MINNESOTA STATUTES 2017

246.018 OFFICE OF MEDICAL DIRECTOR.

Subdivision 1. Established. The Office of Medical Director within the Department of Human Services is established.

Subd. 2. **Medical director.** The commissioner of human services shall appoint, and unless otherwise established by law, set the salary of a licensed physician to serve as medical director to assist in establishing and maintaining the medical policies of the Department of Human Services. The commissioner may place the medical director's position in the unclassified service if the position meets the criteria of section 43A.08, subdivision 1a. The medical director must be a psychiatrist certified by the Board of Psychiatry.

Subd. 3. Duties. The medical director shall:

(1) oversee the clinical provision of inpatient mental health services provided in the state's regional treatment centers;

(2) recruit and retain psychiatrists to serve on the state medical staff established in subdivision 4;

(3) consult with the commissioner of human services, community mental health center directors, and the state-operated services governing body to develop standards for treatment and care of patients in state-operated service programs;

(4) develop and oversee a continuing education program for members of the medical staff; and

(5) participate and cooperate in the development and maintenance of a quality assurance program for state-operated services that assures that residents receive quality inpatient care and continuous quality care once they are discharged or transferred to an outpatient setting.

Subd. 4. **State-operated services medical staff.** (a) The medical director shall establish a state-operated services medical staff which shall be under the clinical direction of the Office of Medical Director.

(b) The medical director, in conjunction with the medical staff, shall:

(1) establish standards and define qualifications for physicians who care for residents in state-operated services;

(2) monitor the performance of physicians who care for residents in state-operated services; and

(3) recommend to the commissioner changes in procedures for operating state-operated service facilities that are needed to improve the provision of medical care in those facilities.

History: 1989 c 282 art 4 s 62; 1Sp2003 c 14 art 6 s 23-25