

141.35 PRIVATE TRADE SCHOOLS

(h) Schools now or hereafter licensed by boards authorized under Minnesota law to issue such licenses;

(i) Schools and educational programs, or training programs, conducted by persons, firms, corporations, or associations, for the training of their own employees, for which no fee is charged the employee;

(j) Schools engaged exclusively in the teaching of purely avocational or recreational subjects as determined by the commissioner. Private schools teaching a method or procedure to increase the speed with which a student reads are not within this exemption;

(k) Driver training schools and instructors as defined in section 171.33, subdivisions 1 and 2;

(l) Classes, courses, or programs conducted by a bona fide trade, professional, or fraternal organization, solely for that organization's membership.

[1973 c 714 s 20]

HEALTH

CHAPTER 144. DEPARTMENT OF HEALTH

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STATE BOARD OF HEALTH

144.01 Membership

The department of health as created and constituted under Laws of Minnesota 1925, Chapter 426, is hereby continued under the supervision and control of the state board of health. The state board of health shall consist of 15 members, nine of whom shall be broadly representative of the licensed health professions and six of whom shall be public members as defined for purposes of Laws 1973, Chapter 638. The members of the board of health shall be appointed by the governor with the advice and consent of the senate. The licensed health professionals shall be appointed by the governor so that the initial terms of three members will end the first Monday in January of each second year. Thereafter the terms shall be four years. The public members shall be appointed by the governor for like terms. Vacancies on the board shall be filled by like appointment for the unexpired term. Each member shall serve until his successor qualifies.

[1973 c 638 s 1]

144.02 Meetings; officers; quorum

The state board of health shall hold an annual meeting during the first quarter of every year at a time and place designated by the board at which time it shall elect from its members a president. Regular meetings, one of which shall include the annual meeting, shall be held not less than four times a year. At least one such regular meeting shall be held each quarter. The time and place of all such meetings shall be determined by the board, and all board members shall be notified thereof by mail seven days in advance. Special meetings may be held at such times and places as the secretary or any two members of the board shall appoint upon three days' notice to the members by mail. The board shall elect a secretary to serve during its pleasure, who may or may not be one of its members. A majority shall be a quorum and any meeting may be adjourned from time to time.

[1973 c 142 s 1]

144.03 General duties of officers

The president shall preside at the meetings when present. The secretary shall be the executive officer of the state board of health and shall see that all lawful rules and orders of the board and all duties laid upon it by law, are enforced and performed, and that every law enacted in the interests of human health is obeyed. The secretary shall be the custodian of the official records and documents of the board and shall be the chief administrator of the Minnesota department of health in which capacity he shall be known as the commissioner of health.

[1973 c 356 s 1]

144.04 Expenses

The members of the board shall receive compensation of the sum of \$35 per day for attendance at board meetings and ordinary and necessary expenses in the same amount and manner as state employees. Subject to the provisions of Laws 1939, Chapter 441, the board may employ, and at pleasure dismiss, such agents, experts, and other assistants as it may deem necessary and fix their compensation, prescribe their duties, and allow their necessary expenses. All such salaries, compensation, and expenses shall be paid by the state upon vouchers; but the total for any year shall not exceed the appropriation of the year therefor.

[1973 c 638 s 2]

144.05 General duties of board; reports

The state board of health acting through its secretary shall have general authority as the state's official health agency and shall be responsible for the development and maintenance of an organized system of programs and services for protecting, maintaining, and improving the health of the citizens. This authority shall include but not be limited to the following:

(a) Conduct studies and investigations, collect and analyze health and vital data, and identify and describe health problems;

(b) Plan, facilitate, coordinate, provide, and support the organization of services for the prevention and control of illness and disease and the limitation of disabilities resulting therefrom;

(c) Establish and enforce health standards for the protection and the promotion of the public's health such as quality of health services, reporting of disease, regulation of health facilities, environmental health hazards and manpower;

(d) Affect the quality of public health and general health care services by providing consultation and technical training for health professionals and paraprofessionals;

(e) Promote personal health by conducting general health education programs and disseminating health information;

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(f) Coordinate and integrate local, state and federal programs and services affecting the public's health;

(g) Continually assess and evaluate the effectiveness and efficiency of health service systems and public health programming efforts in the state; and

(h) Advise the governor and legislature on matters relating to the public's health.

[1973 c 356 s 2]

144.072 Implementation of Social Security Amendments of 1972

The state board of health shall implement by rule, pursuant to the administrative procedures act, those provisions of the social security amendments of 1972 (P.L. 92-603) required of state health agencies, including rules which:

(a) establish a plan, consistent with regulations prescribed by the secretary of health, education, and welfare, for the review by appropriate professional health personnel, of the appropriateness and quality of care and services furnished to recipients of medical assistance; and

(b) provide for the determination as to whether institutions and agencies meet the requirements for participation in the medical assistance program, and the certification that those requirements, including utilization review, are being met.

[1973 c 717 s 1]

VITAL STATISTICS

144.175 Access to records

[For text of subd. 1, see M.S.1971]

Subd. 2. Procedure in case of illegitimacy. Except as provided in this section and section 144.176, disclosure of illegitimacy of birth or of information from which it can be ascertained may be made, or a certified copy of the birth certificate issued, only to the guardian of such person, the person to whom the record pertains when such person is 18 years of age or over, or upon order of a court of competent jurisdiction in a case where such information is necessary for the determination of personal or property rights and then only for such purpose. The birth and death records of the state board of health shall be opened to inspection by the commissioner of public welfare, and it shall not be necessary for him to obtain an order of the court in order to inspect records of illegitimate children or to secure certified copies thereof.

[1973 c 725 s 6]

[For text of subds. 3 to 5, see M.S.1971]

HOSPITALIZATION

144.51 Existing hospitals, licenses

No person, partnership, association, or corporation, nor any state, county, or local governmental units, nor any division, department, board, or agency thereof, may operate a hospital, sanatorium, rest home, nursing home, or boarding home for the infirm aged, without a license therefor.

Before a license shall be issued under sections 144.50 to 144.56, the person applying shall submit evidence satisfactory to the state board of health that he is not less than 18 years of age and of reputable and responsible character; in the event the applicant is an association or corporation or governmental unit like evidence shall be submitted as to the members thereof and the persons in charge. All applicants shall, in addition, submit satisfactory evidence of their ability to comply with the provisions of sections 144.50 to 144.56 and all rules, regulations, and minimum standards adopted thereunder.

[1973 c 725 s 7]

144.52 Application

Any person, partnership, association, or corporation, including state, county, or local governmental units, or any division, department, board, or agency thereof, desiring a license under sections 144.50 to 144.56 shall file with the state board of health a verified application containing the name of the applicant desiring said license; whether such persons so applying are 18 years of age; the type of institution to be operated; the location thereof; the name of the person in charge thereof, and such other information pertinent thereto as the state board of health by regulation may require. Application on behalf of a corporation or association or other governmental unit shall be made by any two officers thereof or by its managing agents.

[1973 c 725 s 8]

144.583 [Repealed, 1973 c 139 s 2]**144.584 State board of health; powers and duties transferred**

All authority granted to the commissioner of public welfare under Laws 1953, Chapter 574, relating to licensing of county nursing homes established under the authority of Laws 1951, Chapter 610, and the authority relating to the establishment by rule and regulation of minimum standards for the construction, equipment, maintenance and operation therefor is hereby transferred to, vested in, and conferred upon the state board of health.

[1973 c 139 s 1]

144.60 Registration procedure

Subdivision 1. The applicant for registration shall make a verified application therefor on a form furnished by the state board of health. Such application shall be accompanied by affidavits from at least two reputable residents of the county in which the applicant resides or proposes to act as such administrative head, certifying that the applicant is of good moral character. Such application shall be accompanied by a fee of \$15. No person shall be granted any such registration unless such person be at least 18 years of age, of good moral character and has had at least two years experience in an administrative position, and in a hospital of such size as the state board of health may prescribe, in this state, or one of equal standing in another state, or has successfully completed one year of formal training in an approved course in hospital administration, together with an internship if the particular course requires. Where the experience is gained in an institution of a size smaller than that for which registration is sought, the board may require such additional experience as it may prescribe. Where the administrative experience of the applicant has not been acquired in a hospital, and the state board of health upon investigation approves the applicant's qualifications, the state board of health may issue a license to any applicant employed in a hospital of 25 beds or fewer for a probationary period not to exceed two years.

[1973 c 725 s 9]

144.651 Patients of health care facilities; bill of rights; public policy

It is the intent of the legislature and the purpose of Laws 1973, Chapter 688 to promote the interests and well being of the patients and residents of health care facilities. It is declared to be the public policy of this state that the interests of the patient be protected by a declaration of a patients bill of rights which shall include but not be limited to the following:

(1) Every patient and resident shall have the right to considerate and respectful care;

(2) Every patient can reasonably expect to obtain from his physician or the resident physician of the facility complete and current information concerning his diagnosis, treatment and prognosis in terms and language the patient can reasonably be expected to understand. In such cases that it is not medically

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advisable to give such information to the patient the information may be made available to the appropriate person in his behalf;

(3) Every patient and resident shall have the right to know by name and specialty, if any, the physician responsible for coordination of his care;

(4) Every patient and resident shall have the right to every consideration of his privacy and individuality as it relates to his social, religious, and psychological well being;

(5) Every patient and resident shall have the right to respectfulness and privacy as it relates to his medical care program. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly.

(6) Every patient and resident shall have the right to expect the facility to make a reasonable response to the requests of the patient;

(7) Every patient and resident shall have the right to obtain information as to any relationship of the facility to other health care and related institutions insofar as his care is concerned, and;

(8) The patient and resident have the right to expect reasonable continuity of care which shall include but not be limited to what appointment times and physicians are available.

[1973 c 688 s 1]

144.652 Notice to patient

The policy statement contained in section 144.651 shall be posted conspicuously in a public place in all facilities licensed under the provisions of sections 144.50 to 144.58. Copies of the policy statement shall be furnished the patient and resident upon admittance to the facility.

[1973 c 688 s 2]

144.653 Regulations; inspections

Subdivision 1. Rules and regulations. The state board of health is the exclusive state agency charged with the responsibility and duty of inspecting all facilities required to be licensed under the provisions of Minnesota Statutes 1971, Sections 144.50 to 144.58. The state board of health shall enforce such rules, regulations and standards subject only to the authority of the department of public safety respecting the enforcement of fire and safety standards in nursing homes and other licensed health care facilities and the responsibility of the commissioner of public welfare pursuant to Minnesota Statutes 1971, Sections 245.78; 252.28; and 257.081 to 257.123.

Subd. 2. Periodic inspection. All facilities required to be licensed under the provisions of sections 144.50 to 144.58 shall be periodically inspected by the state board of health to insure compliance with its rules, regulations and standards. The state board of health may enter into agreements with political subdivisions providing for the inspection of such facilities by locally employed inspectors.

Subd. 3. Enforcement. With the exception of the department of public safety which has the exclusive jurisdiction to enforce state fire and safety standards, the state board of health is the exclusive state agency charged with the responsibility and duty of inspecting facilities required to be licensed under the provisions of sections 144.50 to 144.58 and enforcing the rules, regulations and standards prescribed by it.

Subd. 4. Without notice. One or more unannounced inspections of each facility required to be licensed under the provisions of sections 144.50 to 144.58 shall be made annually.

Subd. 5. Correction orders. Whenever a duly authorized representative of the state board of health finds upon inspection of a facility required to be licensed under the provisions of sections 144.50 to 144.58 that the licensee of such facility is not in compliance with an applicable regulation promulgated

under the administrative procedures act by the state board of health pursuant to section 144.56, a correction order shall be issued to the licensee. The correction order shall state the deficiency, cite the specific regulation violated, and specify the time allowed for correction.

Subd. 6. Reinspections; fines. If upon reinspection it is found that the licensee of a facility required to be licensed under the provisions of sections 144.50 to 144.58 has not corrected the deficiency or deficiencies specified in the correction order, the licensee shall forfeit to the state within 15 days a sum of up to \$250 for each such deficiency not corrected. For each subsequent reinspection, the licensee may be fined an additional amount for each deficiency which has not been corrected. All forfeitures shall be paid into the state treasury and credited to the general fund.

Subd. 7. Recovery. Any unpaid forfeitures may be recovered by the attorney general.

Subd. 8. Hearings. A licensee of a facility required to be licensed under the provisions of sections 144.50 to 144.58 is entitled to a hearing on any correction order issued to him, provided that he makes a written request therefor within 15 days of receipt by him of the correction order. Such request shall operate as a stay during the hearing and review process of the payment of any forfeiture provided for in this section. Upon receipt of the request for a hearing, a hearing officer, who shall not be an employee of the state board of health shall be appointed by the state board of health, and the hearing officer shall promptly schedule a hearing on the matter, giving at least ten days notice of the date, time, and place of such hearing to the licensee. The hearing and review thereof shall be in accordance with the relevant provisions of the administrative procedures act.

Subd. 9. Nonlimiting. Nothing in this section shall be construed to limit the powers granted to the state board of health in section 144.55.

[1973 c 688 s 3]

144.654 Experts may be employed

The state board of health may employ experts in the field of health care to assist the staffs of facilities required to be licensed under the provisions of sections 144.50 to 144.58 in programming and providing adequate care of the patients and residents of the facility. Alternate methods of care for patients and residents of such facilities shall be researched by the state board of health using the knowledge and experience of experts employed therefor.

[1973 c 688 s 4]

144.655 Program for voluntary medical aid

Licensed physicians may visit a facility required to be licensed under the provisions of sections 144.50 to 144.58 and examine patients and residents thereof under a program which shall be established by the state board of health and regulated and governed by rules and regulations promulgated by the state board of health pursuant to the administrative procedures act. Such rules and regulations shall protect the privacy of patients and residents of facilities. No patient or resident of any facility shall be required to submit to an examination under such program. The state board of health shall consult with medical schools and other experts for the purpose of establishing the program. The state board of health shall encourage the active participation of all licensed physicians on a voluntary basis in such program.

[1973 c 688 s 5]

144.656 Employees to be compensated

All employees of facilities required to be licensed under the provisions of sections 144.50 to 144.58 participating in orientation programs or in inservice training provided by the facility shall be compensated therefor at their regular rate of pay, provided, however, that this section will be effective only to

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the extent that facilities are reimbursed for such compensation by the commissioner of public welfare in the proportion of welfare to total residents and patients in the facility.

[1973 c 688 s 6]

144.657 Volunteer efforts encouraged

The state board of health, through the dissemination of information to appropriate organizations, shall encourage citizens to promote improved care in facilities required to be licensed under the provisions of sections 144.50 to 144.58 throughout the state.

[1973 c 688 s 7]

CHILDREN'S CAMPS

144.75 [Repealed, 1973 c 250 s 2]

AMBULANCE SERVICES

144.801 Definitions

[For text of subd. 1, see M.S.1971]

Subd. 2. "Ambulance" means a vehicle or other form of transportation which is designed or intended to be used in providing transportation of wounded, injured, sick, invalid, or incapacitated human beings, or expectant mothers.

[1973 c 220 s 1]

[For text of subd. 3, see M.S.1971]

Subd. 3a. "Non-emergency ambulance service" means transportation in an ambulance for individuals not requiring treatment while in the ambulance.

[1973 c 220 s 2]

[For text of subds. 4 and 5, see M.S.1971]

144.802 Licensing

No operator shall operate an ambulance service within this state unless it possesses a valid license to do so issued by the state board of health. The cost of such license shall be \$10, the proceeds thereof to be paid to the general fund. Licenses shall be issued annually. The state board of health shall not issue licenses for the operation of newly established ambulance service in the state unless the service meets the standards required by sections 144.801 to 144.806 and the applicant has demonstrated to the satisfaction of the state board of health at a public hearing that the public convenience and necessity require the proposed ambulance service.

[1973 c 220 s 3]

144.804 Standards

Subdivision 1. No publicly or privately owned ambulance service shall be operated in the state unless the drivers and attendants possess a current advanced American Red Cross first aid certificate or an advanced first aid certificate issued by the United States bureau of mines or other first aid certificate authorized by the state board of health.

[1973 c 220 s 4]

Subd. 2. Every ambulance offering emergency service shall be equipped with a stretcher and after July 1, 1975, a two-way communications system and carry the minimal equipment recommended by the American College of Surgeons.

[1973 c 220 s 5]

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Subd. 3. All ambulances offering emergency service, whether publicly or privately owned, shall offer ambulance service 24 hours per day every day of the year and shall be staffed by a driver and attendant. Whenever an ambulance service shall find it impossible to arrange for an attendant to accompany the driver, the driver may proceed to answer an emergency call without an accompanying attendant, provided that the ambulance service shall make all reasonable efforts to arrange for an attendant to be present at the site of the emergency. Drivers and attendants are authorized to use only such equipment for which they are qualified by training.

All ambulances offering non-emergency service shall be equipped with oxygen and resuscitation and aspiration equipment. No ambulance offering only non-emergency services shall be equipped with emergency warning lights or siren.

[1973 c 220 s 6]

[For text of subd. 4, see M.S.1971]

ALCOHOLISM

144.81 [Repealed, 1973 c 572 s 18]

144.82 [Repealed, 1973 c 572 s 18]

144.831 [Repealed, 1973 c 572 s 18]

144.832 [Repealed, 1973 c 572 s 18]

144.833 [Repealed, 1973 c 572 s 18]

144.834 [Repealed, 1973 c 572 s 18]

HUMAN GENETICS

144.93 [Repealed, 1973 c 250 s 2]

NURSING HOMES

144.952 Composition of the board

Subdivision 1. There is hereby created the state board of examiners for nursing home administrators which shall consist of the following members:

(a) A designee of the state board of health who shall be a non-voting member;

(b) the commissioner of public welfare, or his designee who shall be a non-voting member; and the following members appointed by the governor;

(c) two members actively engaged in the management, operation, or ownership of proprietary nursing homes;

(d) two members actively engaged in the management or operation of non-profit nursing homes or hospitals caring for chronically ill or infirm-aged patients;

(e) one member actively engaged in the practice of medicine;

(f) one member actively engaged in the practice of professional nursing; and

(g) three public members as defined for purposes of Laws 1973, Chapter 638.

Subd. 2. The three public members appointed from the general public shall serve until July 1, 1974 or until their successors shall be appointed and qualify; the two members appointed from those actively engaged in the management, operation or ownership of nursing homes shall serve until July 1, 1973

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or until their successors are appointed and qualify; the two members appointed from those actively engaged in the management or operation of hospitals or nursing homes caring for the chronically ill or infirmed, aged patients, shall serve until July 1, 1972, or until their successors are appointed and qualify; the member appointed from those actively engaged in the practice of medicine shall serve until July 1, 1971 or until his successor is appointed and qualifies; the member appointed from those actively engaged in the profession of nursing shall serve until July 1, 1970 or until her successor is appointed and qualifies. Thereafter, any appointment to fill a vacancy shall be for a term of five years. Any vacancy occurring in the position of any appointed member shall be filled by the governor for the unexpired term. Appointed members may be removed by the governor for misconduct, incapacity, incompetence or negligence of duty after being served with a written statement of charges and after the completion of a hearing on such charges.

[1973 c 638 s 3]

144.953 Qualifications for licensure

Subdivision 1. The board shall have authority to issue licenses to qualified persons as nursing home administrators, and shall establish qualification criteria for such nursing home administrators. No license shall be issued to a person as a nursing home administrator unless:

(a) he is at least 18 years of age, of good moral character and otherwise suitable and unless he is of sound physical and mental health;

(b) he has satisfactorily met standards set by the board, which standards shall be designed to insure that nursing home administrators will be individuals who, by training or experience are qualified to serve as nursing home administrators;

(c) he has passed an examination approved by the board and designed to test for competence in the subject matters referred to in clause (b) or unless he has been approved by the board through the development and application of other appropriate techniques.

Provided, however, nothing in sections 144.953 to 144.964 or the rules and regulations thereunder shall be construed to require an applicant for a license as a nursing home administrator or a provisional license, who is certified by a recognized church or religious denomination which teaches reliance on spiritual means alone for healing as having been approved to administer institutions certified by such church or denomination for the care and treatment of the sick in accordance with its teachings, to demonstrate proficiency in any medical techniques or to meet any medical educational qualifications or medical standards not in accord with the remedial care and treatment provided in such institutions.

[1973 c 725 s 10]

[For text of subd. 2, see M.S.1971]

144.955 Compensation of board members

Members of the board shall receive as compensation \$35 per day for attendance at board meetings and they shall also receive their ordinary and necessary expenses in the same amount and manner as state employees; provided that the nonvoting members of the board, the designee of the state board of health and the commissioner of public welfare or his designee, shall receive no per diem payment.

[1973 c 638 s 4]