2960.0180 FACILITY OPERATIONAL POLICIES AND PRACTICES.

- Subpart 1. **Policy manuals.** The license holder must submit the facility policy and procedures manuals to the commissioner of human services or corrections for review and make the manuals available to all staff within the facility.
- Subp. 2. **Facility programs.** The license holder must prepare written program descriptions and policies and procedures that implement the program described. Measurable program outcomes must also be identified.
- A. The minimum program components must include the requirements in subitems (1) to (3).
- (1) For group residential facilities offering educational services on site, there must be a 12-month comprehensive and continuous education program for residents that meets the requirements of Laws 1995, chapter 226, article 3, section 60, subdivision 2, clause (2)(ix), and rules of the Department of Education.
- (2) The license holder must provide or coordinate the delivery of social services that, at a minimum, includes individual, group, and family counseling services.
- (3) Policies and procedures must ensure that a trained staff person is available to counsel residents upon request and during times of crisis.
 - B. Each resident must have a treatment plan.
- (1) The license holder must begin to develop a treatment plan within ten days of admission. If the resident's case plan or screening or assessment results indicates that the needs of the resident cannot be met by the license holder, the license holder must document contact with the placement agency and notify the placement agency of the results of the screening or assessment and tell the placement agency that the program is not able to meet the resident's needs.
- (2) The license holder must review the resident's case and treatment plans on a monthly basis or, if necessary, more often and recommend changes, if appropriate.
- (3) The license holder must document the involvement of community treatment, education, and care resources related to the case plan or treatment plan.
- (4) The license holder must assign every resident to a designated staff person to ensure regular face-to-face contact and to monitor and assist the resident to implement the treatment plan.
- (5) The license holder must make individualized written progress reports available to the resident's parent or legal guardian upon request.
- (6) The license holder must forward written educational progress reports to the resident's school district of residence, if it is likely that the resident will return to the resident's district of residence, unless prohibited by law.
- Subp. 3. **Records and reports.** The license holder must have a record retention schedule. The license holder must:

- A. comply with reporting requirements of Minnesota Statutes, section 253C.01;
- B. maintain the records in subitems (1) to (13) according to state law:
 - (1) admission and release records;
 - (2) resident personal property records;
 - (3) special occurrence or incident records;
 - (4) records of staff and volunteer training;
 - (5) food service records;
 - (6) daily log records;
- (7) records about which services were provided to each resident, outcomes of treatment for each resident, and outcomes for program services and program evaluation reports;
 - (8) medical and dental records;
 - (9) disciplinary records and records of appeals;
 - (10) special and regular education records;
 - (11) resident, family, and referring agency satisfaction survey;
- (12) for facilities licensed by the commissioner of corrections, records on strip searches and resident-assisted searches; and
- (13) for facilities licensed by the commissioner of corrections, records on safety-based separation under parts 2960.0720 to 2960.0750; and
 - C. store records in an organized, retrievable manner that ensures confidentiality.
- Subp. 4. Audio or visual recording of resident. Photographs, videotapes, and motion pictures of a resident taken on program premises or by program personnel are considered a resident record. Photographs of a resident for identification and recordings by videotape and audiotape for the purpose of enhancing therapy, staff supervision, or security may be required. A resident must be informed when actions are being recorded, and has the right to refuse any recording unless authorized by law, necessary for program security, or to protect the health and safety of a resident. The use of an audio or visual recording of a resident must comply with data practices laws.

Statutory Authority: MS s 241.021; 245A.03; 245A.09; L 1995 c 226 art 3 s 60; L 2023 c 52 art 11 s 34

History: 28 SR 211; 49 SR 499

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