

Otter Tail County Human Services

Adult Foster Care Handbook

ABOUT THIS HANDBOOK

The following handbook is intended to assist you and provide some general information/clarification for adult foster care providers.

Being an adult foster care provider can have many rewards. It can also be a difficult and demanding job. You have an adult in you home for which you are now responsible.

As a foster care provider, you have an adult placed in you home that has a definite personality, and habits, which may be very different than your own. Remember that change comes slowly. Also, respecting the differences of each individual will help you through the trying times. Another thing to remember is that this whole process of fostering needs to be regarded as a team approach. There are many people involved in this relationship. Our common goal should be to all work together to help better the life of a particular adult. Adult foster care is one of the most effective alternatives selected when alternative living arrangements for adults (age 18 and over), who are in need of supervision, assistance, protection or personal care, in addition to room and board, is needed.

Hopefully, this handbook will help you through the rewards and challenges of caring for the adults entrusted to you.

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I. WHAT IS ADULT FOSTER CARE?

Adult foster care is a community-based alternative living arrangement for adults 18 years of age and over who are in need of varied levels of supervision, assistance, protection or personal care in addition to room and board.

The Adult Foster Care Program is intended to assist adults who are unable to live independently. In general, adult foster care enables such adults to obtain or maintain the highest possible degree of individual achievement and functioning, consistent with the following goals:

1. Achieving or maintaining economic self-support to prevent, reduce or eliminate dependency.
2. Achieving or maintaining self-sufficiency, including reduction or prevention of dependency.
3. Preventing or remedying neglect, abuse, or exploitation of adults unable to protect their own interest.
4. Preventing or reducing institutional care by providing for community-based care, home-based care or other forms of less intensive care.

Ideally, adult foster care should be temporary, provided only until such time as a resident is able to achieve full independence in functioning. In practice, however, such care will be long-term, allowing the individual to maintain an optimum degree of independence and dignity although in a supervised setting. In some cases, foster care will be a permanent arrangement.

Foster care for adults is a part of the continuity of care ranging from institutional care to independent living. Further, adult foster care itself represents a continuum ranging from simple substitute family care to a therapeutic environment which is provided within the adult foster home. However, most foster homes provide the more basic level of care, and facilitate or support the more specialized therapeutic programs provided elsewhere in the community as an integrated part of the living experience.

Adult foster care differs from the care given in such settings as group homes, nursing homes or hospitals. It is a form of substitute family care for those who do not have a support system, such as family members who can provide on-going care. It is mainly social care rather than medically based care involving the joint team effort of the responsible agencies, the adult foster home and the resident.

Adult foster care is coordinated by your county human services agency and is:

1. Individualized in care planning to meet the needs of a specific disabled person by assessing:
 - a. Types of difficulties existing.
 - b. Degree of independence possible.
 - c. Potential for personal growth.
 - d. Kinds of activities and programs appropriate.
 - e. Reasons for requiring care.

All services must be individually planned to meet the unique needs of each individual. This should be done with all the dignity and respect possible.

2. An environment that adheres to the philosophy of making it possible for people to live in the "least restrictive" environment consistent with safety and well-being.
3. Care which recognizes the strengths possessed by all people. When working with residents, it is critical that care be viewed positively. Too often helping professionals focus their attention on the problematic characteristics of the population they are serving. In adult foster care, there must be constant recognition of the strengths and potential of all residents.

WHO ARE ADULT FOSTER CARE RESIDENTS?

People requiring adult foster care are unable to live independently for varied reasons. The resident may have a developmental disability, mental illness, physical disability, be elderly, chemically dependent, or a combination of these. At some point a decision is made that the individual's needs and growth potential can best be addressed by living in an adult foster care setting and that the type of problems presented by the resident do not require on-going skilled nursing care or active hospital-based therapy.

It is important to understand that adult foster care should never limit or control one's ability to grow, learn, and gain independence, but should constantly serve to positively influence such potential. It is just as critically important for one to recognize that residents have skills, abilities and strengths when they enter an adult foster care home and that they have all of the rights and responsibilities that all adults have.

II. LICENSING:

There are acts of legislation, along with the Department of Human Services, that govern the following:

1. The licensing of adult foster care homes.
2. The placement of an adult in a foster home.
3. Payment rates and informational exchanges.
4. Mandated services for residents.

These services involve specific adult foster care rules (Rule 203) that govern case plan development and reviews for each adult in foster care placement. Rule 203 defines requirements and services of adult foster care. Minnesota Statutes Vulnerable Adult Act 629.557 mandates the reporting of the maltreatment of vulnerable adults. Minnesota Statutes 629.557 mandates the following:

1. Reporting of suspected physical abuse, verbal abuse, sexual abuse, exploitation and neglect of vulnerable adults.
2. Investigation of such reports.
3. Providing protection and counseling services in appropriate cases.

FOSTER CARE LICENSING:

The Minnesota licensing standard for adult foster care homes in the state of Minnesota is the Department of Human Services Rule 203 and MN Statute 245A. Agency policy and procedures assist in compliance with Rule and Statute. All foster homes should have a copy of Rule 203. A copy is available through the licensing worker or the supervising agency.

STEPS OF LICENSING:

1. Initial contact - usually by phone or appointment. Attend Orientation Session provided by Otter Tail County Human Services.
2. First appointment - orientation visit to applicant's home, tour of home, answer questions.
3. Second & Third home visits - Review of forms completed, complete additional forms, program plans, review home study, etc.
4. Fire inspection.
5. Possible building &/or health authority inspection.
6. Physician Report for all household members.
7. Applicant Background Study (ABS) for all household members 13 years and over and for any substitute caregivers. The check is for criminal history as well as substantiated reports of maltreatment of minors or vulnerable adults.
8. Well water testing if needed.
9. Complete a home study.
10. Complete application forms.
11. Complete Adult Foster Home Program.
12. Complete Facility Abuse Prevention Plan.
13. Complete Emergency Escape Plan.

14. 3 references.
15. Complete Home Safety Checklist.
16. Vet records for pets.
17. Alcohol/Drug Use Policy
18. Resident Grievance Policy
19. VA Maltreatment Reporting Policy
20. Group Residential Housing Agreement

DATA PRIVACY:

Legislation has made special provisions for privacy. During the course of licensing, the social worker will ask many questions. It is always your right to be informed of the intent and purpose of data collection. A specific procedure, data privacy rights, assures you accuracy of content as well as generally requiring your written consent to release information. There is respect, concern, and consideration for you personal privacy. Any information regarding specifics on your family is considered private data. General information considered available includes the name of the home that is licensed, the address, license capacity.

CONFIDENTIALITY:

As an Adult Foster Care Provider, any information available to you about the resident and their family is confidential. The sharing of confidential information brings responsibilities to both social workers and the foster care providers. The purpose of the social worker and the foster care provider is to work as a team. This professional sharing of information is an integral part of this relationship. Remember to ask questions if you have concerns.

A few things to remember:

1. If you have children of your own, make sure you discuss with them the need for confidentiality. It is extremely important to share with other children and extended family members why certain information can not be shared with others outside the home.
2. Any private or confidential information pertaining to the resident or their family can not be released unless there is a release of information signed by the person involved or their legal representative. This includes professionals who are involved (Doctors, psychologists, and counselors).

III. RELICENSING:

The initial license is issued for one year. After that the duration of the license is for two years.

There is also an opportunity for the provider to evaluate the program and the workers. During this time future placements are discussed.

During the relicensing visit, a relicensing questionnaire/evaluation is completed. This reviews the past licensing period, looks at future placements, and allows evaluation and comments by the foster care providers. Training requirements are discussed. A home inspection is completed, along with a home safety checklist. A new application and applicant background studies are completed.

The application is then submitted to the Department of Human Services which issues the license and makes any necessary changes to it prior to issuing a new license, as recommended by the county licensing agency.

IV. TRAINING:

Training is one of the requirements needed for relicensure. Rule 203 gives the specifics and outlines in detail the training requirements.

Requirements:

Caregivers with zero to five years of licensure or experience as an adult foster home caregiver, must complete 12 hours of training per year.

Caregivers with six or more years of licensure or experience as an adult foster home caregiver must complete 6 hours of training per year.

Exceptions:

Caregivers providing not more than 30 cumulative days of foster care in a 12 month period and caregivers providing foster care eight hours or less per week are exempt for the training requirement.

In order to assist foster care providers in meeting the training requirement, OTCHS provides for some training that is free of charge. Notification of these trainings are sent out to providers. Foster care providers are encouraged to seek out other appropriate training opportunities. School districts and community education offer training that may be appropriate. Other resources include: the Minnesota Foster Care Association, educational videos, reading materials, internet research, etc. If you are unsure if information that you are researching would count as training, contact your licensing social worker and inquire.

V. STEPS IN PLACEMENT OF A RESIDENT IN ADULT FOSTER CARE:

1. **Assessment:** Completed by a social worker to determine a potential resident's needs for adult foster care.
2. **Mobility Access Assessment:** To determine a potential resident's needs for mobility and access within the home.

3. Placement Standards: A person shall be appropriate for adult foster care if the person:
 - A. Is an adult.
 - B. Is functionally impaired.
 - C. Has requested (or legal representation) foster care placement.
 - D. Has demonstrated need for adult foster care based on assessment.
 - E. Does not require continuous medical care or treatment in a facility licensed for acute care.
 - F. If the adult has mental retardation (developmental disability) or a related condition.

4. Need to do for resident & legal representation:
 - A. Provide consumer choice of adult foster care homes.
 - B. Matching of resident & adult foster care home.
 - C. Pre-placement visit.

5. Develop Individual Resident Placement Agreement (IRPA):
 - A. This agreement must be signed within 30 days of placement.
 - B. Must coordinate with the resident's Individual Service Plan.
 - C. Must be signed by resident, provider, and resident's legal representative, if there is one.

6. Placement review with Individual Service Plan:
 - A. Case manager will visit with the resident & provider within 30 days of placement to confirm the appropriateness of placement.
 - B. Case manager will consult with the provider in regard to meeting the resident's assessed needs.
 - C. Case manager will assist with developing the Individual Abuse Prevention Plan.

When an adult is placed in an adult foster home, information and a plan about the adult will be given to the adult foster care provider. General information should include:

1. Identifying information.
2. Resident's legal status - do they have a guardian or conservator?
3. Reason for placement.
4. Medical information & current medical needs, if any.
5. General information on the resident's family, including the address & phone number.
6. Any behavior problems anticipated.
7. Phone number of social worker and financial worker, if applicable.
8. Payment rate and Difficulty of Care rate assigned, if it is needed.

EMERGENCIES:

In the event of an emergency, you will need to contact the case manager of the resident in your home. When a case manager assists in the placement of the resident, they will inform you of how to contact them, or the agency, in an emergency.

Regarding medical emergency concerns:

Any resident that is under public guardianship needs to have authorization given by the case manager, Adult Services Unit Supervisor, or the agency Director for any medical emergency or procedure requiring informed consent.

If the resident's family is guardian, they will need to provide the authorization for any treatment.

If the resident is their own guardian, they can provide their own authorization.

TERMINATION OF PLACEMENT:

The adult foster care provider always has the right to decide if they want an adult to be removed from their home. If the situation is not an emergency, the agency requests that you allow time for the case manager to make other residential arrangements for the adult. In general, we expect that a 30 day notice of termination would be a reasonable time for all parties involved and it is the timeline used in the Adult Foster Care Rule.

VI. CHANGES THAT NEED TO BE REPORTED TO THE AGENCY:

1. Change of address (the license and checks from the state will not forward in the mail).
2. Telephone numbers. Unlisted numbers or changes in employment phone numbers.
3. Changes in employment for license holders.
4. A change in family composition, such as the birth of a child or a grandparent coming to live with the family.
5. Illness or accident that requires special treatment or hospitalization.
6. Family emergencies.
7. Vacation/absences. If you plan to take a resident with on a vacation, this needs to be prior approved. If you are taking a resident out of state, it requires written consent of the agency and/or legal guardian.

The first four items listed should be reported directly to the AFC licenser. The other items could be addressed with either the licenser or the case manager.

VII. VULNERABLE ADULTS:

All residents in adult foster care are considered vulnerable adults. Please refer to the attached information on the Vulnerable Adult Act and mandated reporting. As a licensed adult foster care provider, you are a mandated reporter.

How to report your concerns:

Contact the Common Entry Point in Otter Tail County at 218-998-8166 and report the following:

- What happened
- Where it happened
- To whom it happened
- When it happened
- Who was responsible for the suspected maltreatment.

VIII. RULE VIOLATIONS AND VULNERABLE ADULT REPORTS:

If a report of concern is received by OTCHS, it will need to be assessed to determine whether or not it constitutes a rule violation or a vulnerable adult report.

Rule Violations:

Any report of concern that is received regarding a rule violation must be investigated. The AFC Licenser conducts this investigation. If it is determined that a rule violation has occurred, the most likely result would be a correction order. A correction order is issued when any rule violation occurs, there is no imminent danger to the persons served by the program, the violation is not serious or chronic and it will be corrected within a reasonable time period. If the rule violation were deemed to be serious or chronic, a negative action could be considered.

Negative actions include:

- A. conditional license
- B. suspension/conditional
- C. suspension
- D. indefinite suspension
- E. revocation
- F. immediate suspension
- G. denial of a license

The criteria used in determining a negative action are:

- A. Consider the nature, severity, and chronicity of the violation(s).
- B. Does the issue involve a disqualification factor that is not or cannot be set aside or a variance granted?
- C. Does the issue involve the license holder or a household member?

Vulnerable Adult Reports:

When a report is received as a vulnerable adult report that involves an AFC license holder, the information received is forwarded to the MN Dept. of Human Services. That agency determines whether or not to investigate the report. If they do not investigate, it is returned to the county licenser for review and can be treated as a rule violation. If it is accepted as a VA report and assigned a DHS investigator will complete an investigation and

make a determination. Once completed, that finding determines the impact on the foster care license. Any of the previously mentioned negative actions could be taken depending on the severity of the report.

Any person, who in good faith, exercising due care in making a report, shall have immunity from any liability, civil or criminal. Any person required to report suspected physical or sexual abuse, exploitation or neglect, who willfully fails to do so, shall be guilty of a misdemeanor.

IX. REPORTING TO THE OMBUDSMAN:

Reports of any death and serious injury should be reported by the licensed facility within 24 hours.

To report this information you should contact the appropriate office.

Office of Ombudsman for Mental Health and Mental Retardation can be contacted at 651-296-3848 or 1-800-657-3506 or a voice message 24 hours a day at 612-689-7244.

There is not this same requirement for reporting for seniors. However, if you have a need to talk with the Ombudsman's office the Office of Ombudsman for Older Minnesotans can be contacted at 651-296-0382 or 1-800-657-3591.

An Ombudsman is an official who is designated to assist a client to overcome the delay, injustice or impersonal delivery of service. A resident in your home, or their family or legal representative, may choose to call the Ombudsman's office with:

- a concern or complaint about services
- a question about rights
- a grievance
- access to appropriate services
- an idea for making services better
- a general question or need for information concerning services.

X. METHOD OF PAYMENT:

Adult foster care services can be paid for from several different sources. Some of these are Supplemental Security Income (SSI), Group Residential Housing Assistance (GRH), Retired Survivor Disability Income (RSDI), Veterans Benefits (VA), General Assistance (GA), Private Funds, etc.

Residents in adult foster care, in most cases, will pay for at least a portion of their care from their funds. These funds may be some of the sources listed above.

There is a basic Room and Board rate for adult foster care. This rate is adjusted annually on the first of July. This reimbursement is for providing room and board, basic supervision and protection, basic transportation, basic personal care assistance, housekeeping assistance, etc. For individuals in need of more than the basic expectations in adult foster care, there is assessment and supplement. This is used to provide a higher rate of reimbursement for dealing with behaviors or problems that are above the basic adult foster care expectations. If you feel a resident in your home has behaviors or problems that

should be evaluated for difficulty of care, consult with the case manager of the resident and discuss what you are seeing with the resident placed in your home.

XI. PAYMENT PROCEDURES:

Once an adult is placed in your home as a resident, the case manager notifies the financial worker involved to set up the payment for you as an adult foster care provider for that resident. The case manager will talk with you about how payment works.

1. **TRANSPORTATION ALLOWANCE:** Transportation for medical needs can be reimbursed through the MA program if the adult is on MA. However, this **MUST** be prior approved and can be authorized and arranged by contacting the case manager or financial worker.
It is possible to utilize a volunteer driver for certain situations. Contact the case manager to see if a situation that you may have is appropriate.
2. **PERSONAL NEEDS & CLOTHING ALLOWANCE:** All foster adults are allowed a monthly personal needs and clothing allowance. The allowance is given to the adult. If they need assistance in money management, a plan (developed with the case manager and legal representative, if there is one) will be in place.
3. **DIFFICULTY OF CARE:** Difficulty of care payments are determined by the case manager on an individual basis. This is based on the needs, behaviors and problems of the resident.

XII. LIABILITY INSURANCE:

The Department of Human Services provides liability insurance coverage to all licensed adult foster care providers. For more information contact:

MN Joint Underwriters Association
Pioneer Post Office Box 1760
St. Paul, MN 55101

Contact: Beth Devine (1-800-552-0013) for policy information and questions.

DHS pays the policy premiums - all licensed providers are provided this insurance for liability coverage and no sign up is necessary. You are covered by this liability insurance as long as you have a valid adult foster care license.

XIII: FOSTER CARE PROVIDER GRIEVANCE PROCEDURE

The Foster Care Provider Grievance Procedure is established to resolve areas of disagreement between foster care providers and agency personnel. The agency is responsible for grievances which involve foster care provider disagreements with agency policy, procedure or practice.

Administrative Procedure:

If a foster care provider files a written grievance requesting resolution of a disagreement between themselves and the agency, a formal grievance procedure has begun. The written request must include a statement of the issues or concerns and the relief sought by the foster care provider. The request for a grievance meeting must be sent directly to the Director of Human Services or designee. The agency must, upon request, provide assistance to the foster care provider in filing the grievance.

Level one Grievance:

Within ten days of receipt of the written request, the agency must convene a meeting to address the grievance.

Persons in attendance at the meeting may include, the foster care provider, the placing social worker and/or licensing social worker, and a social worker supervisor(s). Other interested persons, such as, a foster care provider support person, a service provider, or the clients guardian may attend if the agency determines this is appropriate. The presence of other interested persons must be approved by the agency to ensure protection of data practices. At least one supervisor, who has the authority to influence the implementation of agency policy, procedure and practice, must be present.

At the conclusion of this meeting, one of the following may occur:

1. If the grievance is resolved to the foster care provider's satisfaction, the resolution must be documented and signed by the foster care provider and the agency representative. A written decision must be finalized within twenty (20) days.
2. If the grievance is not resolved to the foster care provider's satisfaction, the foster care provider is expected to end the grievance process.

Human Services Licensing Act
Background Study Act

As a Licensed Adult Foster Care Provider, in addition to the Adult Foster Care Rule (Rule 203), you are responsible to be familiar with and are regulated by the Human Services Licensing Act and the Background Study Act. These two acts are in Minnesota Statute. The Human Services Licensing Act is 245A and the Background Study Act is 245C.

These statutes can be found on the internet at:

www.revisor.leg.state.mn.us

Once you have opened the website, click on the Statutes, Laws, Rules tab.

When the page is opened you can select Retrieve an Entire Chapter and in the box type in 245A or 245C to be able to review these statutes.