate and drug dependent persons by July 1, 1973. The center shall be the responsibility of the community mental health board where applicable. Existing treatment facilities and other agencies may also be utilized.

Subd. 2. **Definition.** For the purposes of this section, a detoxification center is defined as a social rehabilitation facility established for the purpose of facilitating access into care and rehabilitation by detoxifying and evaluating the person and providing entrance into the continuum of care. Such facility shall be under medical supervision and shall have available the services of a licensed physician for medical emergencies.

Subd. 3. **Funding.** The expense of construction, remodeling, leasing or rental, administration, operation, and maintenance of a detoxification center shall be paid from the revenues derived, and, to the extent necessary, from equal amounts paid by the state and the counties within the community mental health center area.

Subd. 4. **County share.** The county boards shall appropriate, out of the general revenue fund of the counties, such moneys, not otherwise appropriated, as may be necessary for the operation of a detoxification center. Notwithstanding the provisions and limitations of section 275.09 to the contrary, the board of county commissioners of each county may levy annually a tax sufficient in amount for the purpose of construction, remodeling, leasing or rental, administration, operation and maintenance of a detoxification center.

Subd. 5. **State share.** The amount due from the state to the area mental health board for the operation of the detoxification center shall be certified to the state treasurer quarterly by the board. The state treasurer shall draw his warrants in favor of the board in payment of such amounts and forward it to the board.

Subd. 6. **Paying patients.** A detoxification center may receive any inebriate or drug dependent person who desires to purchase care and treatment with his own funds or with assistance grants awarded to him.

Subd. 7. **Federal grants.** The area mental health board is authorized to accept any federal grant, directly or from a state agency, for the purpose of construction, remodeling, leasing or rental, administration, operation, or maintenance of a detoxification center.

Subd. 8. **Purchase of services.** The area mental health board may rent, lease or purchase services or facilities from any hospital, institution, other health service agency, or licensed physician for the purpose of establishing a detoxification center.

Subd. 9. **Joint participation.** Two or more area mental health boards acting jointly may establish and maintain a detoxification center.

[1971 c 892 s 1 subds 1, 3-9; Ex1971 c 3 s 94 subd 1]

245.693 ACQUISITION OF FACILITIES. Subdivision 1. **Grants.** The Minnesota commission on alcohol problems or the drug abuse section of the state planning agency respectively may approve grants or loans to any organization meeting the requirements of subdivision 2 for the purposes of remodeling, buying, constructing or leasing residential after care facilities for alcoholics or drug dependent persons.

Subd. 2. **Limitation on grants.** Grants may be made only where the following requirements are complied with:

- (1) The organization is incorporated on a nonprofit basis under chapter 317, or is a public agency;
- (2) The facility is licensed by the state board of health under subdivision 3;
- (3) The facility is approved by the local community mental health board if constituted;
- (4) The facility for the treatment of alcoholics shall be approved by the Minnesota commission on alcohol problems;
- (5) The facility for the treatment of drug dependent persons shall be approved by the drug abuse section of the state planning agency.

Subd. 3. **Licensing.** The state board of health may issue licenses to persons requesting grants pursuant to subdivision 1.

Subd. 4. **Rules and regulations.** The state board of health may make such reasonable rules and regulations as may be necessary to license the facilities described under subdivision 1, and may alter, amend, suspend, or repeal any of such rules and regulations.

Subd. 5. **Contracts with private and public agencies for treatment program.** Nothing herein shall prohibit the Minnesota commission on alcohol problems or the drug abuse section of the state planning agency from making grants to community mental health centers for the purpose of contracting with nonprofit private or public agencies to provide for treatment programs, either in a residential or non-residential facility, for drug dependent persons.

[1971 c 892 s 2]

245.694 ALCOHOLIC AND DRUG COUNSELORS. Subdivision 1. The state planning agency shall provide sufficient funds to community mental health boards for the payment of one half the yearly salary of drug dependency counselors as provided in subdivisions 2 or 3; provided the board certifies to the

MINNESOTA STATUTES 1971

2747

DEPARTMENT OF PUBLIC WELFARE 245.70

agency that one of the counselors as provided in subdivisions 2 or 3 is familiar with the problems of alcoholics; and one of the counselors is familiar with the problems of nonalcoholic drug abusers.

Subd. 2. Community mental health centers serving an area of over 100,000 persons shall receive funds for the payment of one half the salaries of four counselors.

Subd. 3. Community mental health centers serving an area of less than 100,000 persons shall receive funds for the payment of one half the salaries of two counselors.

Subd. 4. This section shall not limit:

(a) The authority of the agency to provide additional funds for counselors;

(b) The authority of the community mental health board to provide additional counselors.

Subd. 5. The drug dependency counselors should have educational or practical experience in the area of alcoholism or drug counseling. Persons with greater than two years experience working either part or full time, either for compensation or not, with an acknowledged agency in the field of alcoholism or drug counseling shall not be required to take a civil service written examination. Such examination may be required of all other persons applying for the position of drug dependency counselor.

[1971 c 892 s 3]

245.695 STATE ADMINISTRATION. Subdivision 1. The state planning agency shall establish a drug abuse section which shall, consistent with the expiration date of this section,

(a) conduct basic research as to the causes and prevention of drug abuse;

(b) coordinate local, state and federal programs and policies relating to drugs and drug abuse;

(c) develop and demonstrate new techniques and methods for the prevention and control of drug abuse and the treatment and rehabilitation of drug abusers;

(d) gather and disseminate statistical data and information on the nature and extent of nonalcoholic drug abuse in the state; and

(e) develop and conduct such programs of information and education as may awaken and enlighten the public as to nonalcoholic drug abuse in this state.

Subd. 2. The director of civil service and the civil service commission shall establish a classification to be known as "coordinator of drug dependency education," the qualifications of which shall give recognition to the value and desirability of recovered drug dependent persons in performing the duties of a consultant on drug dependency and the need for expertise in the causes and effects of drug abuse in performing the duties of a coordinator of drug dependency education.

Subd. 3. The state planning officer shall appoint an advisory council to the state planning agency section on drug abuse to consist of not more than 11 members chosen insofar as practicable from among the following: the medical profession, pharmacy, psychopharmacology, pharmacology, the legal profession, the behavioral sciences, the clergy, educators, students, former drug addicts, and corrections or law enforcement officers. At all times there shall be two members on the commission from among the interested public. The council shall at the request of the section on drug abuse assist in the formulation of policies and guidelines for the conduct of the agency's drug abuse program. Members of the council shall serve without compensation but shall be reimbursed for their necessary travel and other expenses as provided for state employees.

[1971 c 892 s 7]

NOTE: Section 245.695 expires on January 1, 1974. See Laws 1971, Section 892, Section 14.

245.70 MENTALLY ILL AND MENTALLY RETARDED; FEDERAL AID.

The commissioner of public welfare is hereby designated the state agency to establish and administer a state-wide plan for the construction, equipment, maintenance, and operation of any facilities for the care, treatment, diagnosis, or rehabilitation, of the mentally retarded or mentally ill which are or may be required as a condition for eligibility for benefits under any federal law and in particular under the Federal Mental Retardation Facilities and Community Mental Health Centers Construction Act of 1963 (P.L. 88-164). The commissioner of public welfare is authorized and directed to receive, administer, and expend any funds

that may be available under any federal law or from any other source, public or private, for such purposes.

[1965 c 626 s 1]

245.71 CONDITIONS TO FEDERAL AID FOR MENTALLY ILL AND MENTALLY RETARDED. The commissioner of public welfare is authorized and empowered to comply with all conditions and requirements necessary to receive federal aid or grants with respect to the establishment, construction, maintenance, equipment or operation, for all the people of this state, of adequate facilities and services as specified in section 245.70, including the authority:

(a) To designate or establish a state advisory council, with representation as required as a condition of eligibility for benefits under any federal law, to consult with him in carrying out the purposes of this act;

(b) To provide an inventory of existing facilities or a particular category thereof, and to survey the need for additional facilities;

(c) To develop and administer a construction program or programs which, in conjunction with existing facilities will afford adequate facilities to serve the people of this state;

(d) To provide for priority of projects or facilities;

(e) To provide to applicants an opportunity for a hearing before him;

(f) To prescribe and require compliance with such standards of maintenance and operation applicable to such facilities as are reasonably necessary to protect the public health, welfare, and safety;

(g) To promulgate rules and regulations as to methods of administration, reporting and personnel standards.

[1965 c 626 s 2]

245.75 FEDERAL GRANTS FOR INDIANS. The commissioner of public welfare is authorized to enter into contracts with the department of health, education, welfare and the department of interior, bureau of Indian affairs, for the purpose of receiving federal grants for the welfare and relief of Minnesota Indians. Such contract and the plan of distribution of such funds shall be subject to approval of the Minnesota public relief advisory committee.

[1965 c 886 s 23]

245.76 INDIAN RELIEF; REIMBURSEMENT OF COSTS. Subdivision 1. The care and relief of persons of Indian blood is declared to be a matter of special state concern and responsibility. To effectuate this responsibility, the commissioner of public welfare shall reimburse counties, cities, towns or any other political subdivision for up to 75 percent of the costs of relief and related services provided to persons of Indian blood to the extent that state and federal moneys are available for this purpose.

Subd. 2. For the purposes of this section: (a) An Indian is a person who has at least one-quarter Indian blood or a person listed on the rolls of the United States bureau of Indian affairs as an Indian and who is not residing on the Red Lake Indian Reservation; (b) The term "relief" includes but is not limited to direct relief to persons in their own homes, medical care, hospital care, burial, maintenance of children not under state guardianship and state wards not otherwise provided for. It shall not include university hospital care, sanatorium care, or state institutional charges; (c) The commissioner of public welfare shall promulgate rules and regulations for the administration of relief including standards of assistance and the manner and form of assistance grants. He shall have the authority to negotiate for and accept grants from the government of the United States.

Subd. 3. The commissioner of public welfare may advance grants to the counties, cities, towns or any other political subdivision on an estimated basis subject to audit and adjustment at the end of each state fiscal year.

[1969 c 909 s 1-3]

245.765 REIMBURSEMENT OF COUNTY FOR CERTAIN INDIAN WELFARE COSTS. Subdivision 1. The commissioner of public welfare, to the extent that state and federal money is available therefor, shall reimburse any county for all welfare costs expended by the county to any Indian who is an enrolled member of the Red Lake Band of Chippewa Indians and resides upon the Red Lake Indian Reservation. The commissioner may advance payments to a county on an estimated basis subject to audit and adjustment at the end of each state fiscal year.

Subd. 2. The commissioner may promulgate rules for the carrying out of the provisions of subdivision 1. He may negotiate for and accept grants from the United States for the purposes of this section.

[1971 c 935 s 1]

245.77 LEGAL SETTLEMENT OF PERSONS RECEIVING ASSISTANCE, ACCEPTANCE OF FEDERAL FUNDS. In the event federal funds become available to the state for purposes of reimbursing the several local agencies of the state for costs incurred in providing financial relief to poor persons under the liability imposed by section 261.03, or for reimbursing the state and counties for categorical aid assistance furnished to persons who are eligible for such assistance only because of the United States Supreme Court decision invalidating state residence requirements the commissioner of public welfare is hereby designated the state agent for receipt of such funds. Upon receipt of any federal funds the commissioner shall in a uniform and equitable manner use such funds to reimburse counties, towns, cities and villages for expenditures made in providing financial relief to poor persons. The commissioner is further authorized to promulgate rules and regulations, consistent with the rules and regulations promulgated by the Secretary of Health, Education and Welfare, governing the reimbursement provided for by this provision.

[1969 c 910 s 1]

245.78 LICENSING OF DAY CARE FACILITIES AND SERVICES FOR MENTALLY ILL, INEBRIATE AND PHYSICALLY HANDICAPPED. The commissioner of public welfare shall establish rules, regulations, and guidelines after public hearings for the licensing and operation of day care and residential facilities and services for the mentally ill, inebriate and physically handicapped. Such rules, regulations and guidelines shall set forth minimum qualifications for operators of such facilities and services, standards for determination of local need which shall be a prerequisite for licensure, and rules and regulations for the operation of all licensed facilities. Such rules and regulations may incorporate rules and regulations suggested by the state fire marshal or the commissioner of health. Licenses may be issued to any individual, organization or association at the discretion of the commissioner for a period of one year. No person, organization or association shall operate a day care or residential facility or service for the mentally ill, inebriate or physically handicapped after such date as the commissioner shall establish without a license as provided by sections 245.78 to 245.82 unless specially exempted from the provisions of sections 245.78 to 245.82 by section 245.79.

[1971 c 627 s 1]

245.79 EXCLUSIONS. Sections 245.78 to 245.82 shall not apply to any facility or service providing residential or day care to less than five persons or to persons other than the mentally ill, inebriates or physically handicapped.

[1971 c 627 s 2]

245.80 REVOCATION AND RENEWAL; FEE. Subdivision 1. A license issued pursuant to sections 245.78 to 245.82 may be revoked after notice and hearing if the commissioner determines that the licensee is not operating in accordance with the rules, regulations and guidelines established by the commissioner or if the commissioner deems such revocation in the public interest. Such revocation shall be made in accordance with the provisions of chapter 15.

Subd. 2. The commissioner may renew any license issued pursuant to sections 245.78 to 245.82, for additional periods of one year if he determines that such renewal is in the public interest and that the licensee has complied with all or substantially all of the rules, regulations and guidelines, promulgated by the commissioner.

Subd. 3. The commissioner may charge a fee for the issuance of a license or the renewal of a license in accordance with sections 245.78 to 245.82. The fees so collected shall be sufficient to offset costs of administering this program. In no event shall the fee exceed \$150. All fees collected shall be deposited in the general fund in the state treasury.

[1971 c 627 s 3]

245.81 COUNTY WELFARE PLACEMENT. Persons for whom facilities and services are licensed by sections 245.78 to 245.82 and who are under the care and supervision of any county welfare department and who need placement in resi-

dential, after care or day care facilities shall be placed only in facilities licensed in accordance with sections 245.78 to 245.82.

[1971 c 627 s 4]

245.82 STAFF; DELEGATION OF DUTIES. The commissioner may delegate such of the powers and duties granted to him by sections 245.78 to 245.82 to county welfare boards or to a body established pursuant to sections 245.61 to 245.69 if and when he deems such delegation appropriate.

[1971 c 627 s 5]

245.83 GRANTS FOR CHILD CARE SERVICE; DEFINITIONS. Subdivision 1. As used in sections 245.83 to 245.87 the words defined in this section shall have the meanings given them.

Subd. 2. "Child care service" means a family day care home, group day care center for six or more children, nursery schools, day nurseries, child day care centers and play groups, as defined by such rules and regulations as the commissioner shall promulgate from time to time.

Subd. 3. "Child" means any person 12 years of age or younger.

Subd. 4. "Commissioner" means the commissioner of public welfare.

[1971 c 848 s 1]

245.84 AUTHORIZATION TO MAKE PROVISIONAL GRANTS. The commissioner is authorized to make such provisional grants from the general fund in the state treasury to any municipality, corporation or combination thereof for planning, establishing, maintaining or operating a child care service as the commissioner deems necessary or proper to carry out the purposes of sections 245.83 to 245.87. The planning, establishing, maintaining or operating of a child care service may include but is not limited to the leasing, renting, constructing or purchasing of necessary facilities, equipment or supplies for such service.

The commissioner is further authorized to make provisional grants as provided by sections 245.83 to 245.87 to any such municipality, county, corporation or combination thereof, to establish and operate a program to aid in the coordination of child care within a defined community, to aid in the development of social, emotional, educational and physical conditions under which children can best develop within a defined community and to provide for the needs of economically disadvantaged children. No grant shall exceed 50 percent of the total cost of the establishment and operation of a child care service or a program as set forth in this section.

[1971 c 848 s 2]

245.85 TERMINATION OF ALL OR PART OF A GRANT. The commissioner shall supervise and coordinate all child care services and programs for which a grant has been made pursuant to sections 245.83 to 245.87, and shall endeavor insofar as possible to establish a set of program standards and uniform regulations to coordinate child care services and programs at the state and local level. The commissioner shall, from time to time, review the budgets, expenditures and development of each child care service and program to which a grant has been made pursuant to sections 245.83 to 245.87. If he determines that any portion of the grants made to establish and operate a child care service or a program are no longer needed, that local support is not available to finance the local share of the cost of such service or programs, or that such service or programs do not comply with the rules, regulations, standards or requirements of the commissioner, the commissioner may, upon 30 days notice, withdraw any funds not allocated prior to the delivery of such notice and cancel the grant to the extent of such withdrawal.

[1971 c 848 s 3]

245.86 AUTHORIZATION TO CERTAIN MUNICIPALITIES TO MAKE GRANTS. Any county or municipality may make grants from special tax revenues or from its general fund to any organization, governmental or corporate, for the same purposes for which the commissioner is authorized to make grants by sections 245.83 to 245.87. The above funds are to provide for a 50 percent matching of county, local or private funds.

[1971 c 848 s 4]

245.87 ALLOCATIONS TO CITIES OF FIRST CLASS. For the purposes of sections 245.83 to 245.87 not more than 30 percent of the amount allocated shall go to counties containing a city of the first class.

[1971 c 848 s 5]