

MN REGION 10 QUALITY ASSURANCE PROJECT

RELATED LICENSING PROCEDURES

6-14-00

I. INITIAL LICENSING PROCEDURES

A. INITIAL LICENSE APPLICATION PROCESS

An applicant must request a license application from the County Quality Assurance (QA) Manager. General steps in the application process include:

1. An application for a license in a project county must be made on the application form provided by the QA Manager. The applicant must be the individual or the authorized representative of the partnership, corporation, or government unit that will be the license holder.
2. Separate licenses are required for each service site owned or leased by the applicant, even if the service sites will be operated by the same license holder.
3. The applicant must submit the following information to the QA Manager:
 - a. A copy of the approved need determination for services (applies to day training and habilitation services or supervised living facilities including ICFs/MR).
 - b. A facility program abuse prevention plan (if you specifically own or lease the physical plant for the service) as required by Minnesota Statutes, section 245A.65, subdivision 2.
 - c. A list of contact person(s) with their telephone numbers.
 - d. A list of the Board of Directors for the facility; identify the chairperson (if applicable).
 - e. A list of mandated reporters, identifying the date of hire. Please specifically indicate the names of people who provide direct contact services.
 - f. A copy of the floor plan (for day training and habilitation services which operate a site only).
 - g. Internal reporting procedures as required by the Vulnerable Adults Act, Minnesota Statutes, 626.557, subdivision 4a and Minnesota Statutes, section 245A.65, subdivision 1.
 - h. Emergency use of controlled procedures as required by Minnesota Rules, parts 9525.2700 to 9525.2810 (Rule 40) and Minnesota Statutes, section 245.825.
 - i. Drug and Alcohol policy (personnel) as required by Minnesota Rules, part 9543.1020, subpart 14.
 - j. A copy of the license holder's plan to meet the outcomes required in item IV in the Quality Assurance Standards.
4. The County QA Manager will begin processing the application after they have received a complete application of all forms and documentation that meet requirements as indicated in number 3 above.
5. The County or its designee will complete a site visit when the site is owned or leased by the license holder, and based on the information obtained from the site visit and the initial licensing study, will make a license recommendation to the Department of Human Services. If the license application is approved, the Department of Human Services will issue the license.

B. INITIAL LICENSING STUDY

1. Site Review

The applicant shall give the county appointed staff access to the service site to determine compliance with the MN Region 10 Standards and Licensing Procedures. For residential service sites, the residence must be inspected by a Fire Marshal within 12 months before initial licensure. For day training and habilitation services, evidence of Fire Marshal approval, Building Inspector approval and Zoning approval must be received prior to the issuance of an initial license. A Physical Environment and Safety Checklist approved by the county must be completed by the county staff or county designee before licensure. If the county believes that a potentially hazardous condition may be present, the county staff shall request a subsequent inspection and written report by a Fire Marshal, building official or health authority to verify that no hazard exists. 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 must be corrected before a license will be issued by the Department of Human Services.

2. Background Studies

The applicant is responsible for initiating background studies in accordance with Minnesota Statutes, section 245A.04, subdivisions 3, 3a, 3b, 3c, and 3d.

The Department of Human Services will conduct background studies under the above cited provisions for license holders of: 1) day training and habilitation services; 2) semi-independent living services; 3) ICFs/MR; 4) MR/RC Waiver in-home support; and if the county has an agreement with the Department of Human Services 5) programs with joint licensure as home and community based services and adult services and adult foster care for people with developmental disabilities when the license holder **does not** reside in the foster care home.

County agencies will conduct background studies under the above cited provisions for adult foster care programs and license holders with joint licensure as MR/RC home and community-based waived services and adult foster care when the license holder resides in the foster care residence.

II. LICENSING ACTIVITY

A. CONDITIONS FOR LICENSING

License holders, direct support individuals and household members must meet all of the following qualifications:

1. Direct support individuals must be qualified to do the work they are hired to perform and physically able to perform the duties necessary to support persons being served.
2. The county reserves the right to request a written statement that direct support individuals are physically capable of providing the needed services.
3. Direct support individuals and household members must not abuse prescription drugs or be under the influence of a controlled substance as defined in Minnesota Statutes,

- chapter 152, or alcohol while directly responsible for individuals supported by the license holder.
4. The county may require, before licensure or at anytime during the licensed term, a physical, mental health, chemical dependency, or criminal history evaluation of the license holder, direct support individual or household member if the county has reasonable cause to believe that any of the conditions or requirements under items 1 to 3 listed above have not been met, or that the license holder or any direct support individual cannot care for a person receiving services. Evaluations must be conducted by a professional qualified by a license, certification, education, or training to perform the specific evaluation.
 5. For adult foster care services where the license holder resides in the residence, the license holder must notify the county before there is an addition of any adult or child who is or will be a roomer, household member, or direct support individual.
 6. The license holder must notify the county and must complete the licensing study components when a license holder makes structural changes to the service site that require a building permit from the local jurisdiction.

B. PERIOD OF REVIEW AND PERIOD OF LICENSURE

All licenses expire on December 31st of each year (except for adult foster care licenses). DHS will continue to collect annual licensing fees at this time. Adult foster care licenses are issued for up to 24 months consistent with the required review period. All other license holders will have review periods up to 24 months that will not coincide with the license expiration at the end of each year.

Initial licenses will be granted for no more than a one-year period. If a program is issued an initial license, within 12 months from the first day of licensure, the county shall provide the Commissioner with a recommendation related to continued licensure based on the information gathered through the MN Region 10 QA system.

A license holder will receive an application for a required review from the QA Manager prior to the expiration of the previous review (foster care license holders will receive an application for review and license renewal from a County Foster Care Representative). A review of compliance with the Region 10 Quality Assurance Standards and Minnesota Statutes and Rules not waived under the project will be completed at least every 24 months.

C. LICENSING CAPACITY

License capacity will be established as part of the initial licensing process through the county. Foster care homes will be licensed for no more than four persons.

D. VARIANCES TO THE QUALITY ASSURANCE STANDARDS

A variance to the Region 10 Quality Assurance Standards may be granted by the county if:

1. the variance is submitted to the Quality Assurance Manager;
2. the variance does not affect the health, rights, or safety of the persons served;
3. the variance would not be contrary to the intent of MN Region 10 Quality Assurance System and Minnesota Statutes and Rules that have not been waived under the project; and

4. is approved by the county supervisor or director after review by the QA Manager and when appropriate, the county foster care licensing representative.

If the county receives a variance request for a licensing function retained by the Commissioner of Human Services, the county shall forward the variance request to the Department of Human Services with a county recommendation regarding the variance request. **Variations to the terms** of the license must be approved by the Department of Human Services.

E. CHANGE IN LICENSE TERMS

If the license holder wishes to **change the terms** of the license, the license holder must notify the county and obtain the county's approval. A need determination as per Minnesota Statutes, section 252.28 subdivision 1 is required for day training and habilitation services or supervised living facilities including ICFs/MR. Examples of changes in license terms include, but are not limited to: a **change** in license capacity; a **change** in address of service site; and a **change** in ages of persons served.

A license is **not** transferable to another individual, corporation, partnership, voluntary association, other organization, controlling individual or site.

F. NEGATIVE LICENSING ACTIONS

Through the Interagency Licensing Agreement, the county recommends fines and negative licensing actions to the Department of Human Services Commissioner for violations of the MN Region 10 Quality Assurance Standards or other licensing requirements.

A negative licensing action includes: denial of a license application; revocation of a license; suspension or immediate suspension of an existing license; and placement of an existing license on conditional status. Failure to comply with the MN Region 10 Quality Assurance Standards or the terms of licensure is grounds for a negative licensing action. If the county recommends a negative licensing action, the county will notify the Department of Human Services and the Department of Human Services will determine if the standards in the MN Region 10 Quality Assurance Standards or the terms of licensure have been violated. If the grounds are sufficient, the commissioner will follow the procedures in Minnesota Statutes, sections 245A.07 and 245A.08, and will notify the applicant or license holder by certified mail, unless personal service is required. The notice of a negative licensing action must inform the applicant or license holder of the right to appeal the decision. If appealed, the applicant or license holder shall have an opportunity for a hearing under Minnesota Statutes, sections 14.57 to 14.62.

G. RETURN OF LICENSE TO COMMISSIONER

When a license holder stops providing services, or if a license is revoked, suspended, or immediately suspended, the license holder must return the license to the commissioner. The license holder cannot surrender its license as a way of avoiding a negative licensing action.

III. RENEWAL OF LICENSE

A. RELICENSING PROCESS

The Quality Assurance Review Council (QARC) will make licensing recommendations to the County based on the licensing process described in items B through H of this section with one exception. When the adult foster care license holder does not support one or more persons receiving the MR/RC waiver, the QARC will conduct VOICE reviews based on items B and G only.

The county adult foster care licensor will continue to make recommendations to DHS for all adult foster care licenses to DHS. As determined by the county, the adult foster care licensor may consider VOICE review information when conducting a licensing review and recommending licensure to DHS. *(The Region 10 QA Standards will replace Rule 203 for adult foster care sites when 1) at least one person served at the site receives supportive living services (SLS) under the mental retardation or related conditions (MR/RC) home and community-based waiver, and/or 2) when an adult foster care site serves two or more persons with mental retardation or related conditions and no person is receiving SLS from the MR/RC waiver. For licensed sites described in #2, individuals with MR/RC residing at the site may or may not be selected during random samplings for VOICE reviews.)*

Prior to licensure, the Quality Assurance Manager will request written information from the license holder regarding the number and names of persons supported, indicating if the provider is implementing controlled procedures and if the license holder is responsible for monitoring psychotropic medications. License holders are required to respond to the QA Manager's request within the time line outlined in the request for information.

Please Note: For a full description of the **VOICE** (Value Of Individual Choices and Experiences) review process, please see the supporting MN Region 10 Quality Assurance System Documents and the **VOICE** workbook.

B. INDIVIDUAL QUALITY ASSURANCE REVIEWS

1. The QA Manager will randomly select the name of an individual receiving services in the county.
2. The QA Manager will make initial contact with either the person, legal representative or case manager to notify them that they have been selected to participate in the QA review process and to gather initial information.
3. The QA Manager will send out the preliminary paperwork to the support circle.
4. The QA Manager will review the initial information and match up a team of two (or three) QA Team members to conduct the review.
5. The QA Teams will conduct the QA review, completing the review process within 30 days from the preliminary meeting to the feedback meeting. The completed paperwork from the QA review will be returned to the QA Manager within seven days of the final feedback meeting.
6. If the provider gets a finding of an I (Improvement Needed) or a C (Concern), that provider is responsible to respond with an action plan to the QA Manager within 30 days (for a C) or 60 days (for an I).

7. The QA manager will review the action plan(s). If there is a need for further clarification, the QA Manager may request additional information from the license holder before a composite report is sent to the QA Review Council.
8. The QA Manager will keep separate files for each program license and for each person receiving support who participated in the QA review process.

C. PAPER REVIEW OF PROTECTIONS

1. The QA Manager will send a paper review team to do a review of compliance with the Vulnerable Adults Act, Rule 40 and Psychotropic Medications. This review may happen anytime but must be done within 24 months of the last paper review. They may also be asked to do a Physical Environment Checklist.
2. The paper review team will return the paperwork to the QA Manager within seven days of the paper review for final signature and mailing. The QA Manager will mail any correction order to the provider within 30 days of the site visit.
3. If the provider receives a paper review correction order, the provider will be given specific instructions on what is expected for a response. If a written response is requested, it must be sent to the QA Manager by the date specified.

D. LICENSING PREPARATION

1. A program license is ready to be reviewed by the QA Review Council when 5% or a minimum of 3 persons have had a VOICE review and a paper review has been completed.
2. The QA Manager is then responsible to compile the paperwork into a composite report. The composite report will include:
 - a. A cover sheet
 - b. A summary of provider findings
 - c. The individual workbooks (from the QA Teams' reviews)
 - d. Any paper review correction order
 - e. The action plans (if any), and
 - f. The provider's response to the paper review correction order.
3. The entire packet is mailed to the provider. The provider has 15 days in which to send a written response to the QA Manager.
4. The QA Manager attaches any response from the licensed provider to the composite report before mailing it to the QA Review Council for review.

E. QUALITY ASSURANCE REVIEW COUNCIL

1. The QA Review Council will review the composite reports.
 - a. If a provider receives findings of E's (Exceptional) and R's (Reasonable) in all individual reviews, no correction orders resulting from the paper review and no other issues or concerns, the QA Review Council's recommendation will be for renewal of the license.
 - b. If a provider receives findings of I's (Improvement Needed) or C's (Concern) the QA Review Council will carefully review the findings and the action plans developed by the quality circle in response to those findings. They are assessed for appropriateness and thoroughness. If plans are satisfactory, the QA Review Council will recommend approval for licensing renewal.

- c. If the QA Review Council finds that sufficient information to make a determination is lacking, the QA Review Council will ask the QA Manager to gather any additional information needed. Examples can include the need for increased detail on an action plan, conducting additional paper review research on a specific issue, assigning a QA Team to meet with the participant reviewed or, in rare situations, scheduling an entirely new QA review. It is the provider's responsibility to respond to the QA Review Council's request for additional information and the QA Review Council's responsibility to make sure the follow up actions are satisfactory prior to making a licensing recommendation.
 - d. Corrective action for each violation or required action plan is required by Minnesota Statutes, section 245A.06 and will be hereby ordered by the Commissioner of Human Services. Failure to correct the violations within the prescribed amount of time may result in fines and/or action against the license holder as provided for in Minnesota Statutes, sections 245A.06 and 245A.07.
2. When the QA Review Council has reached its determination regarding a provider's licensing status, it completes a licensing recommendation report. In the report the QA Review Council documents:
 - a. Areas of strength: the positive practices noted by the QA Teams, particularly E findings, and items noted on all reports.
 - b. Areas of improvement: the areas QA Teams noted as I findings, as well as items that the QA Review Council noted across all reports.
 3. The licensing recommendation report is signed by a QA Review Council representative and is given to the county in which the license holder is based.

F. COMPLETION OF LICENSING RECOMMENDATION BY THE COUNTY

1. Upon receiving the QA Review Council's licensing recommendation report, the county director or supervisor will make the final decision whether or not to approve the recommendation(s). If the county agrees with the QA Review Council's licensing recommendation, the county will sign the recommendation noting any comments or conditions. If the county chooses to disagree with the recommendations, the county director or supervisor will attach a letter of explanation to the licensing recommendation report.
2. The recommendation will be mailed to the QA Manager.
3. The QA Manager will then mail the license recommendation to both the provider and the provider's governing board (if applicable). The provider will then have 10 days in which to:
 - a. Accept the report as written
 - b. Request clarification regarding the licensing recommendation, from either the QA Review Council or the county, or
 - c. Initiate the appeal process if the license holder disagrees with the recommendation.
4. After 10 days the QA Manager will mail the licensing recommendation report to the Department of Human Services unless 2b or 2c listed above have been initiated.
5. The Department of Human Services will continue to issue license renewals, to collect licensing fees and to mail the license to the provider.

G. QUALITY ASSURANCE SYSTEM AND VOICE APPEAL PROCESS

The purpose of the appeal process is to resolve complaints between the quality assurance teams, counties, providers, and consumers, families, and their legal representatives.

In the event that a license holder wishes to appeal a Quality Assurance VOICE system issue, the QA Review Council will assist in the resolution of the appeal. The appeal process to be used in the resolution of issues is as follows:

1. Participants, providers and others involved in the process may express concerns by forwarding them in writing to the QA Manager. The QA Review Council is committed to an open discussion of issues and will attempt to resolve them. The QA Review Council does reserve the right to make licensing recommendations to the county on unresolved items. The letter of appeal should include:
 - a. The reason for the appeal
 - b. Evidence to support the appeal
 - c. Names of people who would have more information
 - d. A request for time before the QA Review Council (optional).
2. The QA Review Council will inform the provider in writing of its decision within 45 days of an appeal.
3. A provider may request a meeting with the county if it wishes to appeal the QA Review Council's decision on the appeal. The provider shall notify the QA Manager of its intent to appeal within 10 working days of being notified of a QA Review Council decision. The county will notify the provider of its decision within 45 days of this appeal.

H. LICENSING RECOMMENDATION APPEAL PROCESS

In the event that a license holder wishes to appeal a licensing recommendation, the license holder shall notify the QA Manager in writing. The QA Manager will bring the appeal to the county supervisor or director. The license holder may also request a meeting with the county representative(s).

1. The written appeal should include the following:
 - a. The reason for the appeal
 - b. Evidence to support the appeal, and
 - c. Names of people who would have more information
2. The county will inform the provider in writing of its decision within 45 days of an appeal.

I. DHS APPEAL PROCESS

The license holder may appeal the Commissioner's decision on licensure or any negative licensing actions taken in accordance with Minnesota Statutes, sections 245A.05 to 245A.07.

IV. COUNTY TRAINING RESPONSIBILITIES FOR ADULT FOSTER CARE PROVIDERS WHO RESIDE IN THE RESIDENCE

The county shall implement an annual adult foster care home recruitment plan specifying a method and timetable for recruiting license holders to meet the county's adult foster care needs as specified by the county board in the Community Social Services Plan. The county shall ensure that the license holder and direct support individuals comply with the orientation and training requirements that are outlined below. The County Quality Assurance Manager, in coordination with the Adult Foster Care Licensing Representatives, will conduct training on the Minnesota Region 10 Quality Assurance Standards. Orientation and training will be available within the county or within 50 miles of the adult foster home at times convenient to foster home license holders.

Orientation

The county shall provide a minimum of three hours of orientation to a foster home license holder who resides in the residence and direct support individuals prior to the placement of the first person following initial licensure. Orientation and Training is required for each person to be listed on the Foster Care License. The license holder is responsible for completing orientation for other direct support individuals working at the site. Orientation must include training on requirements of the Vulnerable Adults Act contained in the Minnesota Statutes and a review of MN Region 10 Quality Assurance Standards. Orientation must be completed prior to a license being issued. Even after completing the required training, the county cannot guarantee placement.