

245D-HCBS Community Residential Setting (CRS) Licensing Checklist

License Holder's Name: _____ CRS 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. Capacity						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. There are no more than four persons 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). 	245A.11, Subd. 2a (a-f)					
2. If there is a dual license for the program (CRS/CFC or CRS/FCC) a variance has been granted.	245A.16, Subd. 1 (1)					

III. Cooperation/Reporting/Records

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.	245A.04, Subd. 5					
2. The local agency is notified within 24 hours before changes in a residence that will happen from construction, remodeling, or damages requiring repairs that require a building permit or may affect a licensing requirement.	245D.23, Subd. 2					
3. The facility permanently maintains reports of health, fire, and safety inspections of the physical plant that may occur.	245D.21, Subd. 2 (c)					

IV. Physical Environment

Requirement	Rule/Statute	C	NC	V	NA	Comments
1. The facility was inspected by a fire marshal or their delegate within 12 months before they were first licensed.	245D.21, Subd. 2 (b)(1)					
2. The facility was inspected according to the capacity as stated on the initial application.	245D.21, Subd. 2 (b)(3)					
3. If the licensed capacity was increased, a fire marshal inspection was completed to verify there were no hazards, and a written report was provided.	245D.21, Subd. 2 (b)(4)					
4. At relicensing - the DHS home safety checklist was completed before the license was renewed.	245D.21, Subd. 2 (b)(2)					
5. 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.	245D.21, Subd. 2 (b)(5)					

IV. Physical Environment (continued)

Requirement	Rule/Statute	C	NC	V	NA	Comments
6. The living area of the home has enough furnishings for daily living and social activities. The dining area has furniture that allows for meals to be shared by all persons living in the home. The furnishings are in good repair and meet the daily needs of the persons living in the home.	245D.24, Subd. 2					
7. If two persons receiving services share a bedroom they have agreed, in writing, to share the bedroom with each other. No more than two people receiving services may share one bedroom.	245D.24, Subd. 3(a)					
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.*	245D.24, Subd. 3(b)					*Effective August 1, 2015, variance requests for this requirement may be approved by the county licensor.
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.	245D.24, Subd. 3(b)					
10. The only items stored in their bedroom are the personal possessions and items of the person receiving services.	245D.24, Subd. 3(c)					
11. Unless it was documented by an assessment that there is a safety concern for the person, each person must be provided with the following furnishings:* <ul style="list-style-type: none"> • a separate bed of proper size and height, with a clean mattress in good repair; • clean bedding appropriate for the season for each person; • an individual cabinet or dresser, shelves, and a closet, for storage of personal possessions and clothing; • a mirror for grooming. 	245D.24, Subd. 3(d)					*A variance is not required in this area. The LH must maintain documentation of the assessment that identifies the safety concern if any of these items are not provided.

IV. Physical Environment (continued)

Requirement	Rule/Statute	C	NC	V	NA	Comments
<p>12. When possible, persons served by the program are 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.</p> <p>A person may choose not to have the required cabinet or dresser, shelves, or a mirror in the bedroom. A person may choose to use a mattress other than an innerspring mattress and may choose not to have the mattress on a frame or support. It is documented if a person chooses not to have these.</p>	<p>245D.24, Subd. 3(e)</p>					
<p>13. Persons served by the program are allowed to bring personal possessions into their bedroom and other assigned storage space, if available, in the home. The person is allowed to add to their possessions if the home is able to accommodate them, unless doing so would interfere with the person's physical or mental health, safety or another person's use of the bedroom, or would violate a building or fire code. Locked storage of personal items is allowed. If there are restrictions the LH complies with section 245D.04, subdivision 3, paragraph (c).</p>	<p>245D.24, Subd. 3(f)</p>					
<p>14. A person must be allowed to lock the person's bedroom door. The license holder must document and assess the physical plant and the environment, and the population served, and identify the risk factors that require using locked doors, and the specific action taken to minimize the safety risk to a person receiving services at the site.</p>	<p>245D.24, Subd. 3 (g)</p>					

V. 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.	245D.25, Subd. 1					
2. The water temperature of faucets is 120 degrees Fahrenheit or less.	245D.25, Subd. 1					
3. 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.	245D.25, Subd. 2					
4. Food is obtained, handled, and properly stored to prevent contamination, spoilage, or a threat to the health of a person.	245D.25, Subd. 3					

VI. Pets						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. Pets and service animals housed within the home are immunized and maintained in good health as required by local ordinances and state law.	245D.26, Subd. 3					
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.						

VII. Sanitation, Health & Safety						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. The inside and outside of all buildings, structures, or enclosures used by the program, including walls, floors, ceilings, registers, fixtures, equipment, and furnishings are maintained in good repair and in a sanitary and safe condition.	245D.22, Subd. 1					
2. The home is clean and does not have accumulations of dirt, grease, garbage, peeling paint, mold, vermin, and insects.	245D.22, Subd. 1					

VII. Sanitation, Health & Safety (continued)

Requirement	Rule/Statute	C	NC	V	NA	Comments
3. The LH must correct building and equipment deterioration, safety hazards, and unsanitary conditions.	245D.22, Subd. 1					
4. Chemicals, detergents, and other hazardous or toxic substances are not stored with food products or in any way that is a hazard to persons receiving services.	245D.22, Subd. 2(a)					
5. If the licensing agency determines that handrails or nonslip surfaces on inside or outside runways, stairways, and ramps are needed, the LH is responsible for making sure that they are installed according to the applicable building code.	245D.22, Subd. 2(b)					
6. If there are elevators in the home, they are inspected each year. The date of the inspection, any repairs needed, and the date the necessary repairs were made is documented.	245D.22, Subd. 2(c) & 245D.21, Subd. 2 (c)					
7. Stairways, ramps, and passage ways are free of obstructions.	245D.22, Subd. 2(d)					
8. Outside property is free of debris and safety hazards. Outdoor stairs and walkways are kept free of ice and snow.	245D.22, Subd. 2(e)					
9. Heating, ventilation, air conditioning units, other hot surfaces and moving parts of machinery are shielded or enclosed.	245D.22, Subd. 2(f)					
10. Use of dangerous items or equipment by persons served by the program must be allowed according to the person's individual plan if included in the plan. If this information is not included in the individual plan it must be addressed in the program abuse prevention plan.*	245D.22, Subd. 2(g)					*Address the use of dangerous items and equipment in the assessment of the environment in the PAPP.

VII. Sanitation, Health & Safety (continued)

Requirement	Rule/Statute	C	NC	V	NA	Comments
11. Schedule II controlled substances are: <ul style="list-style-type: none"> • stored in a locked storage area that is only accessible to persons and staff that are authorized to administer the medication. • disposed of according to the Environmental Protection Agency recommendations. 	245D.22, Subd. 3					http://water.epa.gov/scitech/swguidance/ppcp/upload/ppcpflyer.pdf
12. The following items are provided by the LH and available for each person: <ul style="list-style-type: none"> • individual clean bed linens appropriate for the season and comfort of the person • individual towels and wash cloths • common household items for meal preparation • cleaning supplies • window coverings for privacy • toilet paper • hand soap • other household items that are communally used by all persons receiving services 	245D.26, Subd. 1					
13. Personal health and hygiene items are stored in a safe and sanitary manner.	245D.26, Subd. 2					
14. The LH complies with the requirements of the Minnesota Clean Indoor Air Act when smoking is permitted in the home.	245D.26, Subd. 4					http://www.health.state.mn.us/divs/eh/indoorair/mciaa/ftb/docs/residentialhealth.pdf
15. Weapons* and ammunition are stored separately in locked areas that are not accessible to a person receiving services. * "Weapons" include firearms and other instruments or devices designed for and capable of producing bodily harm.	245D.26, Subd. 5					

VIII. Emergencies

Minnesota Statutes, section 245D.02 DEFINITIONS.

Subd. 8. **Emergency.** "Emergency" means any event that affects the ordinary daily operation of the program including, but not limited to, fires, severe weather, natural disasters, power failures, or other events that threaten the immediate health and safety of a person receiving services and that require calling 911, emergency evacuation, moving to an emergency shelter, or temporary closure or relocation of the program to another facility or service site for more than 24 hours.

Requirement	Rule/Statute	C	NC	V	NA	Comments
<p>1. The home has a first aid kit readily available for use by persons receiving services and staff. At a minimum, the first aid kit includes the following:</p> <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. 	245D.22, Subd. 4					
<p>2. There is a written plan for responding to emergencies (emergency response plan). An emergency is an event that affects the ordinary daily operation of the program including but not limited to the following:</p> <ul style="list-style-type: none"> • fires • severe weather • natural disaster • power failure • other events that threaten the immediate health and safety of a person receiving services and requires calling 911; emergency evacuation; moving to an emergency shelter; temporary closure or relocation to another site for more than 24 hours 	245D.22, Subd. 5 (a)					<p>There is a sample plan provided by 245D - Home and Community Based Services titled "Emergency Response, Reporting and Review Policy"</p> <p>Here is the link to the page that includes the form: http://www.dhs.state.mn.us/main/groups/licensing/documents/pub/dhs16_180212.pdf</p>

VIII. Emergencies (continued)

Requirement	Rule/Statute	C	NC	V	NA	Comments
The emergency response plan must include items A-H below:						
(A) procedures for emergency evacuation and emergency sheltering, including: <ul style="list-style-type: none"> • how to report a fire or other emergency • procedures to notify, relocate, and evacuate people, including the use of adaptive procedures or equipment to assist with the safe evacuation of persons with physical or sensory disabilities • instructions on closing off the fire area, using fire extinguishers, and activating and responding to alarm systems. 						
(B) a floor plan that identifies: <ul style="list-style-type: none"> • the location of fire extinguishers • the location of audible or visual alarm systems, including but not limited to manual fire alarm boxes, smoke detectors, control panels, and sprinkler systems • the location of exits, primary and secondary evacuation routes and accessible egress routes, if any • the location of emergency shelter within the home. 						
(C) a site plan that identifies where everyone must meet outside the home if it is necessary to evacuate the home.						
(D) the responsibilities of each staff person in case of emergency.						
(E) procedures for conducting quarterly emergency drills.						
(F) procedures for relocation when services are interrupted for more than 24 hours.						
(G) if a community residential setting has three or more dwelling units, the floor plan identifies the location of enclosed exit stairs.						
(H) an emergency escape plan* for each person.						*The plan may be posted or readily available to staff and persons served by the program

VIII. Emergencies (continued)

Requirement	Rule/Statute	C	NC	V	NA	Comments
The LH must do the following:	245D.22, Subd. 5 (b)					
(A) maintain a log of quarterly fire drills.						
(B) have the emergency response plan readily available to staff and persons receiving services.						
(C) inform each person of the area inside the home where to go for emergency shelter during severe weather and where to meet outside the home if it is necessary to evacuate the home.						
(D) keep updated emergency contact information for persons receiving services readily available in case of an emergency.						
3. The home has a working flashlight and a working portable radio or television set that does not require electricity and can be used if a power failure occurs.	245D.22, Subd. 6					
4. The home has a working non-coin operated telephone that is readily available to persons served by the program.	245D.22, Subd. 7					
5. A list of emergency numbers is posted or available in an easily seen location. When an area has a 911 number or a mental health crisis intervention team number, both numbers must be posted and/or available and the emergency number listed must be 911. In areas of the state that do not have a 911 number, the numbers listed must include the local fire department, police department, emergency transportation, and poison control center.	245D.22, Subd. 7					
6. The names and telephone numbers of each person's legal representative (if applicable), physician, and dentist are readily available.	245D.22, Subd. 7					

IX. Protection						
Requirement	Rule/Statute	C	NC	V	NA	Comments
1. 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.	626.557, Subd. 14 & 245A.65, Subd. 2					*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.
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 						*If there is a potential that any person served by the program requires that the refrigerator, or cupboard doors need to be locked, the PAPP should include a general plan for this in the area for specialized programs of care to describe what the plan is for all persons served by the program.
(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 						

IX. Protection (continued)

Requirement	Rule/Statute	C	NC	V	NA	Comments
(D) The plan is reviewed at least annually by the LH using the assessment factors above and any substantiated maltreatment findings that occurred since the last review and has been revised if needed.						
2. A copy of the program abuse prevention plan is posted or available in an easily seen location in the home. Mandated reporters, persons receiving services, and the person's legal representatives may request a copy of the policies and procedures.						

X. 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, 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)					

**XI. Remote Overnight Supervision (ROS)
Only for CRS homes that use ROS**

Requirement	Rule/Statute	C	NC	V	NA	Comments
1. The use of ROS is identified in the PAPP.	245A.65, Subd. 2					
2. The license holder conducted physical response drills when there was not a physical presence response completed for a three-month period. The effectiveness of the response protocol was reviewed and documented.	245D.261, Subd. 4 (c)					

Notes:
(concerns, recommendations, follow-up needed)

Licensor's Name: _____

Date: _____