

FAMILY Adult Foster Care With a 245D-HCBS Program License Licensing Checklist

License Holder's Name: _____ AFC License #: _____

Program Address: _____

Date of review: _____ Type of review: Initial Renewal Other _____

C = Compliance NC = Non-Compliance V = Variance NA = Not Applicable

I. Application						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. The DHS – Family Systems application was completed.	245A.04, Subd. 1					
2. The Workers' Compensation insurance verification form was completed.	MS176.182					

II. Operator Qualifications						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. At application, the following social history information was completed about each household member:* <ul style="list-style-type: none"> • education • employment • financial condition • military service • marital history • strengths & weaknesses of household relationships • mental illness • chemical dependency • hospitalization • involuntary termination of parental rights • use of developmental disability services • felony, gross misdemeanor or misdemeanor convictions • arrests or admissions • substantiated reports of maltreatment 	9555.6125, Subp. 3, B					<i>*Initial application only or when adding an additional applicant</i>
2. The applicant provided the names of three persons not related to the applicant who can supply information about the applicant's ability to operate an adult foster home.*	9555.6125, Subp. 3, D					<i>*Initial application only or when adding an additional applicant</i>

II. Operator Qualifications (continued)						
Requirement	Rule/Statute	C	NC	V	NA	Comments
3. License-holder (LH)* caregivers, and household members meet the following qualifications:						*Referred to in the AFC rule as "operator"
A. LHs and caregivers are at least 18 years of age.	9555.6125, Subp. 4, A					
B. LHs and caregivers do not have a diagnosis of a developmental disability and receive services.	9555.6125, Subp. 4, E					
C. Caregivers and household members do not abuse prescription drugs or use controlled substances, or alcohol, to the extent that the use or abuse has or may have a negative effect on the health, rights, or safety of persons receiving services.	9555.6125, Subp. 4, G					

III. Assessment & Adult Foster Care Services						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. A copy of the initial (and any subsequent) mobility assessment for each person served by the program, completed by the person's social worker or placing worker, is in the person's file at the program in order to determine whether accessibility aides or modifications to the residence are needed.	9555.5605, Subp. 2					
2. A person receiving services who is confined to a wheelchair is housed on a level with an exit directly to grade.	9555.5605, Subp. 2					
3. There is a copy of the individual resident placement agreement (IRPA)* for each person being served by the AFC program. The IRPA is updated annually as required.	9555.5705 subp 2 9555.6167 9555.6245 subp 8					* The IRPA is developed by the social worker or placing worker, and agreed upon by the person served, the person's legal representative and the LH. If a person does not have a social worker or placing worker (private pay), the IRPA is developed by the LH, the person served, and the person's legal representative (if applicable). It is the responsibility of the LH to ensure there is a copy of the plan in each person's file.
4. The IRPA contains all of the following information: A) The reason for placement B) What the LH provides in the following areas: <ul style="list-style-type: none"> • lodging • food • protection • household or living skills training or assistance • personal care assistance • assistance safeguarding cash resources • transportation • residence accessibility modifications • medication assistance • supervision C) Who is financially responsible for the payment of foster care services. D) Any other community, health, and social services the program will assist in providing.	9555.5105, Subp. 19					

III. Assessment & Adult Foster Care Services (continued)

Requirement	Rule/Statute	C	NC	V	NA	Comments
5. Persons receiving services from the home are appropriate for adult foster home placement. Each person: <ul style="list-style-type: none"> • is an adult • is functionally impaired • has requested, or the person's legal representative has requested, foster care placement • has demonstrated a need for foster care based on assessment • does not require continuous medical care or treatment • has been approved for placement if the person has a developmental disability or related condition. 	9555.5605, Subp. 3					
6. If there are any persons receiving services who rely on medical equipment to sustain life or monitor a medical condition, all caregivers have received training on such equipment from a qualified source.* * A "qualified source" is a health care professional or an individual who provides training on this equipment.	245A.155 Subd. 3 & 4					

IV. Capacity

Requirement	Rule/Statute	C	NC	V	NA	Comments
1. There are no more than four persons and/or roomers* in placement unless they have one of the following exceptions: <ul style="list-style-type: none"> • License for 5 elderly without DD/MI diagnosis • They have a variance to provide crisis services in a 5th bed • They have a variance to provide respite services in a 5th bed • They have a capacity of 5 because they met the requirements of 245A.11, subd. 2a (f). * A "roomer" is a household member who is not related to the operator and is not a person receiving services or a caregiver.	245A.11, Subd. 2a (a-f) 9555.5105, Subp. 32 & 33 Subp. 2					
2. If there is a dual license for the program (AFC/CFC or AFC/FCC) a variance has been granted.	245A.16, Subd. 1 (1)					

V. Supervision						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. Oversight is provided by a caregiver according to the individual resident placement agreement. Daily awareness of the needs and activities of persons served by the program is maintained.	9555.5105, Subp. 37, A					
2. A caregiver is present in the residence during normal sleeping hours.* *If the program is using alternate overnight supervision technology, use additional checklist	9555.5105, Subp. 37, B					

VI. Cooperation & Reporting						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. The agency is allowed access to the physical plant and grounds where the program is provided, documents and records, including electronic records, persons served by the program and staff whenever the program is in operation and the information is relevant to inspections or investigations.	9555.6125, Subp. 1 245A.04, Subd. 5					
2. The LH cooperates with the placing worker or social worker in carrying out the provisions of the individual plan for each person receiving services and in developing the individual resident placement agreement.	9555.6175, Subp. 1					
3. A report is made to the licensing agency immediately* after a serious injury* or death of a person receiving services occurs. **"Immediately" means within 24 hours * "Serious injury" means an injury that requires treatment by a physician.	9555.6175, Subp. 3, C					
4. A report is made to the licensing agency within 24 hours of: <ul style="list-style-type: none"> the occurrence of a fire that causes damage or requires services of the fire department repairs or changes requiring a building permit are made to the residence a change in the health status of a caregiver that could affect the ability of the caregiver to care for persons receiving services. 	9555.6175, Subp. 3, B & D					
5. A report is made to the licensing agency within 5 days of: <ul style="list-style-type: none"> any change in the regular membership of the household a caregiver's employment status. 	9555.6175, Subp. 3, A					

VI. Cooperation & Reporting (continued)						
Requirement	Rule/Statute	C	NC	V	NA	Comments
6. A report is made to the placing worker or social worker if the person has one, within 5 days when a person receiving services shows the need for additional community health or social services.	9555.6175, Subp. 4, A					
7. A report is made to the licensing agency within 7 days of the transfer or voluntary discharge of a person receiving services who does not have a placing worker or social worker (private pay).	9555.6175 Subp. 3, G					
8. Notification is made at least 60 days* before the proposed termination of services (involuntary discharge) when a license holder provides intensive supports and services (e.g.foster care): <ul style="list-style-type: none"> to the person or the person's legal representative to the placing worker or social worker to the licensing agency for a person who does not have a placing worker or social worker (private pay). 	9555.6175, Subp. 3, F & 4, B 245D.10 Subd. 3 (b) (2)					* The 30 day requirement in Rule 203 is superseded by the 245D requirement for 60 days notice.
9. Notification is made within 3 days to the placing worker or social worker for person who has one, when a person receiving services wants to voluntarily leave the AFC home.	9555.6175, Subp. 4, B					

VII. Physical Environment						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. The residence was inspected by a fire marshal within 12 months before they were first licensed.	9555.6125, Subp. 2					
2. At relicensing - the DHS home safety checklist was completed before the license was renewed.	9555.6125, Subp. 2					
3. Any condition cited by a fire marshal, building official or health authority as hazardous or creating an immediate danger of fire or threat to health and safety was corrected before a license was issued or renewed.	9555.6125, Subp. 2					
4. The home is free of plumbing, electrical, ventilation, mechanical, or structural hazards that would threaten the health or safety of any person living in the home.	9555.6205, Subp. 1					
5. Each person receiving services has free access to and use of the living room.	9555.6205, Subp. 2					
6. The dining area has furniture that allows for meals to be shared by all persons living in the home.	9555.6205, Subp. 3					
7. A person must have a choice of roommate. <ul style="list-style-type: none"> Each roommate must consent in writing to sharing a bedroom with one another. The LH is responsible for notifying a person of their right to request a change of roommate. 	245A.11, Subd. 9 (a)					

VII. Physical Environment (continued)						
Requirement	Rule/Statute	C	NC	V	NA	Comments
8. Single occupancy bedrooms have at least 80 square feet of floor space with a 7-1/2 foot ceiling. Double occupancy rooms have at least 120 square feet of floor space with a 7-1/2 foot ceiling.	9555.6205, Subp. 4, A (1)					
9. Bedrooms are separated from halls, passage ways, and other rooms in the home by floor to ceiling walls containing no openings except doorways. Bedrooms are not used as a passage way to another room.	9555.6205, Subp. 4 A (2)					
10. The personal possessions and items of persons receiving services are the only items stored in their bedroom.	9555.6205, Subp. 4 A (3)					
11. When possible, a person is allowed to have their own personal furniture in their bedroom, unless doing so would interfere with safety precautions, violate a building or fire code, or interfere with another person's use of the bedroom.	9555.6205, Subp. 4 A (4)					
12. Each person receiving services must be provided with the following items: <ul style="list-style-type: none"> • A separate, adult size single bed or larger with a clean mattress in good repair. • Clean bedding appropriate for the season for each person receiving services. • An individual dresser and closet for storage of personal possessions and clothing. • A mirror for grooming. 	9555.6205, Subp. 4 B					
13. A lock must be provided for each person's bedroom door, unless otherwise indicated for the person's health, safety, or well-being. If restricted, it must be documented and justified in the person's IRPA.	245A.11, Subd 9 (b)					

VIII. Food and Water						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. Water from privately owned wells is tested every year by a Department of Health-certified laboratory to make sure the water is safe. The health authority may require retesting and corrective measures if results exceed state water standards.	9555.6215, Subp. 1					
2. Three nutritionally balanced meals a day are served and available to persons, and nutritious snacks are available between meals. Food served meets any special dietary needs of persons served by the program.	9555.6215, Subp. 2					
3. Food is obtained, handled, and properly stored to prevent contamination, spoilage, or a threat to the health of a person.	9555.6215, Subp. 3					

IX. Pets						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. Pets housed within the home must be maintained in good health.	9555.6225, Subp. 7					
2. Before a person is admitted to the program, the person and the persons' legal representative are notified that there are pets in the home.						

X. Sanitation, Health & Safety						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. The home is clean.* The home is free from accumulations of dirt, rubbish, peeling paint, vermin, or insects. **"Clean" means the absence of dirt, grease, rubbish, garbage, and other offensive, unsightly, or extraneous matter.	9555.6225, Subp. 1					
2. Chemicals, detergents, and other toxic substances are not stored with food products.	9555.6225, Subp. 2.					
3. The home has readily available first aid supplies including: <ul style="list-style-type: none"> • bandages • sterile compresses • scissors • an ice bag or cold pack • an oral or surface thermometer • mild liquid soap • adhesive tape • a first aid manual. 	9555.6225, Subp. 4					
4. Individual clean bed linens, towels, and wash cloths are available for each person served.	9555.6225, Subp. 6					
5. Weapons* and ammunition are stored separately in locked areas that are not visible or accessible to persons receiving services. **"Weapons" means firearms and other instruments or devices designed for and capable of producing bodily harm.	9555.6225, Subp. 10					

XI. Emergencies						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. The home has the following items that are working and readily available in case of an emergency: <ul style="list-style-type: none"> • A non-coin operated telephone • A flashlight 	9555.6225, Subp. 5 A					
2. The telephone numbers of each person's legal representative (if applicable), physician, and dentist are readily available.	9555.6225, Subp. 5 B					
3. The following telephone numbers are posted or available in an easily seen location: <ul style="list-style-type: none"> • Local fire department • Police department • An emergency transportation service 	9555.6225, Subp. 5 C					
4. Prior arrangements are made for a substitute caregiver to provide care during emergencies.	9555.6225, Subp. 5 D					
5. Each person served by the program is informed of a designated area within the home to go to during severe storms and tornadoes.	9555.6225, Subp. 5 E					
6. Fire drills are conducted at least once every three months.	9555.6225, Subp. 5 F					
7. The following items are on file and available in the home: <ul style="list-style-type: none"> • A written fire escape plan • A log of quarterly fire drills 	9555.6225, Subp. 5 G					
8. There is a written fire escape plan for the program that includes the following: <ul style="list-style-type: none"> • emergency phone numbers • a place to meet outdoors for roll call • smoke detectors and fire extinguisher locations • plans for quarterly fire and tornado drill sessions • escape routes to the outside from the levels used by persons served in the program. 	9555.6225, Subp. 5 H					
9. In buildings with three or more dwelling units, the floor plan identifies the location of enclosed exit stairs.	9555.6225, Subp. 5 H					
10. There is an emergency escape plan* for each person served by the program.	9555.6225, Subp. 5 H					
*The plan may be posted or readily available to staff and persons served by the program.						

XII. Medications						
Requirement	Rule/Statute	C	NC	V	NA	Comments
Schedule II controlled substances in the home are stored in a locked storage area. Only persons served by the program that are authorized and/or caregivers that are authorized are permitted access to these medications.	9555.6225, Subp. 9					

XIII. Record on the Residence						
Requirement	Rule/Statute	C	NC	V	NA	Comments
A record for the licensed adult foster care home shall be maintained by the licensing agency and contain: 1) a list of persons currently receiving services 2) a list of persons served in the home in the past five years.*	9555.5515 H & I					*This is a Rule 13 requirement for the licensing agency. Information should be obtained from the LH records.

XIV. Adult Foster Home Program Plan						
Requirement	Rule/Statute	C	NC	V	NA	Comments
The LH must develop and implement a written plan approved by the licensing agency that allows persons served by the program to share in the privileges and responsibilities of the home. The plan must include the information in items A to C:						<i>This is to be developed @ initial application. Please review at renewal to determine if it is still accurate and complete.</i>
A. The type of functionally impaired adults the program will serve.	9555.6235 A					
B. The foster care that will be available to persons served within the home including: <ul style="list-style-type: none"> Lodging Food Protection Personal care Household/living skills assistance or training Opportunities to participate in community, recreation and religious activities, and events of the person's choosing Opportunities for the person to have contact with family and friends Assistance with cash resources of persons served by the program such as banking, reporting the person's earnings as required, keeping records of financial information and accounting of any funds of the person that are overseen by the program Supervision Transportation Assistance with other community, social, or health services as named in the person's individual plan, if any Medication assistance 	9555.6235 B					

XV. Protection						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. The LH ensures persons served by the program are protected from abuse and neglect by complying with the Vulnerable Adults Act (VAA).	9555.6195, Subp. 1					
2. Caregivers immediately report any suspected maltreatment of a person as required.	9555.6175, Subp. 2					
3. The program complies with non-discrimination practices.	9555.6195, Subp. 2					
4. There is a program abuse prevention plan (PAPP)* with specific measures to be taken to minimize the risk of abuse to persons receiving services. The scope of the PAPP is limited to the population, physical plant, and environment within the control of the LH and the location of the home.	9555.6235 C & 626.557, Subd. 14 & 245A.65, Subd. 2					<i>*The PAPP is a general written plan about the licensed program. It should not include identifying information about specific/individual persons served by the program.</i>
The PAPP must include items A – D below:						
(A) The assessment of the population includes an evaluation of the following factors: <ul style="list-style-type: none"> • age • gender • mental functioning • physical and emotional health or behavior of the persons receiving services • the need for specialized programs of care for persons receiving services • the need for training of staff to meet identified individual needs • knowledge a LH may have regarding previous abuse that is relevant to minimizing the risk of abuse for all persons receiving services in the home 						
(B) The assessment of the physical plant where the licensed services are provided includes an evaluation of the following factors: <ul style="list-style-type: none"> • condition and design of the building • difficult areas to supervise as it relates to the safety of persons receiving services 						
(C) The assessment of the environment where the home is located includes an evaluation of the following factors: <ul style="list-style-type: none"> • the location of the home in a particular neighborhood or community • the type of grounds and terrain surrounding the building • the type of internal programming • staffing patterns in the home 						

XV. Protection (continued)						
Requirement	Rule/Statute	C	NC	V	NA	Comments
(D) The plan is reviewed at least annually using the assessment factors above and any substantiated maltreatment findings that occurred since the last review. The plan is revised, if necessary, to reflect the review results.						
5. A copy of the program abuse prevention plan is posted or available in an easily seen location in the home and is available upon request to mandated reporters, persons receiving services, and legal representatives.						

XVI. VA Maltreatment Policy						
Requirement	Rule/Statute	C	NC	V	NA	Comments
There is a copy of the internal and external reporting policies and procedures regarding maltreatment of vulnerable adults (VA), including the telephone number of the common entry point, posted or available in an easily seen location in the program. Mandated reporters, persons receiving services, and the person's legal representatives may request a copy of the policies and procedures.	245A.65, Subd. 1 (d)					

XVII. Background Studies						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. Background studies have been submitted for all LHs, caregivers, and household members over the age of 13, employees and volunteers who have direct contact with persons receiving services in the adult foster home.	9555.6125, Subp. 3, A & Subp. 4, C 245C.03 Subd. 1					
2. LHs, caregivers, and household members are not disqualified, or have been granted a variance or a set-aside of a disqualification.	9555.6125 Subp. 4, D & 245C.03					<i>*If a variance was issued remember to address at license renewal</i>
3. A new background study must be submitted when: <ul style="list-style-type: none"> an individual requiring a background study following an absence of 120 or more consecutive days returns to the program a program that discontinued providing licensed direct contact services for 120 or more consecutive days begins to provide these services again. 	245C.04, Subd. 1 (i)					
4. The program documents and maintains the following information: <ul style="list-style-type: none"> the date the background study is submitted the date the subject of the study first has direct contact with persons served by the program the date of the notice that the study was completed If the LH has not received a response from DHS within 45 days of submission of a study, the LH must contact DHS to inquire about the status of the study.	245C.20					

XVII. Background Studies (continued)						
Requirement	Rule/Statute	C	NC	V	NA	Comments
5. Criminal conviction data and substantiated reports of maltreatment of adults and/or minors of an individual subject to a background study must be provided to the commissioner.	245C.05, Subd. 6 (a)					
6. Any subsequent information received about the possible criminal or maltreatment history of an individual who is the subject of a background study must immediately be provided to the commissioner.	245C.05, Subd. 6 (b)					

The policies in the following section should only be monitored for persons who are receiving services funded by the Elderly Waiver or private pay. The policies of persons who are receiving services funded by any Disability Waiver will be monitored by DHS-245D HCBS licensing.

XVIII. Policies						
Requirement	Rule/Statute	C	NC	V	NA	Comments
For adult foster care programs that provide services to persons funded by the Elderly Waiver (EW):						<i>* Mark "NA" in this section if the program does not serve persons on EW or private pay.</i>
1. A LH must establish policies and procedures for service termination that promote continuity of care and service coordination with the person, the case manager, and with another licensed caregiver, in any, who also provides support to the resident.	245A.11, Subd. 11 (b)					
2. The service termination policy must include the following: The LH must allow the person to remain in the home and cannot terminate services unless: <ul style="list-style-type: none"> the termination is necessary for the person's health, safety, and well-being and their needs cannot be met in the home the safety of the person or another person receiving services is endangered and positive support strategies were attempted and have not achieved and effectively maintained safety for them. the program was not paid for services.* the program ceases to operate;* or the resident was terminated by the lead agency from waiver eligibility. 	245A.11, Subd. 11 (c)					
3. Before giving notice of service termination, the LH must document the action taken to minimize or eliminate the need for termination. The action taken by the LH must include, at minimum: <ul style="list-style-type: none"> Consultation with the person's interdisciplinary team to identify and resolve issues leading to a notice of service termination. A request to the case manager or other professional consultation or intervention services to support the person in the program. This requirement does not apply to a notice of service termination issued under * above. 	245A.11, Subd. 11 (d)					

XVIII. Policies (continued)						
Requirement	Rule/Statute	C	NC	V	NA	Comments
4. If, based on the best interests of the person, the circumstances at the time of notice were such that the LH was unable to provide the actions in #3 above, the LH must document the circumstances and the reasons why they were unable.	245A.11, Subd. 11 (e)					
5. The LH must notify the person or the person's legal representative and the case manager in writing of the intended service termination. The notice must include: <ul style="list-style-type: none"> the reason for the action except for not being paid for services or the program ceasing to operate, a summary of the action taken to minimize or eliminate the need for termination and the reason the action failed to prevent termination the person's right to appeal the service termination the person's right to seek a temporary order staying the service termination 	245A.11, Subd. 11 (f)					
6. Notice of the proposed service termination must be given at least 30 days before service termination.	245A.11, Subd. 11 (g)					
7. After the person receives a notice of service termination and before the services are terminated, the LH must: <ul style="list-style-type: none"> work with the support team or expanded support team to develop reasonable alternatives to support continuity of care and to protect the person provide information requested by the person or case manager maintain information about the service termination, including the written notice, in the person's record. 	245A.11, Subd. 11 (h)					
8. A copy of the service termination policy must be provided annually.	245A.04, subd. 14 (d)					

Licensors's Name: _____ Date: _____