**Policy and Program Information Requirments**

**Program Name: click here to insert program name**

1. **Policy**

It is the policy of the DHS licensed provider (center) to have available for review and distriubte to paricipants and their caregivers upon admission written information about the the points in items A to N according to the requirements in Minnesota Rules, part [9555.9640](https://www.revisor.mn.gov/rules/?id=9555.9640), items A through N. The information in items A to N must be provided in writing to the commissioner upon request and must be available for inspection by the commissioner at the center.

1. **Scope of the programs, services, and care offered by the center**

**click here to insert information about the scope of the programs, services, and care offered**

1. **Description of the population to be served by the center**

**click here to insert a description of the population to be served by the center**

1. **Description of individual conditions which the center is not prepared to accept**

**click here to insert a description of individual conditions which the center is not prepared to accept**

1. **Participant’s rights developed in accordance with part** [**9555.9670**](https://www.revisor.mn.gov/rules/?id=9555.9670)
	1. the right to participate in developing one's own plan of care;
	2. the right to refuse care or participation;
	3. the right to physical privacy during care or treatment;
	4. the right to confidentiality of participant records; and
	5. the right to present grievances regarding treatment or care in accordance with part [9555.9640](https://www.revisor.mn.gov/rules/?id=9555.9640), item D.
	6. Procedure for presenting grievances:
		1. A participant or a participant’s caregiver may submit an oral or written complaint to:

Minnesota Department of Human Services

Licensing Division

PO Box 64242

Saint Paul, Minnsota 55164-0242

(651) 431-6500

1. A copy or written summary of [Minnesota Statutes, section 626.557](https://www.revisor.mn.gov/statutes/cite/626.557), the Vulnerable Adults Act
2. **Policy on and arrangements for providing transportation**

**click here to insert the center’s policy on and arrangements for providing transportation**

1. **Policy on providing meals and snacks**

**click here to insert the center’s policy on providing meals and snacks**

1. **Fees, billing arrangements, and plans for payment**

**click here to insert the center’s fees, billing arragements, and plans for payment**

1. **Policy governing the presence of pets in the center**

**click here to insert the center’s policy governing the presence of pets in the center**

1. **Policy on smoking in the center**

**click here to insert the center’s policy on smoking in the center**

1. **Types of insurance carried by the center**

**click here to insert the types of insurance carried by the center**

1. **Statement of the center’s compliance with** [**Minnesota Statutes, section 626.557**](https://www.revisor.mn.gov/statutes/cite/626.557)**, and rules adopted under that section**

**click here to insert a statement of the center’s compliance with Minnesota Statutes, section 626.557, and rules adopted under that section**

1. **Statement that center admission and cmployment practices and policies comply with** [**Minnesota Statutes, chapter 363**](https://www.revisor.mn.gov/statutes/cite/363)**, the Minnesota Human Rights Act**

**click here to insert a statement that center admission and cmployment practices and policies comply with Minnesota Statutes, chapter 363, the Minnesota Human Rights Act**

1. **Terms and conditions of the center’s licensure by the department, including a description of the population the center is licensed to serve under** [**part 9555.9730**](https://www.revisor.mn.gov/rules/?id=9555.9730)

**click here to insert the terms and conditions of the center’s licensure by the department**

**click here to insert a description of the population the center is licensed to serve under part 955.9730**

1. **Telephone number of the department’s licensing division**

Minnesota Department of Human Services

Licensing Division

(651) 431-6500

**Policy reviewed and authorized by: click here to enter name and title**

**Date of last policy review: click here to enter date of last policy review**

**Date of last policy revision: click here to enter date of last policy revision**

**Legal Authority:** Minnesota Rules, part 9555.9640, items A to N