# DEPARTMENT OF HEALTH

# **Assisted Living License Post-Closure Plan**

#### **PROVIDER CHECKLIST**

## **Requirements After Approval of a Planned Closure**

This checklist will help prepare you for actions you must take *after* the Commissioner of Health approves your closure plan pursuant to <u>Minn. Stat. 144G.57</u> (www.revisor.mn.gov/statutes/cite/144G.57) and <u>Minn. Rule</u> <u>4659.0130</u> (www.revisor.mn.gov/rules/4659.0130/).

This checklist is meant to be a useful resource to help you complete the **resident relocation evaluation and resident relocation plan**, and to meet other requirements after the approval of the closure plan. This checklist does **not** need to be submitted to MDH.

## **Resident Relocation Evaluation**

A resident relocation evaluation and resident relocation plan are required under <u>Minn. Rule 4659.0130</u> Subp. <u>5-6 (www.revisor.mn.gov/rules/4659.0130/)</u>.

After notice of closure is approved by the Commissioner of Health and you provide notice of closure to residents, you must hold a planning conference and develop a written resident relocation plan with each resident and the resident's representatives, case manager, and other individuals invited by the resident to the planning conference. A written **resident relocation evaluation** must be provided to the resident and the resident's representatives and case manager as soon as practicable but no later than the planning conference.

## Elements of a Written Resident Relocation Evaluation (for each Resident)

- □ The resident's current service plans.
- Identification of at least two safe and appropriate housing providers and, for residents receiving services, appropriate service providers that are in reasonably close geographic proximity to the facility and may be able to accept a resident.
- □ The resident's needs and choices.
- □ The right of the resident to tour the safe location and appropriate service provider, if applicable, prior to relocation.

## **Resident Relocation Plan**

After the planning conference, you must create a **resident relocation plan** for each resident. The relocation plan must incorporate the relocation evaluation. You must implement the resident relocation plan, must comply with the coordinated move requirements under <u>Minn. Stat. 144G.55</u>

(www.revisor.mn.gov/statutes/cite/144G.55), and must provide a copy of the resident relocation plan to the resident and, with the resident's consent, the resident's representatives and case manager (if applicable).

#### Elements of a Resident Relocation Plan (for each Resident)

- □ The date and time that the resident will move.
- □ The contact information of the receiving facility or other location.
- □ How the resident and the resident's personal property, including pets, will be transported to the new housing provider.
- □ How the facility will care for and store the resident's belongings.
- □ Recommendations to assist the resident to adjust to the new living environment.
- □ Recommendations for addressing the stress that a resident with dementia may experience when moving to a new living environment, if applicable.
- Recommendations for ensuring the safe and proper transfer of the resident's medications and durable medical equipment.
- □ Arrangements that have been made for the resident's follow-up care and meals.
- □ A plan for transferring and reconnecting phone, Internet services, and any electronic monitoring equipment.
- □ Who is responsible for paying moving expenses and how the expenses will be paid.

## **Before the Facility Closes**

Before the facility closes, you must implement the closure plan approved by the commissioner and ensure that arrangements for relocation and continued care that meet each resident's social, emotional, and health needs are effectuated. This includes consulting and cooperating with the resident, legal representative, designated representative, case managers, relevant health professionals, and any other persons of the resident's choosing to make arrangements to move the resident, including consideration of the resident's goals.

After residents have moved, you must continue to comply with applicable statutes and regulations. A checklist of some of the key requirements after residents have moved out of the facility are below.

#### Action Steps After Residents Have Left the Facility

- Per Minn. Rule 4659.0130 Subp. 7 (www.revisor.mn.gov/rules/4659.0130/): Within 14 calendar days of all residents having left the facility, you must **notify the commissioner in writing** that you completed the closure and verify to the commissioner that all residents have been safely relocated according to the coordinated move requirements in Minn. Stat. 144G.55 (www.revisor.mn.gov/statutes/cite/144G.55).
  - This notice can be sent to <u>health.assistedliving@state.mn.us</u>
- Per Minn. Rule 4659.0130 Subp. 8 (www.revisor.mn.gov/rules/4659.0130/): With the resident's consent, you must provide the following information in writing to the resident's receiving facility or other service provider:
  - the name and address of the closing facility, the dates of the resident's admission and discharge, and the name and address of a person at the facility to contact for additional information;
  - names and addresses of any significant social or community contacts the resident has identified to the facility;

- the resident's most recent service or care plan, if the resident has received services from the facility; and
- the resident's current "do not resuscitate" order and "physician order for life-sustaining treatment," if any
- □ Per <u>Minn. Rule 4659.0130</u> Subp. 9 (www.revisor.mn.gov/rules/4659.0130/): Within 30 calendar days of the effective date of the facility closure, you must:
  - provide to the resident, resident's legal representative, and resident's designated representative a final statement of account;
  - provide any refunds due;
  - return any money, property, or valuables held in trust or custody by the facility; and
  - as required under Minnesota Statutes, 504B.178, refund the resident's security deposit unless it is applied to the first month's charges.
- Per Minn. Rule 4659.0130 Subp. 10 (www.revisor.mn.gov/rules/4659.0130/): At the time of discharge, you must provide the resident, and, with the resident's consent, the resident's representatives, and case manager, with a written discharge summary that includes:
  - a summary of the resident's stay that includes diagnoses, courses of illnesses, allergies, treatments and therapies, and pertinent lab, radiology, and consultation results;
  - a final summary of the resident's status from the latest assessment or review under Minnesota Statutes, section 144G.70, if applicable, that includes the resident status, including baseline and current mental, behavioral, and functional status;
  - a reconciliation of all predischarge medications with the resident's post discharge prescribed and over-the-counter medications; and
  - a post discharge plan that is developed with the resident and, with the resident's consent, the
    resident's representatives, which will help the resident adjust to a new living environment. The post
    discharge plan must indicate where the resident plans to reside, any arrangements that have been
    made for the resident's follow-up care, and any post discharge medical and nonmedical services the
    resident will need.
- □ You must keep resident records for at least five years following closure of an assisted living license per Minn. Stat. 144G.43 Subd. 5 (www.revisor.mn.gov/statutes/cite/144G.43).
- □ If there are fines assessed against the licensee, the licensee is still responsible for paying the fines per Minn. Stat. 144G.31 Subd. 6 (www.revisor.mn.gov/statutes/cite/144G.31).
- □ Employee records must be retained for three years after closure of the license per <u>Minn. Stat. 144G.42</u> <u>Subd. 8 (www.revisor.mn.gov/statutes/cite/144G.42)</u>.

# **Questions May be Directed to:**

Minnesota Department of Health at <u>health.assistedliving@state.mn.us.</u>

## Residents May be Directed to Ombudsman's Offices for Advocacy:

## Office of Ombudsman for Long-Term Care (OOLTC)

Residents may contact the Ombudsman for Long-Term Care for questions about their rights as an assisted living resident and to request advocacy services.

- Phone Number 651-431-2555 or Toll Free 1-800-657-3591
- MN Office of Ombudsman for Long-Term Care (https://mn.gov/ooltc/)

#### Office of Ombudsman for Mental Health and Developmental Disabilities (OMHDD)

Assisted living residents may contact the Office of Mental Health and Developmental Disabilities to request advocacy regarding their rights, concerns, or questions on issues relating to services for mental health, developmental disabilities, or chemical dependency.

- Phone Number 651-757-1800 or Toll Free 1-800-657-3506
- OMHDD (https://mn.gov/omhdd/)

Assisted Living Licensure Health Regulation Division P.O. Box 3879 St. Paul, MN 55101-3879 651-539-3049 or 844-926-1061 www.health.state.mn.us/facilities/regulation/assistedliving/

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To obtain this information in a different format, call: 651-201-4101