

Governing Rules and Statues

- MN Rule 9555.5050 9555.6265
- MN Statutes 245A Human Services Licensing Act
- MN Statutes 245C Human Services Background Studies
- MN Statute 626.557 Vulnerable Adults Act

Responsibility is yours for knowing the regulations.



Family adult foster care

This PowerPoint will cover orientation and review for family adult foster care.

There is currently a moratorium on the development of corporate adult foster care. This means that each county has a limited number of beds to use, and no additional beds can be created, with limited exceptions.



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Acronyms and terms to know

AFC – Adult Foster Care

CRS – Community Residential Setting

DHS – MN Department of Human Services

RLS – Sourcewell Regional Licensing Specialist (delegated county licensor)

Caregiver/license holder/provider: for this PowerPoint, these terms are interchangeable

Resident/client: for this PowerPoint, these terms are interchangeable



AFC philosophy

- AFC services are intended to provide normalization through person centered services that maximize client potential and provide the highest quality of life in the least restrictive environment
- Provide a home atmosphere and promote community inclusion

What is adult foster care?

- 24-hour residential program which includes the provision of
 - Food
 - Lodging
 - Protection
 - Supervision
 - Household services
 - And more...



AFC services

- Are provided due to:
 - Developmental Disability
 - Age
 - Mental illness
 - Physical disability
 - Chemical dependency
 - Multiple impairments



Who needs AFC services?

- Difficulty carrying out one or more of the essential major activities of daily living:
 - Caring for self
 - Performing manual tasks
 - Walking
 - Seeing
 - Hearing
 - Speaking
 - Breathing
 - Learning
 - Working

- Disorder of thought or mood that significantly impairs:
 - Judgement
 - Behavior
 - Capacity to recognize reality
 - Ability to cope with ordinary demands of life

Where is adult foster care provided?

- Family adult foster care is provided from the primary residence of the license holder. This means that:
 - The license holder must live in the home full time and provide most of the licensed care.
 - The resident must have access to all common areas of the home, and the home may not be separated into a resident area and family area.

Who determines that someone can receive AFC services?

A placing worker, often a social worker, shall ensure that a person seeking AFC placement has an assessment to determine a need for AFC placement.

Types of AFC homes

- Family homes
 - License holder lives in the home
- Corporate homes
 - License holder does not live in the home
- The home must be licensed through the county in which the home is located

What is included in an assessment?

- Ability to manage activities of daily living
- Physical health
- Intellectual functioning and mental health
- Need for supervision
- Need for assistance in safeguarding cash
- Need for medication assistance
- Employability and vocational skills
- Need for family and community involvement
- Need for community, social or health services



Where do placements come from?

- Agency social workers
- Hospitals
- Nursing homes
- Residential facilities
- Families
- Other counties
- Self-referral

How do people pay for AFC?

- Private pay
- Supplemental security income (SSI)
- Group residential housing (GRH)
- Waiver (Except for EW license holders must also have an HCBS license to receive waiver payment)
 - Elderly Waiver (EW)
 - Brain Injury (TBI)
 - Developmental Disability (DD)
 - Community Alternative Care (CAC)
 - Community Alternatives for Disabled Individuals (CADI)
- General assistance (GA)





Who can provide AFC services?

- To be issued a license for AFC the applicant must:
 - Be at least 18 years of age.
 - Not have a diagnosis of developmental disability and be receiving services.
 - Must not abuse of prescription drugs or use of controlled substances, or alcohol, to the extent that there is a negative effect on the individual receiving services.
 - Must disclose arrest, conviction, and criminal history information.
 - Must not have a background study disqualification that has not been set aside.
 - DHS may require a physical, mental health, chemical dependency, or criminal history evaluation for any license holder or applicant.



Responsibilities

- DHS (or delegated authority) is responsible for:
 - Initial and renewal licensing.
 - Monitoring compliance with licensing rules.
 - Investigating allegations of licensing violations.
 - Monitoring serious injury and death reports.
 - Enforcing orders of Commissioner.

Responsibilities con't.

- The local agency, county, and/or placing agency is responsible for:
 - Matching clients with homes based on capacity, assessed needs and facility program plans.
 - Completing assessments.
 - Arranging a pre-placement visit.

Responsibilities con't.

- The provider (license holder) is responsible for:
 - Knowing and complying with licensing rules.
 - Making reports to the agency and/or RLS including:
 - Changes to home, resident changes, caregiver changes, serious incidents, deaths and more.
 - Developing, maintaining and complying with relevant program, staff and client documents/plans including:
 - Carry out services specified in client plans.
 - Providing for the health, safety and well-being of residents.
 - Providing identified supervision, medication management, and safeguarding of cash.



Supervision

- Family AFC homes must have:
- Oversight by a caregiver as specified in the Individual Resident Placement Agreement (IRPA)
- Daily awareness of residents needs and activities
- Presence of a caregiver during normal sleeping hours

Capacity

Maximum of 4 residents

OR

 Maximum of 5 residents if all are over 55 and do not have a Mental Illness (MI) or Developmental Disability (DD) diagnosis

 Capacity is determined by a variety of factors including the number of bedrooms available, licensing study, and caregiver preference.

Capacity con't

Capacity includes "roomers"

"Roomer" means a household member who is not related to the operator and is not a resident or caregiver.

"Individual who is related" means a spouse, a parent, a birth or adopted child or stepchild, a stepparent, a stepbrother, a stepsister, a niece, a nephew, an adoptive parent, a grandparent, a sibling, an aunt, an uncle, or a legal guardian.

Licensing process

- The licensing process can take three to four months, or longer to complete. When all the paperwork and training requirements have been met, RLS will send their licensing recommendation to the Department of Human Services within 20 business days.
- Length of licensing is determined by the following factors:
 - Applicant paperwork return rate. The quicker paperwork is completed and returned, the quicker the process will go.
 - DHS depending on the number of requests at any given time, processing time at DHS will vary.
 - Fire Marshal workload of the fire marshal will impact how quickly an inspection can be scheduled. Depending on the citations by the fire marshal, the length of time needed to make the corrections may also impact licensing time.



Application process – beginning steps

- To start the process an AFC application and supplement form must be submitted to your RLS.
 - This is available on the Sourcewell Licensing Website or through your RLS.
 - There is no fee to apply for a family AFC license.
- Your RLS will provide you instructions on the fire marshal inspection
 - There is a \$50 fee for fire marshal inspections
- Background studies must be completed for all persons 13 and older living and/or working in the home.
 - There is a fee for background studies and fingerprinting



Training

- Applicants must complete 3 hours of orientation before being licensed
- All adults living/working in the home must complete annual vulnerable adult maltreatment reporting (VAMR)
- Annual ongoing training
 - 0-5 years of AFC licensure/experience = 12 hours
 - 6+ years AFC licensure/experience = 6 hours

Training Topics

- Communication skills
- Roles and relationships in foster care
- Community services for adults
- Constructive problem solving
- Cultural differences
- Basic first aid and CPR
- Home safety
- Self-esteem
- Medication assistance
- Human sexuality
- Death, dying, separation, and grieving
- Aging process
- Recreation and leisure time
- Nutrition

- Mental health
- Developmental disability
- Physical disabilities
- Chemical dependency
- Abuse and neglect
- Stress management
- Assertiveness
- Eating disorders
- Behavior problem solving
- Money management
- Data privacy
- Living skills training
- Other areas that the local agency documents as relevant



Physical environment of AFC

- The residence must meet the definition of a dwelling unit in a residential occupancy according to the MN Fire Code.
- The home must be free from plumbing, electrical, ventilation, mechanical or structural hazards that threaten health or safety of resident.

Physical environment: living space

- Common areas: residents must have access to all common spaces of the home (living and dining rooms, bathrooms, laundry, etc.).
- Dining room the dining area must have enough space for all residents and family members to dine together.
- Bedrooms must be separated from halls, corridors and other room with floor to ceiling walls:
 - Single person = 80 sq. feet with 7½ foot ceiling
 - Two people 120 sq. feet with 7½ foot ceiling
 - Shared bedrooms are allowed, however both residents must agree in writing.

Physical environment: bedrooms

- Bedrooms must have a lock for privacy.
- Resident's possessions are the only items allowed to be stored in the bedroom.
- Residents can keep personal furniture in their bedrooms in they wish.
- If residents do not have their own, they must be provided with:
 - Adult size bed (single size at minimum)
 - Individual dresser and closet
 - Mirror for grooming (a bathroom mirror does not county unless it is a private bathroom)
 - Individual clean bedding, towels and wash cloths (towels and wash cloths can be stored in another area, but must be specific to individual)



Water and food

- Well water must be tested annually for nitrates and coliform bacteria.
- Water temperature cannot exceed 120°F.
- The caregiver must provide 3 meals per day and nutritious snacks between meals.
- Food must meet dietary needs.
- Food must be obtained, handled and properly stored to prevent health risk.

Sanitation and health

- The residence must be clean free from accumulations of dirt, rubbish, peeling paint vermin or insects.
- Chemicals, detergents, toxic substances cannot be stored with food.
- First aid supplies must be available in the home including:
 - Bandages, sterile compress, scissors, ice pack, thermometer, liquid soap, adhesive tape, and a first aid manual.

Pets

- The caregiver must notify the resident/guardian, prior to admission, of pets in the home.
- Pets must have vaccinations and the vet record must be maintained.
- Some animals may require a variance or may not be allowed.

Weapons

- "Weapons" means firearms and other instruments or devices designated for and capable of producing bodily harm.
- Weapons and ammunition must be stored separately in locked areas that are not visible or accessible to persons receiving services.
 - If weapons are stored in a weapon safe the safe must have an additional locked box inside for ammunition.

Emergencies

- The home must have a telephone, battery radio and flashlight.
 - Caregivers may use their cell phone as a flashlight however, a separate battery-operated radio is needed.
- Emergency phone numbers must be posted by the phone.
- A substitute caregiver must be identified.
- There must be a designated area for tornadoes/severe weather.
- Fire drills must be conducted at least every 3 months (90 days). Severe weather drills must be conducted at least twice per year (must keep a log).
- An escape plan must be posted or readily available to the caregiver and residents.

Emergencies: escape plans

- Approved by the fire marshal.
- List emergency phone numbers.
- Identifies a place to meet outdoors.
- Identifies smoke detector and fire extinguisher locations.
- Has plans for fire and tornado drills.
- Identifies escape routes from all used levels.
- There must be an escape plan for each resident.
- Residents confined to a wheelchair must be on a level directly to grade (main floor/ramp/etc.)

Relicensing

- Initially, AFC homes are licensed for 1 year.
- Subsequently, licenses generally last 2 years.
- Initial license looks at the same items as relicensing, however:
 - Relicensing will have specific client information to check
 - No fire marshal inspection is needed unless there are new concerns.



Fire Marshal Inspection

- Initial Fire Marshal inspections are valid for 1 year from date of inspection.
- Any/all items cited by the Fire Marshal must be corrected prior to occupancy by a resident.
- Updated Fire Marshal inspections are needed:
 - after construction that alters the physical layout of the home or adds additional electrical wiring.
 - after significant fire or storm damage.
 - any time the licensing agency determines there is a potential safety concern.

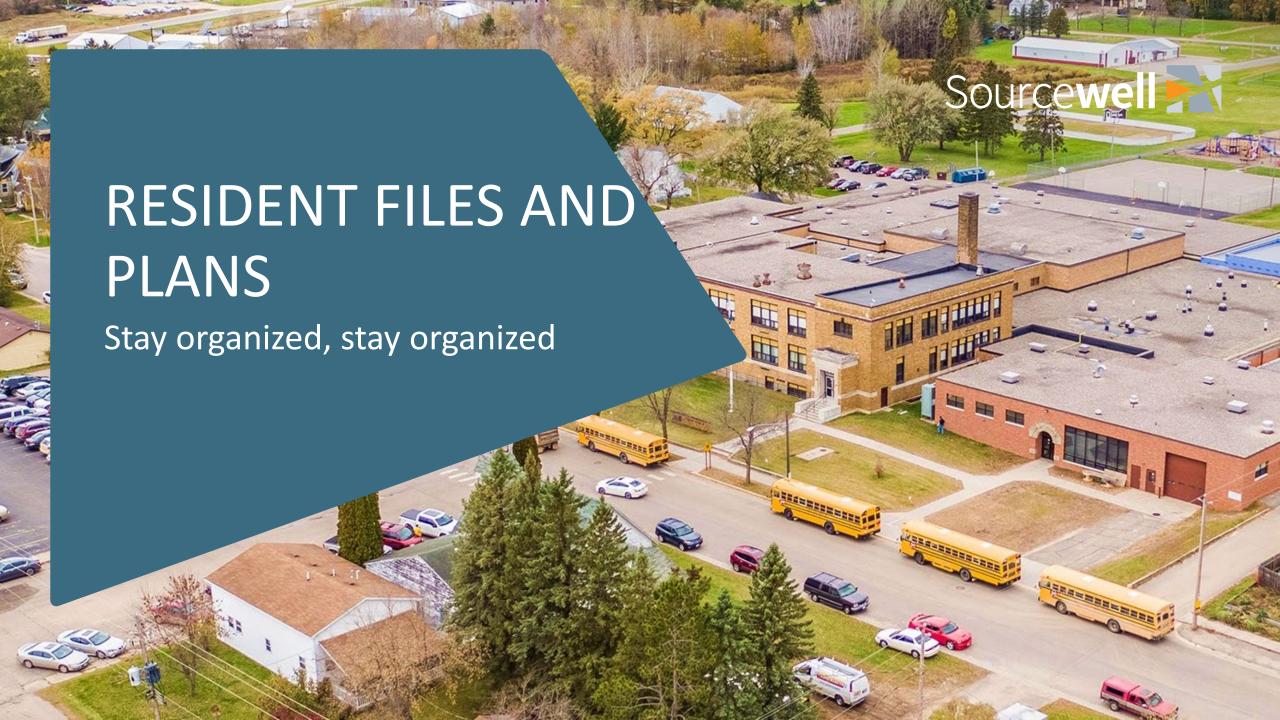




Policies and procedures

- Homes must develop and maintain the following policies and procedures (programs with an additional HCBS license may have additional policies and procedures):
 - Escape plans, fire drills, and tornado drills.
 - Emergency Response, Reporting and Review policy.
 - Alcohol and Drug policy
 - Grievance Policy and Complaint Procedures
 - Vulnerable Adult Act: Policies and Internal/External Reporting Procedures
 - Program Plan: How residents will be involved in privileges and responsibilities of the home
 - Program Abuse Prevention Plan (PAPP): An assessment identifying risk factors and specific measures that will be taken to minimize abuse
 - Notice of Privacy Practices





Records for residents

- Demographic information/intake information
- Medical information/contact
- Guardian contact information
- Cash resource record
- Incident reports
- Individual abuse prevention plan (IAPP)
- Individual resident placement agreement (IRPA)
- Mobility assessment
- Medication record and permission to administer medications
- Discharge information
- Keep for 5 years after discharge



Individual plans (annually reviewed)

- Individual abuse prevention plan
 - Take into consideration vulnerable adults act
 - Risk assessment and risk reduction plan
- Individual Resident Placement Agreement
 - Reason for placement
 - Services and other provision that will be provided
 - Financial responsibility
 - Needs for assistance with other community, health, and social services

Resident health

Physical Exam:

- Completed 30 days prior or 3 days after entering AFC
- Ensure free from communicable diseases
- May use hospital transfer records

Medication Assistance

- Written permission from resident or guardian
- Statement from Doctor
- Providers need special permission from doctor to give injectable medication



Medication administration

- Check to be sure:
 - Administration is authorized by physician
 - Approved by guardian (if applicable)
 - Appropriate labeling/prescriptions/orders
 - Passed and documented appropriately (MAR)
 - Adverse reactions, refusals, and errors are documented and reported appropriately
 - Caregivers are appropriately trained
 - Schedule II controlled meds are locked

Safeguarding cash

- Determined need. Documented permission to manage funds by resident/guardian/POA.
- Must provide receipt for expenditures.
- Maximum: \$300 plus one month's cost of care
- Must provide written quarterly reports to guardian/POA.
 - POA Power of Attorney (could mean conservator for this purpose)

Other intake documents

- Grievance procedures
- Explanation of rights
- Summary of Vulnerable Adults Act
- Name, address and phone for licensing agency

 Resident orientation to the program must occur within 24 hours



Vulnerable Adults Act (MN Rule 626.557)

- Minnesota requires reporting of suspected maltreatment of vulnerable adults
- A mandated reporter who suspects or has knowledge of maltreatment must make an oral report to the common entry point immediately. Electronic reports through the common entry point may be accepted.

Where to report

Reports can be made:

- To the Intake Worker/Adult Protection Worker at the County
- To the Minnesota Adult Abuse Reporting Center (MAARC)
 - 1-844-880-1574
 - Through the <u>online form</u>

Resident's Rights 9555.6255

All residents have certain basic rights. License holders are responsible for giving the following information at admission:

- An explanation and copy of resident's rights
- A summary of the Vulnerable Adults Act
- Grievance/Complaint Policy and Procedure

Resident's Rights Con't

Residents also have the right to:

- Use the telephone
- Send and receive mail
- Privacy
- Use personal property
- Associate (visit)



Caregiver trainings

- Orientation within 72 hours:
 - 245A.65 requirements
 - Reporting requirements and definitions
 - Program abuse prevention plan (PAPP)
 - Internal policies/procedures for preventing and reporting maltreatment
- Annual VA training
- Drug and alcohol policy
- Relevant medical equipment training

Caregiver annual training requirements

- Annual Vulnerable Adult Maltreatment Reporting (VARM)
- Annual ongoing training
 - 0 to 5 years experience = 12 hours
 - 6+ years experience = 6 hours
 - Training topics as outlined previously in the PowerPoint

Background studies

- Background studies are required for all license holders, caregivers, and household members over age 13 (includes everyone having direct contact with residents)
- Program must maintain the following:
 - Date study is submitted
 - Date subject of study has direct contact
 - Date notice of study was complete

Corporate requirements

Corporate foster homes have additional requirements that are not discussed at this time. If the moratorium on corporate foster homes is lifted, or if a home is granted a variance, the licensor will discuss these requirements with the license holder.

For additional questions or to start the process contact the Sourcewell AFC licensing team at:

<u>licensing@sourcewell-mn.gov</u> <u>Sourcewell Licensing Interest Form</u> 218-895-4120

Forms and resources are always available at the Sourcewell Licensing Website

