

Minnesota Attorney General: Administrative Rules Proceedings

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STATE OF MINNESOTA

DEPARTMENT Public Welfare

Office Memorandum

TO : Michael Miller
Special Assistant Attorney General
Department of Administration

DATE: January 27,1977

FROM : John Daniels
Special Assistant Attorney General
Department of Public Welfare

JHD

SUBJECT:
DPW Rule 185

Enclosed are the hearing documents,proposed Rule 185, and adopted Rule 185 for your approval.

Not included with this submittal are a voluminous amount of other materials which were submitted into the record in support of the adoption of Rule 185. If you wish to review these materials, please let me know and I will make them available to you.

JHD:RJH:sw

294

John H. Daniels
Special Assistant
Attorney General

February 28, 1977

-Department of Public Welfare Rule 185
Community Mental Health Board and County Welfare or Human Services
Board Responsibilities to Individuals who are Mentally Retarded

ADOPTED

MINNESOTA RULE DPW [redacted] - Community Mental Health Bo[redacted] and County Welfare or Human Service Board Responsibilities to Individuals Who Are Mentally Retarded

A. Introduction

1. This rule governs the planning and provision of services to all individuals who are or may be mentally retarded. In addition, provisions of M.S. 252A.01 to M.S. 252A.21, Mental Retardation Protection Act, are applicable to those mentally retarded persons under guardianship or conservatorship of the Commissioner. All financial resources available to agencies affected by this rule for the mentally retarded shall be expended in accordance with this rule. This rule shall not be construed as requiring expenditures of money that is not available for mental retardation services.

a. Community mental health board: Local area board or human service board which receives grant-in-aid from the state agency to plan for and facilitate programs in mental retardation and assure delivery of services.

b. Day facility: Placement less than 24 hours per day outside the home which provides training in self-care, remedial, developmental, or social skills.

c. Local social service agency: Local agency under the authority of the county welfare board or human service board which is responsible for social services and income maintenance.

d. Mentally retarded person: A mentally retarded person refers to any person who has been diagnosed as having significantly subaverage intellectual functioning existing concurrently with demonstrated deficits in adaptive behavior and manifested during the developmental period.

(1) Intellectual functioning shall be assessed by one or more of the professionally recognized standardized tests developed for that purpose; significantly subaverage refers to performance which is approximately two or more standard deviations from the mean or average of the tests.

(2) Adaptive behavior shall be determined through the use of published scales, or by a combination of pertinent test data, professional observations, and the utilization of all available sources of information regarding the person's behavior which indicates the effectiveness or degree with which the individual meets the standards of personal independence and social responsibilities expected of his/her age and peer cultural group.

e. Residential facility: Out of family home setting providing training in self-care, remedial, developmental or social skills.

f. State agency: Minnesota Department of Public Welfare.

g. Individual service plan: An analysis by the local social service agency for services needed by the client, including identification of the type of residential placement and the general type of program required by the client to meet the assessed needs within a specified period of time.

h. Individual program plan: A detailed plan of the service provider setting both short-term and long-term goals with detailed methods for achieving movement toward the individual service plan of the local social service agency (Rule 34 standards and ICF/MR regulations govern this in specific detail).

B. Standards for Provision of Services

1. Services to individuals who are mentally retarded shall be based on the following standards:

a. To pr[redacted]e the person who is mentally [redacted]arded with a normal existence. If this is not possible, to provide the mentally retarded person with the alternative which is least restrictive. This includes making available to him/her patterns and conditions of everyday life that are as close as possible to the norms and patterns of the mainstream of society.

b. To provide the person who is mentally retarded with an individual service plan which is designed to acquire new and progressively difficult skills. Such plan must take into consideration the presentation of learning and developmental experiences appropriate to his/her adaptive behavior levels, physical condition and degenerative status.

The individual service plan for the mentally retarded person must be based on a comprehensive assessment of needs and annual evaluations to determine appropriateness and effectiveness of the individual service plan.

c. To implement the client's service plan, plans shall be made in a manner which least restricts his/her personal freedom and also carries out the goals and objectives for the individual. This shall mean:

(1) Providing assistance to enable him/her to live in his/her home.

(2) Providing a community-based residential facility with appropriate services when the mentally retarded person must leave his/her home for a specified purpose and period of time.

(3) Providing placement in a state hospital when the mentally retarded person cannot be served at home or in the community for a specified purpose and period of time.

C. Responsibilities of the Local Social Service Agency

1. Diagnosis of mental retardation.

a. The local service agency has the primary responsibility for ensuring prompt diagnosis of mental retardation, utilizing professionally qualified staff, and professional information and assistance from other sources, to secure diagnostic information.

b. The local social service agency shall make determination regarding the finding of mental retardation in the individual client, based upon interdisciplinary procedures identified in other sections of this rule. Such determination may be appealed to the Commissioner of Public Welfare.

c. The following information is required for diagnosis of mental retardation:

(1) Diagnosis of intellectual functioning by one or more of the standardized tests developed for that purpose (and administered by a psychologist who is qualified in the diagnosis and treatment of mental retardation).

(2) Diagnosis of adaptive behavior on the basis of a combination of pertinent test data which measure aspects of behavior, professional observation, and utilization of all available sources of information regarding the person's everyday behavior.

(3) Medical examination prepared under the direction of a licensed physician and which directs attention to sight, hearing, seizure problems, etc.

(4) Report by a social worker experienced in working with mentally retarded persons on client's social history and adjustment.

d. Diagnostic review shall be made when significant changes in behavior or functional levels occur and at intervals not exceeding two year's duration. Exception can be made in the case of adults who have been in a service plan for a period of ten or more years and the original diagnosis has been twice confirmed. In such cases, diagnostic review can be accomplished at intervals not exceeding four year's duration.

2. Assessment of client needs and development of individual service plan.

a. The local social service agency shall assist any person needing help who is or may be mentally retarded by assessing that person's needs and subsequently planning to meet those needs with the cooperation and involvement of the client, parents, relatives or guardian.

b. The following information, when appropriate, in addition to the diagnosis, is required in order to determine the individual service plan:

(1) Family history.

(2) Medical, prenatal, and birth history.

(3) Early development history.

(4) School reports indicating behavior and functional levels.

(5) Psychiatric evaluation, if indicated by the other reports.

(6) Vocational evaluation reports.

(7) Observations and interviews about family and the environment.

c. The local social service agency shall, in cooperation with the client and parents and/or guardian, develop an individual service plan which shall include:

(1) The Minnesota Developmental Programming System, or other instrument of comparable validity and reliability, shall be used to provide a standardized behavioral assessment prior to development of an individual service plan.

(2) Services to be provided shall be specifically individualized to meet the client's needs. Daytime activity center services, when determined appropriate in the individual service plan, shall be provided for preschool children who are mentally retarded, or in the process of diagnosis, and adults, if such services can be obtained within reasonable travel distance.

(3) Provision for implementation of the individual service plan and arrangement for appropriate services.

(4) Provision for ensuring the delivery of services as provided in the individual service plan.

(5) Evaluation, with the assistance of qualified individuals, of the client's progress as described in the client's individual service plan.

(6) Payment for services when the individual, or parent of a child under 18 years of age, is unable or not required to pay.

3. The individual service plan shall be designed to provide services to the client in his/her home and to strengthen family relationships, capabilities and responsibilities when placement in a day or residential facility is necessary. Such placement shall be made by the social service agency in order to carry out the individual service plan.

a. When placement in a day or residential facility is necessary, the local social service agency shall be responsible for planning with the client, his/her family or representative, the residential or day facility resources, and the public school, if the client is of school age.

(1) Arrangements for placement in a day or residential facility or state hospital shall be made by the local social service agency. When in the facility, the person continues to be the client of the local social service agency.

(2) Acceptance by the facility or state hospital shall be based on the goals and objectives of the individual service plan of the local social service agency, as agreed upon with the client, parent, and/or guardian, and as indicated by subsequent assessment and review. Acceptance shall constitute agreement that the facility or state hospital can carry out the goals and objectives of the individual service plan within a specified period of time.

(3) When a mentally retarded person is accepted in a day or residential facility, the facility staff shall be responsible, within 30 days of admission, for the development of an individual program plan based on the individual service plan of the local social service agency. The local social service agency shall participate in the development of the facility's individual program plan.

(4) Placement of mentally retarded persons, or persons in the process of diagnosis, is restricted to residential facilities licensed under DPW Rule 34 and other applicable rules or their successor. Exception can be made (1) in the case of certification of need for hospitalization or need for a skilled nursing facility for skilled nursing care on a 24-hour-per-day basis, or (2) when the individual service plan calls for placement in a licensed or certified foster home for four or fewer residents.

(5) When the local social service agency places a client in a residential facility located outside of that county, formal arrangements, noted in the individual service plan, must be made with the host county social service agency to carry out certain services. Primary responsibility, however, remains with the agency of legal responsibility.

(6) Counseling shall be provided or arranged by the local social service agency to the individual, his parents or guardian as needed. The agency may request assistance of the community mental health director.

(7) Appeal may be made to the Commissioner of the state agency.

D. Responsibilities of the Community Mental Health Board or Human Service Board

1. The community mental health board or human service board shall ensure opportunity for the involvement of local social service agencies, local developmental disabilities councils, state institutions and other service providers and advocacy organizations in the planning and coordination of service delivery.

2. The board shall employ a Qualified Mental Retardation Professional Person to coordinate service delivery in the area and develop a service delivery plan for the area served on a biennial basis.

a. The board shall take the lead in the planning and development of services not available through service providers, public and private agencies, educational and judicial agencies.

b. The board shall identify the service categories available in and outside of the geographical area for its mental retardation population, including those provided by private individuals or agencies, local public agencies and state institutions.

c. The board shall identify, in priority of need order, services that are not available to its mental retardation population.

d. The board shall provide or arrange for service categories needed, as specified in the service delivery plan, within the means provided in grants-in-aid by the state agency.

e. Copies of the plan shall be submitted to the state agency in approved format on or before July 1 of the year preceding the biennial legislative session for purposes of budget planning and legislative proposals. Copies of the plan shall be made available to agencies involved in related planning activities.

3. The board shall provide psychological and psychiatric diagnostic evaluation, client abd parental counseling and assistance in care planning for persons who are or may be mentally retarded, as requested by the client or the local social service agencies in the area served by the board.

4. The board shall submit a letter of recommendation to the Commissioner concerning the need, location and program for facilities and services applying for license under M.S. 252.28.

E. Service Categories

1. The following service categories, in alphabetical order, shall constitute the range of direct and indirect services needed for a service delivery system in an identified geographical area of the State of Minnesota for its mentally retarded population. These service categories shall be identified and availability arranged to assure delivery as needed.

a. Activity programs for adults: Activities which emphasize occupational and social goals which assist adults to become as self-dependent as possible and to make constructive use of leisure time. They are comprehensive and coordinated sets of activities providing personal care and other services to adult mentally retarded persons in or out of their own homes during a portion of the 24-hour day. Services may include a variety of creative, social, physical and learning activities based upon an appropriate assessment of need.

b. Assessment services: The systematic determination of pertinent physical, psychological, vocational, educational, cultural, social, economic, legal, environmental and other factors of the mentally retarded person and his/her family; to determine the extent to which the disability limits can be expected to limit the person's daily living and work activity; to determine how and to what extent the disabling conditions may be expected to be minimized by services; to determine the nature and scope of services to be provided; to select service objectives which are commensurate with an individual service plan of action. It is to be followed at whatever intervals are needed by periodic reassessment; services are to be provided whenever necessary in the life of the individual. Assessment services are directed toward the effects of the disability and toward maximizing life functions in the face of remaining conditions.

c. Basic developmental services: Activities emphasizing maturation and supplementing the services provided by parents or parent surrogates. They are comprehensive and coordinated sets of developmental learning activities conducted in or outside the home during a portion of the day. These services include a variety of creative, social, physical, and learning activities selected in accordance with an appropriate assessment. The focus is upon the developmental schedule itself (individual program plan) and upon the acquisition of skills in self-care. This service should continue on a sustaining basis for those who would otherwise suffer loss of functional level.

d. Case management (service management): An expert person who provides coordination of all the case activities on behalf of the client of the local social service agency. The case manager is help responsible for mobilizing the resources needed, including especially those not provided directly by his/her own agency. It is a persuasive, rather than an administrative role. Case management is provided by a professionally qualified

individual (typically not a volunteer) who has a limited but assigned number of clients.

e. Client information and referral service: Public information about services and procedures in obtaining them. This service may provide referral activity directly or may inform an inquirer. This client information and referral service may be on a face-to-face basis or may be available by telephone.

f. Community services: Mentally retarded people are ordinarily expected to make use of the same community services that are used by people who are not retarded. These services are not detailed because they are not specialized on behalf of the mentally retarded population.

g. Counseling: A face-to-face relationship with the mentally retarded individual and/or parent, siblings or other relatives in order to help the individual understand and accept his/her capabilities and limitations and to carry through on a program of adjustment and self-improvement. This requires knowledge of human behavior and the use of special interviewing skills to achieve specified goals mutually accepted by counselor and client (or parent/guardian). Counseling is an episodic activity carried out when the need arises. Its focus is upon the solution of specific problems.

h. Diagnostic services: Coordinated services including, but not limited to, psychological services, social services, medical and other services necessary to identify the presence of a disability, its causes and its complications. Diagnosis is a current assessment of the client's condition and shall be a guiding factor in the development of the individual service plan. Diagnostic review is to be made whenever necessary in the life of the mentally retarded person, according to C.1.d. of this rule.

i. Domiciliary (residential) care: Out of home living quarters, supervision and personal care to persons needing such care and services. Domiciliary care services differ from special living arrangements by its higher degree of supervision and the greater amount of personal care needed, as compared to (s.) - Special living arrangements.

j. Family support services: Those services which enable the family as a unit to meet the family-related needs of the mentally retarded person. Family support services may include any of the other defined services. It is distinguished in that it is given to the family in their homes.

k. Follow along: A monitoring relationship by the local social service agency on a life-long basis with retarded persons and their families, if needed. It is to assure that changes in need, progression to new levels of adaptive competence, and the problems arising from crises are recognized and appropriately met.

l. Job placement services: The process of securing employment. Competitive employment is employment offered under ordinary conditions and in competition with ordinary employees. Job placement services needed by mentally retarded persons are generally those of securing and adjusting to a job, with no implication that this is limited to a single time or period in the life of the person.

m. Professional information and referral service: An up-to-date and complete listing of all appropriate resources which can be made available and accessible to professional persons serving mentally retarded persons and their families so that they can be referred to the most appropriate and readily available resources. This kind of information and referral service is ordinarily not used by the client.

n. Protective services: Social, legal and other appropriate services which assist individuals who are unable to manage their own affairs or to protect themselves from neglect, exploitation or hazardous situations without assistance from others and to help them exercise their rights as citizens. Protective services may be an adjunct to parental responsibility, or they may be exercised in the absence of the responsible parent. Protective services should be selective in scope and should be limited to those aspects of life function in which a need is demonstrated. (See M.S. 252A.01 - .21, MR Protection Act.)

o. Recreation services: Planned and supervised leisure-time activities designed to help meet specific individual needs in self-expression, social interaction, athletic endeavors and entertainment; to develop skills and interests leading to enjoyable and constructive use of leisure time; and to improve his/her well-being. The service may include assistance to the individual in his/her use and access of normal community recreation activities.

p. Service delivery system coordination: Responsibility within a given community for the provision of the full-range of services. This is a planning and resource-mobilizing function, rather than a direct service to clients. It is concerned with the structure and the availability of services, rather than with the solution of personal problems. It must be provided in connection with a multiservice area of authority. Information and referral services shall be provided in conjunction with service coordination, and the two are typically interrelated.

q. Sheltered employment: A structured service providing partial self-support through the employment of the retarded worker under conditions which allow for low production rate, need for special work supervision,

inability to handle a full range of job duties, or need for special job engineering and adaptive equipment.

r. Special education: A structured learning experience, based upon appropriate assessment and through the use of a broad curriculum of practical academic subjects primarily designed to develop the ability to learn and to acquire useful knowledge and basic skills in its earliest stages. In its later stages, it grades all the way through the equivalent of a secondary education and appropriately interacts with the occupational service system, such as work adjustment. Special education is legally required of the public school district acting either as direct provider or as purchaser of the service.

s. Special living arrangements: Living arrangements for persons who need some degree of supervision, Special living arrangements should provide at least counseling and leisure-time activities, in addition to living arrangements. The service is for disabled persons who can leave their place of residence for work, recreation or other reasons.

t. Treatment services: Interventions which halt, control or reverse those processes which cause, aggravate or complicate disability. Interventions may include treatment, such as surgical procedures, dietary controls, cosmetic therapy, chemotherapy, speech therapy or physical therapy, directed toward basic personal goals, dentistry, and medical treatments as indicated by the needs of the individual being served. Specialized medical and dental care are included.

u. Training services: Planned and systematic sequence of instruction in formal and informal activities, based upon appropriate assessment and designed to develop skills in performing activities of daily living, including self-help,

motor skills, and communications; to enhance emotional, personal, and social development; to provide experiences conducive to the acquisition of positive self-concepts and desire to learn; and to provide experiences basic to future productive activity. Emphasis is upon those skills needed to function as a member of the community. This service is not restricted to any particular age and can be offered at any appropriate time in the life of the individual who is mentally retarded.

v. Vocational evaluation: Assessment of worker characteristics through the use of real or simulated work tasks. The purpose is to assess occupational strengths and weaknesses and potential for vocational development. It also includes prevocational evaluation and work evaluation. This requires the use of a rehabilitation facility or similar controlled experimental setting.

x. Volunteer services: Volunteer activities by individuals, service organizations and advocacy groups provide a variety of services on a group or one-to-one basis that supplements and augments services provided to mentally retarded persons. This may also include participation in advisory committees, advocacy activities and other forms of personal support to individuals. Such services are not to supplant staff services, and are ordinarily provided by unpaid persons and groups.

y. Work activity: It is for those whose productivity is such that they cannot meet the demands of sheltered employment. For people who need a work setting as part of their program in order to foster a sense of self-worth through work while earning a below minimum wage, it legally enables a wage to be paid. Work activity, in addition, includes a variety of creative, social, physical and learning activities. Work activities may be provided only in facilities having a Federal Wage and Hour certificate for this purpose. It

differs from activi[redacted] programs for adults in that t[redacted]e is a significant productive element; it differs from sheltered employment in that it allows a wage of up up to one-fourth the standard minimum.

z. Work adjustment: Learning activities typically involving real or simulated work tasks and situations. It is intended to assist a person to develop basic skills, attitudes, motivation, and work habits of the kind needed in competitive employment, sheltered employment or work activity. It develops social skills needed to function in a work environment. Its focus is upon basic employability, rather than upon the skills of a specific occupation.

CR/hhj

APPROVED AS TO FORM AND LEGALITY
FEB 24 1977 19
WARREN SPANNAUS, ATTORNEY GENERAL
BY /s/ Michael B. Miller
SPECIAL ASSISTANT ATTORNEY GENERAL

STATE OF MINNESOTA
DEPARTMENT OF STATE
FILED
FEB 24 1977 - 3:45 pm
Joan Anderson Growe
Secretary of State

PROPOSED

MINNESOTA RULE DPW 185 - Community Mental Health Board and County Welfare or Human Service Board Responsibilities to Individuals Who Are Mentally Retarded.

RECEIVED
OCT 1 1976
OFFICE OF HEARING EXAMINERS

A. Introduction

1. This rule governs the planning and provision of services to all individuals who are or may be mentally retarded. In addition, provision of M.S. 252A.01 to M.S. 252A.21, Mental Retardation Protection Act, are applicable to those mentally retarded persons under guardianship or conservatorship of the Commissioner.

2. Definitions:

a. Community Mental Health Board: Local area board or Human Service Board which receives grant-in-aid from the state agency, to plan for and facilitate programs in mental retardation and assure delivery of services.

b. Day facility: Placement less than 24-hours per day outside the home for purposes of acquiring self-care, remedial, developmental, or social skills.

c. Local social service agency: Local agency under the authority of the county welfare board or human service board which is responsible for social services and income maintenance.

d. Mental retardation: A mentally retarded person refers to any person who has been diagnosed as having significantly subaverage intellectual functioning existing concurrently with demonstrated deficits in adaptive behavior such as to require supervision and protection for his/her welfare or the public welfare.

(1) Intellectual functioning shall be assessed by one or more of the professionally recognized standardized tests developed for that purpose; significantly subaverage refers to performance which is approximately two or more standard deviations from the mean or average of the tests. Mental retardation under this rule includes manifestation during the developmental period (to 18 years of age), and brain injuries occurring in adult life.

(2) Adaptive behavior shall be determined through the use of published scales, or by a combination of pertinent test data, professional observations, and the utilization of all available sources of information regarding the person's behavior which indicates the effectiveness or degree with which the individual meets the standards of personal independence and social responsibilities expected of his/her age and peer cultural group.

e. Residential facility: Out of family home setting for purposes of acquiring self-care, remedial, developmental or social skills.

f. State agency: Minnesota Department of Public Welfare.

g. Individual Service Plan: An analysis by the local social service agency, for services needed by the client, including identification of the

type of residential placement, and the general type of program required by the client to meet the assessed needs within a specified period of time.

h. Individual Program Plan: A detailed plan of the service provider setting forth both short-term and long-term goals with detailed methods for achieving movement toward the individual service plan of the local social service agency. (Rule 34 standards and ICF/MR regulations govern this in specific detail.)

B. Standards for Provision of Services

1. Services to individuals who are mentally retarded shall be based on the following standards:

a. To provide the person who is mentally retarded with an existence as close to normal as possible. This includes making available to him/her patterns and conditions of everyday life that are as close as possible to the norms and patterns of the mainstream of society.

b. To provide the person who is mentally retarded with an individual service plan which is designed to acquire new and progressively difficult skills. Such plan must take into consideration the presentation of learning and developmental experiences appropriate to his/her adaptive behavior levels, physical condition and degenerative status.

The individual service plan for the mentally retarded person must be based on a comprehensive assessment of needs, and periodic evaluation to determine appropriateness and effectiveness of the individual service plan.

c. To implement the client's service plan, plans shall be made in a manner which least restricts his/her personal freedom, but also carries out the goals and objectives for the individual. This shall mean:

(1) Providing assistance to enable him/her to live in his/her home.

(2) Providing a community-based residential facility with appropriate services when the mentally retarded person must leave his/her home for a specified purpose and period of time.

(3) Providing placement in a state hospital when the mentally retarded person cannot be served at home or in the community for a specified purpose and period of time.

C. Responsibilities of the Local Social Service Agency

1. Diagnosis of mental retardation.

a. The local social service agency shall coordinate the diagnostic process, utilizing professionally qualified staff, and professional information and assistance from other sources, to secure diagnostic information.

b. The local social service agency shall make determination regarding the finding of mental retardation in the individual client, based upon interdisciplinary procedures identified in other sections of this rule. Such determination may be appealed to the commissioner of public welfare.

c. The following information is required for diagnosis of mental retardation:

(1) Diagnosis of intellectual functioning by one or more of the standardized tests developed for that purpose (and administered by a psychologist who is qualified in the diagnosis and treatment of mental retardation). [In parenthesis, from MR Protection Act.]

(2) Diagnosis of adaptive behavior on basis of a combination of pertinent test data which measure aspects of behavior, professional observation, and utilization of all available sources of information regarding the person's everyday behavior.

(3) Medical examination prepared under the direction of a licensed physician and which directs attention to sight, hearing, seizure problems, etc.

(4) Report by a social worker experienced in working with mentally retarded persons on client's social history and adjustment.

d. Diagnostic review shall be made when significant changes in behavior or functional levels occur, and at intervals not exceeding three years duration. Exception can be made in the case of adults who have been in a service plan for a period of ten or more years, and the original diagnosis has been twice confirmed. In such cases, diagnostic review can be accomplished by staff members in consultation, providing one member of the consulting team is a state licensed psychologist.

2. Assessment of client needs and development of individual service plan.

a. The local social service agency shall assist any person needing help who is or may be mentally retarded by assessing that person's needs and subsequently planning to meet those needs in cooperation and involvement of parents, relatives or guardian.

b. The following information, when appropriate, in addition to the diagnosis, is required in order to determine the individual service plan:

(1) Family history.
(2) Medical, prenatal, and birth history.
(3) Early development history.
(4) School reports indicating behavior and functional levels.
(5) Psychiatric evaluation, if indicated by the other reports.
(6) Vocational evaluation reports.
(7) Observations and interviews about family and the environment.

c. The local social service agency shall, in cooperation with the client and parents and/or guardian, develop an individual service plan which shall include:

(1) The Minnesota Developmental Programming System, or other instrument of comparable validity and reliability, shall be used to provide a standardized behavioral assessment prior to development of an individual service plan.

(2) Services to be provided shall be specifically individualized to meet the client's needs. Daytime activity center services, when determined appropriate in the individual service plan, shall be provided for preschool children who are mentally retarded or in the process of diagnosis, and adults, if such services can be obtained within reasonable travel distance.

(3) Provision for implementation of the individual service plan and arrangement for appropriate services.

(4) Provision for ensuring the delivery of services as provided in the individual service plan.

(5) Evaluation, with the assistance of qualified individuals, of the client's progress as described in the client's individual service plan.

(6) Payment for service when the individual, or parents of a child under 18 years of age, is unable or not required to pay.

3. The individual service plan shall be designed to provide services to the client in his/her home, and to strengthen family relationships, capabilities and responsibilities when placement in a day or residential facility is necessary. Such placement shall be made by the social service agency in order to carry out the individual service plan.

a. When placement in a day or residential facility is necessary, the local social service agency shall coordinate planning with the client, his/her family or representative, the residential or day facility resources, and the public school, if the client is a child.

(1) Arrangements for placement in a day or residential facility or state hospital shall be made by the local social service agency. When in the facility, the person continues to be the client of the local social service agency.

(2) Acceptance by the facility or state hospital shall be based on the goals and objectives of the individual service plan of the local social service agency, as agreed upon with the client, parent, and/or guardian. Acceptance shall constitute agreement that the facility or state hospital can carry out the goals and objectives of the individual service plan within a specified period of time.

(3) When a mentally retarded person is accepted in a day or residential facility, the facility staff shall be responsible, within 30 days of admission, for the development of an individual program plan based on the individual service plan of the local social service agency. The facility's individual program plan shall be approved by the local social service agency for implementation by facility staff.

(4) Placement of mentally retarded persons, or persons in the process of diagnosis, is restricted to residential facilities licensed under DPW Rule 34 and other applicable rules or their successor. Exception can be made (1) in the case of certification of need for hospitalization or need for a skilled nursing facility for skilled nursing care on a 24-hour per day basis, or (2) when the individual service plan calls for placement in a licensed foster home for four or fewer residents.

(5) When the local social service agency places a client in a residential facility located outside of that county, formal arrangements noted in the individual service plan must be made with the host county social service agency to carry out certain services. Primary responsibility, however, remains with the agency of legal responsibility.

D. Responsibilities of the Community Mental Health Board or Human Service Board

1. The community mental health board or human service board, shall

ensure participation of local social service agencies, other service providers and advocacy organizations in the planning and coordination of service delivery.

2. The board shall develop a service delivery plan for the area served on a biennial basis.

a. Copies of the plan shall be submitted to the state agency in approved format on or before July 1 of the year preceding the biennial legislative session for purposes of budget planning and legislative proposals.

b. The board shall provide or arrange for services needed, as specified in the service delivery plan, within the means provided in grants-in-aid by the state agency.

c. The board shall identify the service categories available in and outside of the geographical area for its mental retardation population.

d. The board shall identify in priority of need order services that are not available to its mental retardation population.

e. The board shall take the lead in the planning and development of services not available through service providers, public and privat agencies, educational and judicial agencies.

3. The board shall provide psychological and psychiatric diagnostic evaluation, parental counseling and assistance in care planning for persons who are or may be mentally retarded as requested by the local social service agencies in the area served by the board.

4. The board shall submit a letter of recommendation to the commissioner concerning the need, location and program for facilities applying for license under M.S. 252.28.

E. Service Categories

1. The following service categories, in alphabetical order, shall constitute the range of direct and indirect services needed for a service delivery system in an identified geographical area of the State of Minnesota for its mentally retarded population. These service categories shall be identified and availability arranged to assure delivery as needed.

a. Activity programs for adults: Activities which emphasize occupational and social goals which assist adults to become as self-dependent as possible and to make constructive use of leisure time. They are comprehensive and coordinated sets of activities providing personal care and other services to adult mentally retarded persons out of their own homes during a portion of the 24-hour day. Services may include a variety fo creative, social, physical and learning activities based upon an appropriate assessment of need.

b. Assessment services: The systematic determination of pertinent physical, psychological, vocational, educational, cultural, social, economic, legal, environmental and other factors of the mentally retarded person and his/her family; to determine the extent to which the disability limits can be expected to limit the person's daily living and work activity; to determine how and to what extent the disabling conditions may be expected to be minimized by services; to determine the nature and scope of services to be provided; to select service objectives which are commensurate with an individual service plan of action. It is to be followed at whatever intervals are needed by periodic reassessment; services are to be provided whenever necessary in the life of the individual. Assessment services are directed toward the effects of the disability and toward maximizing life functions in the face of remaining conditions.

c. Basic developmental services: Activities emphasizing maturation and supplementing the services provided by parents or parent surrogates. They are comprehensive and coordinated sets of developmental learning activities usually conducted outside the home during a portion of the day. These services include a variety of creative, social, physical, and learning activities selected in accordance with an appropriate assessment. The focus is upon the developmental schedule itself (individual program plan) and upon the acquisition of skills in self-care. This service should continue on a sustaining basis for those who would otherwise suffer loss of functional level.

d. Case management (service management): An expert person who provides coordination of all the case activities on behalf of the client of the local social service agency. The case manager is held responsible for mobilizing the resources needed, including especially those not provided directly by his/her own agency. It is a persuasive, rather than an administrative role. Case management is provided by a professionally qualified individual (typically not a volunteer) who has a limited but assigned number of clients.

e. Client information and referral service: Public information about services and procedures in obtaining them. This service may provide referral activity directly or may inform an inquirer. This client information and referral service may be on a face-to-face basis or may be available by telephone.

f. Community services: Mentally retarded people are ordinarily expected to make use of the same community services that are used by people who are not retarded. These services are not detailed because they are not specialized on behalf of the mentally retarded population.

g. Counseling: A face-to-face relationship with the mentally retarded individual and/or parent, siblings or other relatives in order to help the individual understand and accept his/her capabilities and limitations, and to carry through on a program of adjustment and self-improvement. This requires knowledge of human behavior and the use of special interviewing skills to achieve specified goals mutually accepted by counselor and client (or parent/guardian). Counseling is an episodic activity carried out when the need arises. Its focus is upon the solution of specific problems.

h. Diagnostic services: Coordinated services including, but not limited to, psychological services, social services, medical and other services necessary to identify the presence of a disability, its causes and its complications. Diagnosis is a current assessment of the client's condition and shall be a guiding factor in the development of the individual service plan. Diagnostic review is to be made whenever necessary in the life of the mentally retarded person, according to ~~(III), (A),~~ C. 1. d. ~~(5),~~ of this rule.

i. Domiciliary (residential) care: Out of home living quarters, supervision and personal care to persons needing such care and services. Domiciliary care services differ from special living arrangements by its higher degree of supervision and the greater amount of personal care needed, as compared to ~~(19)~~ S. - Special living arrangements.

j. Family support services: Those services which enable the family as a unit to meet the family-related needs of the mentally retarded person. Family support services may include any of the other defined services. It is distinguished in that it is given to the family in their homes.

k. Follow along: A monitoring relationship by the local social service agency on a life-long basis with retarded persons and their families, if needed. It is to assure that changes in need, progression to new levels of adaptive competence, and the problems arising from crises are recognized and appropriately met.

l. Job placement services: The process of securing employment. Competitive employment is employment offered under ordinary conditions and in competition with ordinary employees. Job placement services needed by mentally retarded persons are generally those of securing and adjusting to a job, with no implication that this is limited to a single time or period in the life of the person.

m. Professional information and referral service: an up-to-date and complete listing of all appropriate resources which can be made available and accessible to professional persons serving mentally retarded persons and their families so that they can be referred to the most appropriate and readily available resources. This kind of information and referral service is ordinarily not used by the client.

n. Protective services: Social, legal and other appropriate services which assist individuals who are unable to manage their own affairs or to protect themselves from neglect, exploitation or hazardous situations without assistance from others and to help them exercise their rights as citizens. Protective services may be an adjunct to parental responsibility, or they may be exercised in the absence of the responsible parent. Protective services should be selective in scope and should be limited to those aspects of life function in which a need is demonstrated. (See M.S. 252A.01 - .21, MR Protection Act.)

o. Recreation services: Planned and supervised activities designed to help meet specific individual needs in self-expression, social interaction, athletic endeavors and entertainment; to develop skills and interests leading to enjoyable and constructive use of leisure time; and to improve his/her well-being. The service may include assistance to the individual in his/her use and access of normal community recreation activities.

p. Service delivery system coordination: Responsibility within a given community for the provision of the full-range of services. This is a planning and resource-mobilizing function rather than a direct service to clients. It is concerned with the structure and the availability of services rather than with the solution of personal problems. It must be provided in connection with a multi-service area of authority. Information and referral services shall be provided in conjunction with service coordination, and the two are typically interrelated.

q. Sheltered employment: A structured service providing partial self-support through the employment of the retarded worker under conditions which allow for low production rate, need for special work supervision, inability to handle a full range of job duties, or need for special job engineering and adaptive equipment. Sheltered employment is usually provided in sheltered workshops although it may be individually certified and secured in an otherwise competitive setting. It is offered under a Federal Wage and Hour certificate and must pay at least one-half the usual minimum wage. An individual may be temporarily certified for one-fourth the minimum wage during a training program. The sheltered workshop certificate may also cover payment of a limited wage during the time a client is in evaluation or training.

r. Special education: A structured learning experience, based upon appropriate assessment and through the use of a broad curriculum of practical academic subjects primarily designed to develop the ability to learn and to acquire useful knowledge and basic skills in its earliest stages. In its later stages, it grades all the way through the equivalent of a secondary education and appropriately interacts with the occupational service system, such as work adjustment. Special education is legally required of the public school district acting either as direct provider or as purchaser of the service.

s. Special living arrangements: Living arrangements for persons who need some degree of supervision. Special living arrangements should provide at least counseling and leisure time activities in addition to living arrangements. The service is for disabled persons who can leave their place of residence for work, recreation or other reasons.

t. Treatment services: Interventions which halt, control or reverse those processes which cause, aggravate or complicate disability. Interventions may include treatment, such as surgical procedures, dietary controls, cosmetic therapy, chemotherapy or physical therapy, directed toward basic personal goals, dentistry, and medical treatments as indicated by the needs of the individual being served. Specialized medical and dental care are included.

u. Training services: Planned and systematic sequence of instruction in formal and informal activities based upon appropriate assessment and designed to develop skills in performing activities of daily living, including self-help, motor skills, and communications; to enhance emotional, personal, and social development: to provide experiences conducive to the acquisition of positive self-concepts and desire to learn; and to provide experiences basic to future productive activity. Emphasis is upon those skills needed to function as a member of the community. This service is not restricted to any particular age and can be offered at any appropriate time in the life of the individual who is mentally retarded.

v. Transportation services: Necessary travel and related costs in connection with transporting retarded persons to and from places in which they receive services. Transportation also includes taking services to the homebound, delivery of raw materials, and finished products from homebound industries when needed. The use of public transportation is included.

w. Vocational evaluation: Assessment of worker characteristics, through the use of real or simulated work tasks. The purpose is to assess occupational strengths and weaknesses, and potential for vocational development. It also includes prevocational evaluation and work evaluation. This requires the use of a rehabilitation facility or similar controlled experimental setting.

x. Work activity: It is for those whose productivity is negligible in that they cannot meet the demands of sheltered employment. For people who need a work setting as part of their program in order to foster a sense of self-worth through work while earning a below minimum wage, it legally enables a wage to be paid. Work activity, in addition, includes a variety of creative, social physical and learning activities. Work activity may be provided only in facilities having a Federal Wage and Hour certificate for this purpose. It differs from activity programs for adults in that there is a significant productive element: it differs from sheltered employment in that it allows a wage of one-fourth the standard minimum.

y. Work adjustment: Learning activities typically involving real or simulated work tasks and situations. It is intended to assist a person to develop basic skills, attitudes, motivation, and work habits of the kind needed in competitive employment, sheltered employment or work activity. It develops social skills needed to function in a work environment. Its focus is upon basic employability rather than upon the skills of a specific occupation.

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OCT 7 1976

OFFICE OF HEARING EXAMINERS

E # 2

STATE OF MINNESOTA

COUNTY OF RAMSEY

BEFORE VERA J. LIKINS

COMMISSIONER OF PUBLIC WELFARE

In the Matter of the Proposed Rule 185 of the Minnesota Department of Public Welfare.

ORDER FOR HEARING

The Commissioner of the Minnesota Department of Public Welfare deems it necessary to consider adoption of the proposed Rule 185 pursuant to the authority vested in her by Minnesota Statutes 1974, as amended.

NOW, THEREFORE, IT IS ORDERED this 16th day of September, 1976, that a public hearing on the proposed rule captioned above be held in the State Office Building Auditorium, St. Paul, Minnesota, on November 2, 1976, commencing at 9:00 a.m., and continuing until all representatives of associations or other interested groups or persons have had an opportunity to be heard concerning the rule.

IT IS FURTHER ORDERED, that notice of said hearing be given to all representatives of associations or other interested groups or persons who have registered their names with the Secretary of State for that purpose.

STATE OF MINNESOTA
DEPARTMENT OF PUBLIC WELFARE

Vera J. Likins

VERA J. LIKINS
COMMISSIONER, MINNESOTA
DEPARTMENT OF PUBLIC WELFARE

Dated: Sept. 16, 1976

STATE OF MINNESOTA

COUNTY OF RAMSEY

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OFFICE OF HEARING EXAMINERS

BEFORE VERA J. LIKINS

COMMISSIONER OF PUBLIC WELFARE

In the Matter of the Proposed Rule 185 of the Minnesota Department of Public Welfare

NOTICE OF HEARING

Notice is hereby given that a public hearing will be held pursuant to Minnesota Statutes 15.0412, subd. 4 (1974), as amended, regarding the above-entitled matter, in the State Office Building Auditorium (Room 83), Wabasha Street (between Aurora and Fuller), St. Paul, Minnesota, on Tuesday, November 2, 1976, commencing at 9:00 A.M., and continuing until all representatives or other interested groups or persons have had an opportunity to be heard concerning the proposed Rule 185, by submitting either oral or written data, statements or arguments. Statements or briefs may be submitted without appearing at the hearing. This hearing is authorized by Minnesota Statutes, Chapter 15, 246, 253A, 256, and 257.

Minnesota Department of Public Welfare Rule 185 is designed to insure the availability and delivery of services to mentally retarded citizens residing in the state. As such, the rule follows recent state law and federal regulatory provisions and judicial decisions which require the provision of individualized services and developmental opportunities that approximate as nearly as possible, normal home-like, community patterns and conditions of living and learning to any person who is mentally retarded. This rule identifies the authority and responsibilities of the various area mental health boards, county welfare and human service boards throughout the state in planning, coordination, assistance and provision of direct services for the mentally retarded.

Under Minnesota Statutes 10A.01, subd. 11 (1974),any individual representing persons or associations attempting to influence administrative action, such as promulgation of these rules, must register with the State Ethics Commission as a lobbyist within five (5) days of the commencement of such activity by the individual. (The State Ethics Commission is located at Room 410, State Office Building, St. Paul, Minnesota 55155.)

Testimony or other evidence to be submitted for consideration should be pertinent to the matter at hand and may be presented either orally or in writing at the public hearing or by mailing a statement to Peter Erickson, Office of Hearing Examiner, 1745 University Avenue, St. Paul, Minnesota 55104, within 20 days following conclusion of the hearing. If the person submitting a written document cannot be present to read his statement at the hearing, the document will be entered into the record. For those persons wishing to submit written statements or exhibits, it is requested that at least three (3) copies of each statement, exhibit or summary be furnished at the hearing. It is suggested that to save time and avoid duplication, those organizations or associations sharing common viewpoints or interests in these proceedings join together where possible and present a single statement on behalf of such interests. All statements submitted should clearly identify the rule number to which the statement pertains.

Copies of the rule are now available and a free copy may be obtained by writing: Ardo Wrobel, Minnesota Department of Public Welfare, Mental Retardation Division, First Floor, Centennial Office Building, St. Paul, Minnesota 55155. Additional copies will be available at the door on the date of the hearing.

STATE OF MINNESOTA
DEPARTMENT OF PUBLIC WELFARE

VERA J. LIKINS
Commissioner

Dated: September 8, 1976

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OFFICE OF HEARING
EXAMINERS

STATE OF MINNESOTA)
)ss
COUNTY OF RAMSEY)

ROBERT J. HAMPER, being duly sworn on oath deposes and states:

1. That he is an employee of the Department of Public Welfare of the State of Minnesota.

2. That on the 21st day of September, 1976, he went to the Minnesota Secretary of State's office and requested a current list of all representatives of associations or other interested groups or persons who had registered their names with the Secretary of State for the purpose of obtaining notices of public hearings relating to the promulgation of rules pursuant to Minnesota Statutes § 15.0412 (1974), as amended.

3. That on the 21st day of September, 1976, in response to the above request, the Secretary of State provided him with such a list, a copy of which is attached hereto and incorporated by reference.

Further affiant sayeth not.

Robert J. Hamper
ROBERT J. HAMPER

Subscribed and sworn to before me
this 27 day of September, 1976.

Margaret Holt

MARGARET HOLT
NOTARY PUBLIC-MINNESOTA
RAMSEY COUNTY
My Comm. Expires Sept. 20, 1977

E #3

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RULES AND REGULATIONS

STATE OF MINNESOTA

COUNTY OF RAMSEY

CERTIFICATE

In the Matter of the Proposed Rule 185 of the Minnesota Department of Public Welfare.

I hereby certify that the attached 507 labels + 4 1/4 sheet(s) constitute the complete list of persons, associations and other interested groups who, as of 2:00 o'clock P.M., this 21st day of Sept, 1976, have requested pursuant to M. S. 1974, Sec. 15.0412, that their names be placed on file with the Secretary of State for the purpose of receiving notice of public hearing on proposed rules on the subject captioned above.

Secretary of State

Joan Anderson Growe

By Ceil Dion

E #5

STATE OF MINNESOTA

COUNTY OF RAMSEY

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BEFORE VERA J. LIKINS

COMMISSIONER OF PUBLIC WELFARE

In the Matter of the Proposed Rule 185 of the Minnesota Department of Public Welfare.

STATEMENT OF NEED

The above captioned rule is a new administrative rule of the Minnesota Department of Public Welfare.

The need to adopt the rule arises because of new laws, federal regulations, technical changes, planning responsibilities, advances in the planning and provision of services, development of community-based service delivery systems, and utilization of local, state and federal resources, in the development of service delivery systems for mentally retarded persons in Minnesota.

Recent rules, federal regulations and state laws require that any persons who are mentally retarded be provided individualized services and developmental opportunities that approximate, as nearly as possible, normal homelike, community patterns and conditions of living and learning. Custody in day and residential facilities of persons in need of care and services for his and the public welfare, is justified only for the purpose of gaining training and treatment services. The need to adopt the proposed rule arises because:

1. Department of Public Welfare Manual for county welfare agencies, dated July 5, 1967 previously provided considerable requirements in the diagnosis, evaluation, planning, arragement and provision of services, and the payment for such services to mentally retarded persons in Minnesota. The manual does not have the force and effect of law.

2. Further, professional experience of service planners and providers has brought about significant changes in the philosophy and practices in the field of mental retardation.

3. The department's goals provide a framework for programming which is supported through local, state and federal resources. These goals include the provision of services according to the developmental model, normalizing living experiences, individualized program planning, and participation of the subject person and his family in the planning and decision making that concerns his program.

4. The proposed Minnesota Rule DPW 185 governs services for individuals in need of publicly funded services which diagnose the existence of mental retardation, assess needs, and develop the individual through establishment of a service plan by the local social service agency. The proposed rule also concerns specific responsibilities related to availability and delivery of services in the community for individual clients of the local social service agency.

5. The proposed rule concerns the legal responsibilities of the community mental health boards and local social service agencies. The rule does not directly concern the internal operation and responsibilities of the residential and day service providers, since their internal operations and responsibilities are governed by other rules, regulations and laws that are applicable to their functions.

6. The proposed rule is needed to give direction to provisions in laws, rules and regulations that affect the supervision, protection and habilitation of mentally retarded citizens in Minnesota, and to the provision of a full range of needed social, financial, residential and habilitative services to which they are entitled.

7. The proposed rule is the result of the Department's Comprehensive State Plan for Mentally Retarded and Developmentally Disabled in Minnesota, published in March, 1975, which established department goals of standard setting, coordination, funding, monitoring and evaluation of programs for mentally retarded and other developmentally disabled individuals entitled to such services. The Department of Public Welfare seeks to reduce it's role in providing direct services by delegating management functions to the local level in order to manage the state-wide program through local control of individualized program planning and making services locally available for individuals in need of services.

8. The proposed rule is also the result of testimony received in and following public hearing on an earlier version of proposed Minnesota Rule DPW 185, which was heard on December 15, 1975. This testimony helped to clarify the intent and purpose of the proposed rule. This proposed rule 185 is based on acceptable changes brought about by the earlier public hearing.

9. Although there are numerous references in law to agency responsibilities to mentally retarded persons in need of services, the laws are not in sufficiently specific detail to enable full implementation. Such detail must include the diagnosis, assessment, planning, provision and payment for services to individuals, and the availability of services for those individuals.

Authorities that relate to the need for the proposed rule are:

1. Minnesota Statute 252A.01 provides for a coordinated approach to the supervision, protection and habilitation of mentally retarded citizens; to receive a full range of needed social, financial, residential and habilitation service to which they are lawfully entitled; and the diagnosis of mental retardation. This is supported by Sections C, 1, and D of the proposed rule.

2. Minnesota Statute 393.07, Subd. 1, 2, 3 and 4, provide that the county welfare board under supervision of the Department of Public Welfare (DPW), is responsible for all forms of public assistance, public child welfare and programs within the purview of federal Social Security Act, for both children and adults. This includes all forms of mental health services, supervision of wards of the commissioner which shall be done in accordance with the standards, rules and regulations promulgated by the Commissioner of Public Welfare. This is supported by section B of the proposed rule.

3. Minnesota Statute 252A.15, Subd. 1 and 2, provides for individual program plans, involvement of parents and spouses in planning and decision making. The right to treatment provisions of Minnesota Statute 253A.17, Subd. 9, provides for written program plans, in behavioral terms and precise goals for mentally retarded in residential facilities, and further provides for participation of county welfare departments in monitoring and review to insure compliance with such individual program plans. This is supported by sections C,2, a and b, and sections C, 3, a (2), (3) and (5), of the proposed rule.

4. Minnesota Statute 252.28 and its implementing Minnesota Rule DPW 34, Part C, provides for an individualized program and treatment plan for persons in residential facilities for mentally retarded. The rule requires that plans be formulated by an inter-disciplinary team which shall include Mental Retardation professionals, parents and referring agency (county welfare departments). The referring agency is responsible for establishment and implementation of case-work plans for individual residents. This is supported by section C, 3 of the proposed rule.

5. Minnesota Statute 252.27 provides for cost of care payments for the care of children in residential facilities to be made by county welfare departments. Implementing Minnesota Rule DPW 30 specifies that the county welfare department shall formulate a written program plan for each child placed in a residential facility. Subdivision 4 of Minnesota Statute 252.27 further provides for payment to parents for certain services provided by the parents in their own home in the care and habilitation of their child who otherwise is eligible and in need of residential care. This subdivision 4 provides that parents receiving such subsidy shall do so under an individual plan of care and training established by the appropriate local county welfare agency. This is supported by section C,3, of the proposed rule.

6. 45 CFR, par. 249.12 and 249.13, promulgated by the Department of Health, Education and Welfare for intermediate care facilities for mentally retarded, pertain to persons in licensed and certified ICF/MR facilities. These regulations require individually written training and habilitation objectives for each resident, based upon diagnostic and prognostic data which is stated in specific behavioral terms. This is supported by sections C,2,b and C,3, a (3) and (4).

7. The Developmentally Disabled Assistance and Bill of Rights Act, P.L. 94-103, Title II, requires (1) objective measures of developmental progress of persons through individual habilitation plans, and (2) methods of evaluating programs. This is supported by section C, 2, c.

The proposed rule is needed to insure that all service delivery in Minnesota is uniformly available to its citizens.

STATE OF MINNESOTA
DEPARTMENT OF PUBLIC WELFARE

Vera J. Likins
Commissioner

Dated:

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STATE OF MINNESOTA

DEPARTMENT OF PUBLIC WELFARE

In the Matter of the Proposed Rule 185 of the Minnesota Department of Public Welfare

STATEMENT OF EVIDENCE

In addition to the "Statement of Need", which is available for inspection or purchase at the Office of Hearing Examiners, 1745 University Avenue, St. Paul, Minnesota, and in support thereof, the Minnesota Department of Public Welfare will introduce the following evidence:

1. That technology has been developed in cooperation with the University of Minnesota to provide the means by which individual needs can be assessed, and plans developed according to such needs. The Minnesota Developmental Programming System (MDPS) will be introduced, and testimony given, that attests to the fact that workshops have been given for purposes of training county welfare, human service and community mental health staff, and residential and day service providers, in the use of the MDPS for individualized program planning.

2. That the Minnesota Association of Retarded Citizens was represented in the development of the proposed rule concerning the involvement and participation of the individual client and their parents in planning by the count welfare departments or human service boards.

3. That the proposed rule is reasonable with regard to historical current practices concerning services to persons who are mentally retarded, and that the county welfare or human service boards are capable of providing services under the proposed rule.

4. That the community mental health centers or human service boards are providing services in planning, coordination, consultation and direct assistance to mentally retarded persons, under provisions of grant-in-aid guidelines and legislative appropriations.

We may call one or more of the following persons to testify to the above, and to clarify provisions of the proposed rule concerning the above:

Warren Bock: regarding paragraph 1, above.
Dan Connor: regarding paragraph 2 and other matters of support of the Minnesota Association of Retarded Citizens.
Frances Ames: regarding paragraph 3 above.
Ardo Wrobel: general testimony in behalf of the Minnesota Department of Public Welfare in support of the proposed rule, including specific testimony concerning paragraph4, above.

We intend to introduce the following documentary evidence:

Developmental Disabilities Assistance and Bill of Rights Amendments, P.L. 94-103, (October, 1975).

Century of Decision, Report to the President by the President's Committee on Mental Retardation (March, 1976).

Welsch vs. Likins case, Earl R. Larson's Decree and Order, U. S. District Judge, District of Minnesota, Fourth Division, dated February 15, 1974.

Minnesota Developmental Programming System, a cooperative project of the Minnesota Department of Public Welfare and the University of Minnesota, supported by the Department of Health, Education and Welfare (HEW), Washington D.C.

Trends in State Services, Report of the President's Committee on Mental Retardation (1976).

Report: State Involvement in Protection of the Mentally Retarded, Lobbying and Legislative Response, Minnesota Legislative Audit Commission (1976).

We will be citing the following statutes and law:

1. Minnesota Statute 252A.01
2. Minnesota Statute 393.07, Subd. 1, 2, 3 and 4.
3. Minnesota Statute 252A.15, Subd. 1 and 2.
4. Minnesota Statute 252.28
5. Minnesota Statute 252.27
6. 45 CFR 249.12 and 249.13
7. Public Law 94-103, Title II

The Statement of Need gives additional details concerning the above statutes and law.

Ardo M. Wrobel, Director
Mental Retardation Program Division
Department of Public Welfare

Dated: 10/5/76

STATE OF MINNESOTA
OFFICE OF HEARING EXAMINERS
ROOM 300 – 1745 UNIVERSITY AVENUE
ST. PAUL, MINNESOTA 55104
(612) 296-6910

December 3, 1976

Mr. Ardo Wrobel
Director, Mental Redardation
Welfare Department
4th Floor, Centennial Office Building
St. Paul, Minnesota 55155

Re: In the matter of the proposed
Rule 185 of the Minnesota
Department of Public Welfare.
DPW-77-014-PE

Dear Mr. Wrobel:

Enclosed is the Report of the Hearing Examiner in the above-entitled matter.

Your files in this case are being sent to you under separate cover.

We are closing our files in this matter.

Very truly yours,

Peter C. Erickson

Peter C. Erickson
Hearing Examiner

PCE:ecg
Enclosure

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STATE OF MINNESOTA
OFFICE OF HEARING EXAMINERS

FOR THE DEPARTMENT OF PUBLIC WELFARE

In the Matter of the Proposed Rule 185 of the Minnesota Department of Public Welfare.

REPORT OF HEARING EXAMINER

The above-entitled matter came on for hearing before Hearing Examiner Peter C. Erickson of the Minnesota Office of Hearing Examiners at 9:00 a.m. on Tuesday, November 2, 1976 in Room 83 of the State Office Building, St. Paul, Minnesota.

John Daniels, Special Assistant Attorney General, Fourth Floor, Centennial Office Building, St. Paul, Minnesota, appeared as counsel for the Department of Public Welfare. Ardo Wrobel, Director of the Mental Retardation Division; Warren Bock, Assistant Director of the Mental Retardation Program Division; and Frances Coakley Ames, Director of the Division of Family and Guardianship Services, testified on behalf of the Department. The hearing continued until all interested groups or persons had an opportunity to be heard concerning the adoption of the proposed rules.

Pursuant to Minn. Stat. §15.052, subd. 3 (1975 Supp.), this Report will include Findings of Fact, Conclusions and Recommendations. The Department of Welfare and the Office of Hearings Examiners will make a copy of this report available for review to any interested person upon request. Copies of the report will be furnished at a nominal cost by the Office of Hearing Examiners.

The Department shall, if it proposes to adopt the rules as originally proposed or amended, submit the complete hearing record to the Chief Hearing Examiner, pursuant to HE 108, no earlier than ten days subsequent to the receipt of this report. It shall include the rules as originally proposed, and the rules as proposed for adoption in final form. The submission to the Chief Hearing Examiner shall precede review by the Attorney General. The Chief Hearing Examiner shall complete his review and submit his report to the Department on the issue of substantial changes in the rule within ten calendar days. The Department will be responsible for filing

the rules with the Attorney General.

FINDINGS OF FACT

1. On September 22, 1976, the Department mailed the Notice of Hearing to all persons and associations who had registered their names with the Secretary of State for the purpose of receiving such notice, to all persons and associations on a list maintained by the Department of Public Welfare, and to all members of the Legislature.

2. On October 1, 1976, the Department filed the following documents with the Chief Hearing Examiner:

(a) An Order for Hearing;
(b) A Notice of Hearing with the proposed rules attached; and
(c) A statement of the number of persons expected to attend and estimated length of hearing.

3. On October 7, 1976, the Department filed with the Office of Hearing Examiners the following documents:

(a) The Order for Hearing;
(b) The Notice of Hearing as mailed;
(c) The affidavit of receipt of the Secretary of State's list;
(d) The Affidavit of Mailing;
(e) The Statement of Need;
(f) The affidavit of mailing of a notice pursuant to Minn. Stat. §15.0412, subd. 6, a copy of the Notice and material received pursuant to the Notice;
(g) The names of Department personnel who will represent the agency; and
(h) A summary of evidence.

The documents were available for inspection at the Office of Hearing Examiners from the date of filing to the date of the hearing.

4. The record was closed after allowing 20 days for submission of written comments at the end of the day on November 22, 1976.

5. Statutory authority to promulgate the proposed rule is found in Minn. Stat. §§252A.01, 393.07 subd. 1-4, 252A.15 subd. 1 and 2, 253A.17 subd. 9, 252.28, 252.27 and 245.68.

6. DPW 185 is a proposed new administrative rule of the Department of Public Welfare. Recent federal and state law and federal regulations require that any person who is mentally retarded be provided individualized services and developmental opportunities which approximate, as nearly as possible, normal homelike community patterns and conditions of living and learning. Custody of persons in need of care and services in day and residential facilities is justified only for the purpose of gaining training and treatment

services. The proposed rule is needed to insure that all service delivery to mentally retarded persons in Minnesota is uniformly available to all citizens in compliance with the mandates of state and federal law. Those mandates are set out in the statutory authority cited above and in P. L. 94-103, Title II and 45 CFR, para. 249.12 and 249.13.

7. Proposed DPW 185 A is necessary to specify the scope of coverage of the rule and to define terms used in the rule.

(a) It was suggested that the definition of day facility be amended to insure that the placement must, in fact, provide training. The Minnesota Developmental Disabilities Advocacy Project (hereafter MDDAP) proposed to amend the definition to read as follows: "b. Day Facility: Placement less than 24-hours per day outside the home which provides training in self-care, remedial, developmental or social skills".

(b) It was suggested that the word "concurrently" in the definition of mental retardation be replaced with and/or to provide for greater inclusion in the classification of mentally retarded persons.

(c) The MDDAP proposed to amend paragraph d. Mental Retardation, by deleting the words "...such as to require supervision and protection for his/her welfare or the public welfare". They argue that the inclusion of this language, which comes directly from the Mental Retardation Protection Act, operates to limit the definition of mental retardation only to those individuals who are or should be under state guardianship or conservatorship.

(d) The Department proposed an amendment to the last sentence in paragraph d. (1) to delete the words "... and brain injuries occurring in adult life". The Department contends that the "brain injury" language would mean inclusion for many persons who are not, in fact, mentally retarded. Many persons responded by stating that if the adults with brain injuries aren't covered by these rules, services to them may be cut off.

(e) The Department also proposed to change the definitional heading in d. from mental retardation to mentally re-

tarded person for the sake of clarity.

(f) It was suggested by the MDDAP that the last sentence of A.2.d.(1) be moved to the end of A.2. d. because it is definitional in nature.

(g) The MDDAP suggests that A.2.d.(2) should be re-written as follows:

> (2) "Adaptive behavior shall be determined through the use of published scales, and professional observations by psycologists or social workers experienced in mental retardation, and other objectively verifiable standards for determining the effectiveness or degree with which the individual meets the standards of personal independence and social responsibilities expected of his/her age and peer cultural group.

They contend that:

> "The initial diagnosis of mental retardation should depend only upon objectively verifiable standards. We have seen an unfortunately large number of instances in which the degree of an individual's functioning has been determined by the "observations" of family members or members of the community who are hostile to the mentally retarded individual, and who have no professional qualifications whatsoever to evaluate an individual's behavior. This is a most unfortunate occurrence and there should be nothing in this rule which would allow it to be repeated. We believe that, at this point in time, there are sufficient numbers of objective tools for behavioral assessment to negate the need for a wholesale approach to determining whether or not an individual is mentally retarded. The types of observation included in proposed rule 185 as presently drafted can be, and should be, included in the development of the individual's service plan. Insofar as the rule refers to "peer cultural group", it is a large improvement over the existing situation. Cultural differences from group to group are often misunderstood by others from outside that group. Such misunderstanding should not serve as the basis for a diagnosis of retardation."

(h) The MDDAP proposes that A.2.e. be amended to read:

> "Residential facility: Out of family home setting providing training in self-care, remedial, developmental or social skills."

This change is proposed to assure that the placement does, in fact, provide training.

(i) It was suggested that the individual service plan and the individual program plan need to be defined more explicitly. That the use of these two terms in the rule is confusing when seen in light of the definitions.

(j) The MDDAP and the Minnesota Governor's Planning Council on Developmental Disabilities both proposed that definitions of "diagnostic review" and "interdisciplinary review" be added to the definitional section.

8. Proposed DPW 185 B is necessary to set out the appropriate standards to be followed when providing services to individuals who are mentally retarded. It establishes the "normalization principle" as the overriding consideration when administering services.

(a) It was suggested that the words; "within the constraints needed to protect the individual and society from harm," be added to the end of B.1.a. This addition would reflect the need for appropriate protections.

(b) The MDDAP suggested that B.1.a. be amended to read:

"To provide the person who is mentally retarded with a normal existence. If this is not possible, to provide the mentally retarded person with the alternative which is least restrictive."

That this language would more clearly reflect the goal of normalization and comply with the standards set out in court cases and statutes.

(c) The Department proposed to amend the second paragraph in B.1.b. by replacing the word "periodic" with the word "quarterly" to establish a set length of time for the reassessment of individual service plans. The MDDAP suggested annual reevaluations.

9. Proposed DPW 185 C. is necessary to enumerate the responsibilities of the local social service agencies in regard to the diagnosis and planning of services for mentally retarded individuals.

(a) The Department has proposed that C.1.a. be amended to read as follows:

"a. The local social service agency has the primary responsibility for insuring prompt diagnosis of mental retardation utilizing professionally qualified..."

This change more clearly defines the role of the local social service agency (hereafter LSSA) and sets a standard of prompt diagnosis.

(b) The Department has proposed that C.1.c.(1) be amended by deleting the language inside the brackets at the end of the paragraph. The MDDAP also suggested that the parentheses

be omitted from the paragraph. That both of these omissions do nothing to detract from the effectiveness of the language.

(c) The Department proposed to amend C.1.d. to require diagnostic review every two years instead of three and a maximum four year interval for adults who have been in a service plan for ten years. This change was suggested so that C.1.d. will be uniform with Education rules and to assure that adult reevaluation does in fact occur.

(d) The MDDAP proposed to amend C.2.a. as follows: "...and subsequently planning to meet those needs with the cooperation and involvement of the client or guardians or in the case of individuals under 18, parents or relatives." This is, in part, a linguistic change to make the rule more understandable. It also clarifies that the client should be involved and that the parents or relatives are not necessarily involved if the client is over 18.

(e) The Ramsey County Welfare Department proposed to amend C.2.a. by deleting the words "or may be retarded" as that language implies assessment without diagnosis. The Department contends that, "Assessment should be possible when, in the interests of preventing the diagnostic label of mental retardation, certain services may be needed to keep the person from becoming mentally retarded. It further allows for a placement in a residential or day facility in order to do the best job possible in making an accurate diagnosis."

(f) The MDDAP suggested to also amend C.2.c. to follow the amendment it proposed to C.2.a. for the same reasons.

(g) Several responses proposed to replace the word "necessary" in C.3.a. with the word "desirable". The Department argues that necessity, based upon assessment and planning, is the only justification for placement.

(h) Hennepin County proposed to amend C.3.a. by replacing the words "shall coordinate" with "shall be responsible for" in order to clearly specify duties.

(i) The MDDAP proposed to amend C.3.a. by replacing the words "if the client is a child" with "if the client is school age". It contends that since mentally retarded persons are

entitled to schooling until the age of 21, and may receive it until the age of 25, the rule should reflect this fact.

(j) The Department proposed to amend C.3.a.(2) by adding the words "and as indicated by subsequent assessment and review" to the end of the first sentence. It contends that this addition is consistent with other provisions in the rule and helps to clarify that plans are expected to be reviewed and changed accordingly.

(k) The Department proposed to amend C.3.a.(3) by rewriting the last sentence to read; "The local social service agency shall participate in the development of the facility's individual program plan." This change is made to assure that the LSSA participates in the formulation of the plan as its means of approval.

(l) The MDDAP contends that adult foster homes are excluded by C.3.a.(4), and if that is not the intent, the rule should be amended to reflect their inclusion.

(m) The Department proposed to add C.3.a.(6) to read: "(6) Counseling shall be provided or arranged by the local service agency to the individual, his parents or guardian as needed. The agency may request assistance of the community mental health director.

This addition specifies that counseling services are part of the range of services that LSSA's have the responsibility to provide.

(n) The Department proposed to add C.3.a.(7) to read: "(7) Appeal may be made to the Commissioner of the state agency."

This addition sets out, by rule, the appeal rights that any welfare recipient has.

10. Proposed DPW 185 D. is needed to set out the responsibilities of the community mental health board or human services board in regard to the planning and treatment for mentally retarded individuals.

(a) The Department proposed to amend D.1. to read: "...shall ensure the involvement of local social service agencies, local developmental disabilities councils,

state institutions and other service providers...". This change is proposed to include the input of the disabilities councils.

(b) The Department suggested amending D.2. to read: "The board shall employ a Qualified Mental Retardation Professional to develop a service..." It states that this standard is used in department grants-in-aid and should be set out in the rule.

(c) The Department proposed to amend D.2.a. - e. as follows:

"a. The board shall take the lead in the planning and development of services not available through service providers, public and private agencies, educational and judicial agencies.

b. The board shall identify the service categories available in and outside of the geographical area for its mental retardation population, <u>including those provided by private individuals or agencies, local public agencies and state institutions.</u>

c. The board shall identify in priority of need order services that are not available to its mental retardation population.

d. The board shall provide or arrange for service <u>categories</u> needed, as specified in the service delivery plan, within the means provided in grants-in-aid by the state agency.

e. Copies of the plan shall be submitted to the state agency in approved format on or before July 1 of the year preceding the biennial legislative session for purposes of budget planning and legislative proposals. <u>Copies of the plan shall be made available to agencies involved in related planning activities.</u>"

This change is made to reflect the sequence of steps taken by the board. Also, it more clearly defines the nature and responsibilities associated with the area service delivery plan.

(d) The Department suggested an amendment to D.3 to read: "...and psychiatric diagonostic evaluation, client and

parental counseling...". The MDDAP also proposed to amend D.3 as follows: "...mentally retarded as requested by the client or the local social service agencies...". Both of these changes involve the client more fully in his own treatment.

(e) The Department proposed that D.4 be amended to read: "...program for facilities and services applying...". This change is made to comply with the wording of Minn. Stat. §252.28.

(f) It was suggested that a new section, D.5., be added requiring the addition of appropriate staff. The Department contends that "qualified professional staff" standards are already set-out in the grant-in-aid guidelines.

11. Proposed DPW 185 E. is necessary to specify the different types of services required to be included in the delivery system for mentally retarded individuals.

(a) The Department proposed to add a new category, Volunteer services, to read as follows: "Volunteer services: Volunteer activities by individuals, service organizations and advocacy groups, provide a variety of services on a group or one-to-one basis that supplements and augments services provided to mentally retarded persons. This may also include participation in advisory committees, advocacy activities and other forms of personal support to individuals. Such services are not to supplant staff services, and are ordinarily provided by unpaid persons and groups." This addition is made to include this important element in welfare services.

(b) Other clerical amendments were made to E.1.a., change fo to of; to E.1.h., change (III), (A), (5) to C.1.d.; and to E.1.i., change (19) to s.

(c) The Department proposed to amend E.1.q. by deleting the last three sentences in the description and amending E.1.x. by adding the words; "up to" as follows: "...a wage of up to one-fourth...". These changes are made to comply with federal wage regulations.

(d) It was suggested that a more positive definition of work activity would result if the words "negligible in" were replaced by "such".

(e) The MDDAP suggested that the rule should include categories of programs for home-bound individuals because E.1.a. and c. do not fill that void.

(f) The MDDAP proposed the addition of speech therapy to the listed treatment services set out in E.1.t.

12. Many comments were received that spoke to the problem of local funding for the services, treatment, diagnosis, etc. mandated by proposed DPW 185. Most of these comments agreed with the substance and intent of the rule, however, they stated that there was inadequate funding to enable compliance. That a comprehensive funding plan must be achieved before the rule can be effectuated.

The Department contends that it will continue to pursue additional funding as necessary. However, it is "not convinced that additional funding is necessary to the extent indicated. The reason for this is that Rule 185 does not significantly change services required under previous department manual materials for county welfare departments, or grant in aid guidelines for community mental health boards. A part of the purpose of 185 is to insure uniform application of services in all counties through rule that is promulgated under provisions of the administrative procedures act. Further, the department's legislative plan for the current and next biennium is to absorb major county costs up to the legally authorized re-imbursement rates. The last legislative session significantly reduced local county costs in residential services through state take-over of 90% of the costs remaining after federal Title XIX resources are utilized. The last legislature also raised the percentage of state contribution to the cost of care of mentally retarded children who are not eligible for Title XIX."

13. Pursuant to Laws 1976, Chapter 138, the Department has estimated that the total additional cost of implementing this rule will not exceed $100,000 in either of the two years immediately following adoption of the rule.

14. Many comments were submitted which proposed amendments and raised concerns that were not discussed in this report. This is not to imply that the comments had no merit, but rather that actual rule implementation will have to occur to substantiate the necessity for many of the proposals. All of the submissions are forwarded to the Department for its consideration prior to any action on this report.

CONCLUSIONS

1. Due, timely and adequate legal notice of the hearing was properly served and filed by the Department of Public Welfare. All other substantive and procedural requirements of statute or rule have been complied with.

2. The Examiner concludes that proposed DPW A. should be amended as set out in Findings 7(a), 7(c), 7(d), 7(e), 7(f) and 7(h) for the reasons specified therein.

The word "concurrently" is used in the definition of mental retardation in Minn. Stat. §252A.02 and there has been no showing as to what the result would be if "and/or" were substituted for it. DPW 185 is aimed solely at persons who are mentally retarded. The inclusion of the "brain injury" language could very easily open the rule up to many more people than it is intended for. The language suggested by MDDAP for A.2.d.(2) is similar to the proposed rule itself. No change seems justified at this time. The need for more and better definitions may become apparent at a later time, however, they are reasonably sufficient as proposed.

3. The Examiner concludes that proposed DPW B. should be amended as set out in Finding 8(c) to provide for either quarterly or annual reevaluations. The Department shall evaluate the factors involved to determine which time period is most appropriate.

As "normalization" is the key to DPW 185 and the use of necessary protections is inherent in the rule, the "constraint" language is not needed. The amendment proposed by MDDAP to B.1.a. is merely a reworded duplication of the rule as proposed.

4. The Examiner concludes that proposed DPW C. should be amended as set out in Findings 9(a), 9(b), 9(c), 9(h), 9(i), 9(j),

9(k), 9(m) and 9(n) for the reasons specified therein. C.2.a. should be amended to read: "...and subsequently planning to meet those needs with the cooperation and involvement of the client, parents, relatives or guardian." This change would allow the LSSA flexibility and still include the client as does C.2.c.

The Department shall investigate the inclusion/exclusion of adult foster homes in C.3.a.(4) and amend the section, if necessary and appropriate, to include this kind of facility.

5. The Examiner concludes that proposed DPW 185 D. should be amended as set out in Findings 10(a), 10(b), 10(c), 10(d) and 10(e) for the reasons specified therein.

6. The Examiner concludes that proposed DPW 185 E. should be amended as set out in Findings 11(a), 11(b), 11(c) and 11(d). The Department shall determine the viability of including programs for home-bound individuals and speech therapy treatment and amend the rule accordingly.

7. The Examiner concludes that the Department of Public Welfare has documented its statutory authority to promulgate the proposed rules and that the need for and reasonableness of the proposed rules has been demonstrated.

8. The Examiner concludes that the amendments he is suggesting to the rules make the rules more reasonable and that none of these amendments constitute a substantial change.

RECOMMENDATION

That the Department of Public Welfare adopt DPW 185 as proposed and recommended to be amended in this report.

Dated: 12-3-76

Peter C. Erickson

Peter C. Erickson
Hearing Examiner

STATE OF MINNESOTA)
(ss.
COUNTY OF RAMSEY)

AFFIDAVIT OF SERVICE

Eunice C. Groschen, being first duly sworn, deposes and says that on the 3d day of December 1976, at the City of St. Paul, County of Ramsey, State of Minnesota, she served the attached

REPORT OF HEARING EXAMINER/DPW-77-014_PE

unstamped, by placing in the designated tray to be collected by messenger for delivery to the central mailing station as required by Minn. Stat., § 16.54 (1974), a true and correct copy thereof on all persons at the addresses shown on the attached mailing list.

Eunice C. Groschen

Eunice C. Groschen

Subscribed and sworn to before me

this 3rd day of December, 1976.

Eileen A. Gaiovnik

EILEEN A. GAIOVNIK
Notary Public, Ramsey Co. Mn.
MY COMMISION EXPIRES
December 14, 1980

Mr. Ardo Wrobel
Director, Mental Retardation
Welfare
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John Daniels
S.A.A.G.
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STATE OF MINNESOTA
DEPARTMENT OF PUBLIC WELFARE

IN THE MATTER OF PROPOSED RULE 185
OF THE MINNESOTA DEPARTMENT OF
PUBLIC WELFARE

ORDER ADOPTING RULES

The above-entitled matter came on for hearing before Peter Erickson, Hearing Examiner, Office of Hearing Examiners of the State of Minnesota on the 2nd day of November, 1976, at 9:00 AM in the State Office Building Auditorium, St. Paul, Minnesota, after proper notice required by M.S. 1974, Section 15.0412 was served upon all persons, associations and other interested groups registered with the Secretary of State for that purpose.

After affording interested persons an opportunity to present written and oral data, statements and arguments, having heard all of the testimony, having considered all of the evidence adduced and upon the records, files and proceedings herein, and applicable statutory standards or criteria, and having confirmed the need for the above captioned rule and the reasonableness thereof.

NOW, THEREFORE, IT IS ORDERED that this rule identified as DPW Rule 185, Community Mental Health Board and County Welfare or Human Service Board Responsibilities to Individuals Who Are Mentally Retarded is adopted this 21st day of January, 1977 pursuant to authority vested in me by M.S. 393.07, Subd. 1-4, and M.S. 252A.01.

STATE OF MINNESOTA
DEPARTMENT OF PUBLIC WELFARE

Vera J. Likins

VERA J. LIKINS, Commissioner

STATEMENT OF COMPLIANCE WITH

MANUAL OF RULE MAKING PROCEDURES

I, Special Assistant Attorney General John H. Daniels, Jr., do hereby declare that I have examined proposed Rule 185 and all related documents and, based upon them and my personal familiarity with the applicable procedures, the Manual of Rule Making Procedures has been followed. Any exceptions are noted below.

No exceptions.

JOHN H. DANIELS

Dated: 2/2/77

DPW-77-014-PE

STATE OF MINNESOTA
OFFICE OF HEARING EXAMINERS

FOR THE DEPARTMENT OF PUBLIC WELFARE

IN THE MATTER OF THE PROPOSED)
RULE 185 OF THE MINNESOTA)
DEPARTMENT OF PUBLIC WELFARE)

REPORT OF THE
CHIEF HEARING EXAMINER

WHEREAS, a hearing was held on November 2, 1976, before Peter C. Erickson, a Hearing Examiner of the State Office of Hearing Examiners, on the above-entitled matter in compliance with Minn. Stat. §15.0412, Subd. 4; and

WHEREAS, the Report of Hearing Examiner made pursuant to Minn. Stat. §15.052, Subd. 3, was issued to the Department of Public Welfare on December 3, 1976; and

WHEREAS, the Department of Public Welfare has now determined to adopt rules pursuant to Minn. Stat. §15.0412, Subd. 4; and

WHEREAS, the Department of Public Welfare has submitted said rule to the Chief Hearing Examiner for review pursuant to Minn. Stat. §15.052, Subd. 4, and Rule HE 107; and

WHEREAS, the Chief Hearing Examiner finds that the final proposed rule is not substantially different from that proposed at the public hearing and that the Department of Public Welfare has met all requirements of Minn. Stat. §15.0412, Subd. 4.

NOW, THEREFORE, upon receipt of this Report, the Department of Public Welfare has the responsibility of submitting the complete hearing record and the rule as adopted by the Department to the Attorney General and to publish in the State Register, all pursuant to Minn. Stat. §15.0412, Subd. 4.

Dated this 24th day
of January, 1977.

Duane R. Harves

DUANE R. HARVES
Chief Hearing Examiner

E #4

RECEIVED
OCT 7 1976
OFFICE OF HEARING EXAMINERS

STATE OF MINNESOTA)
) SS
COUNTY OF RAMSEY)

In the Matter of the Proposed Rule 185 of the Minnesota Department of Public Welfare.

AFFIDAVIT OF MAILING

ROBERT J. HAMPER, being first duly sworn, deposes and says:

That on the 22 day of September, 1976, at the City of St. Paul, County of Ramsey, State of Minnesota, he served the attached Notice of Hearing by depositing in the United States mail at said City of St. Paul, a true and correct copy thereof, properly enveloped, with postage prepaid, to all persons and associations at the addresses listed on the attached Certificate of the Secretary of State.

Robert J. Hamper
ROBERT J. HAMPER

Subscribed and sworn to before me
this 27 day of September, 1976.

Margaret Holt
Margaret A. Holt

MARGARET HOLT
NOTARY PUBLIC-MINNESOTA
RAMSEY COUNTY
My Comm. Expires Sept. 23, 1977

Rule 185 Hearing Date

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ST PAUL MN
55104

CHRISTIANSEN FREDRIK
RM 505 CAPITOL SQ BLDG
ST PAUL MN
55155

CITIZENS LEAGUE
530 SYNDICATE BLDG
MPLS MN
55402

CITY OF ROBBINSDALE
C LARSON 4221 LAKE RD
ROBBINSDALE MN
55422

CLAWSON CONNIE
HELP CT 317-17TH AV SE
MPLS MN

COLEMAN NICHOLAS
208 STATE CAPITOL
ST PAUL MN
55155

CONCORDIA COLLEGE
DEAN
MOORHEAD MN
56560

CONSUMER SERVICES DEPT COMM
5TH FLR METRO SQ BLDG
ST PAUL MN
55101

CROW WING CO PLANNING & ADV
COURT HOUSE
BRAINERD MN
56401

CUSHMAN J S DAYTON HUDSON
700 NICOLLET MALL
MPLS MN
55402

DAILEY THOMAS ECONOMICS LAB
370 WABASHA ST
ST PAUL MN
55102

DAK CO MENTAL HEALTH CENTER
744 19TH AVE N
SO ST PAUL MN
55075

DAYTON CHAS SIERRA CLUB
800 MIDLAND BANK BLDG
MPLS MN
55401

DEVELOP DISABILITIES PROGRAM
STATE PLAN 101 CAP SQ
ST PAUL MN
55155

DISPATCH PIONEER PRESS
PRESS RM STATE CAPITOL
ST PAUL MN
55101

DORSEY MARQUART
2400 1ST NATL BANK BLDG
MPLS MN
55402

DUDLEY E H
RT 7 BOX 122
EXCELSIOR MN
55331

DUNN OLIVER PLUMBERS LOC 15
708 SO 10TH ST
MPLS MN
55404

E CENTRAL REG. DEV. COMM
COURTHOUSE 18 N VINE ST
MORA M
N5505

EBELING EDWARD H.
161 W. MAIN
PERHAM MN
56573

CARRISON DALE K
MANKATO STATE COLLEGE
MANKATO MN
56001

CENTRAL BUSINESS DATA
BENSON RADIO ARCADE BLD
BENSON MN
56215

CHAMBERLAIN JOHN L
PO BOX 241
MPLS MN
55440

CHERCHES CHRIS CITY MGR
5005 MTKA BLVD
ST LOUIS PARK MN
55416

CHRYSALIS CENTER FOR WOMEN
2104 STEVENS AVE S
MPLS MN
55404

CITY CLERK
386 CITY HALL
ST PAUL MN
55102

CLARKSON J.B.
2350 I.D.S. CENTER
MINNEAPOLIS MN
55402

CLAUSEN PHILLIP
2307 STANDISH ST
ST PAUL MN
55108

COLLIN LAURENCE
RT 2
ISANTI MN
55040

COMMUNITY DESIGN CENTER
118 E 26TH ST
MPLS MN
55404

COUNTY ATTYS COUNCIL
95 SHERBURNE AVE S203
ST PAUL MN
55103

CRAVEN NORMAN
10637 THOMAS AVE S
BLOOMINGTON MN
55431

DAHLKE LOIS M
118 S EAGLE ST
BELLE PLAINE MN
56011

DANKERS, KENNETH
1200 WEST FOURTH STREET
RED WING MN
55066

DANIELSON RODNEY L
418 AUDITORIUM
ST PAUL MN
55102

DICKINSON MRS JOANNE
BOX 1065
MARSHALL MN
56258

DIEHL JOHN
26 KENWOOD PKWY
ST PAUL MN
55105

DOUGLAS BELL ET AL
2212 AM.NATL BK BLDG
ST PAUL MN
55102

DOW CHEMICAL
47 BLDG
MIDLAND MI
48640

DZUGAN KEN ST PAUL PLANNING
421 WABASHA ST
ST PAUL MN
55102

EICHTEN DANIEL
3794 HAZEL
WHITE BEAR LK MN
55110

ELDER DR JAMES B
11140 WASHBURN AVE SO
BLOOMINGTON MN
55431

ASSOCIATED GEN CONTROF MN
48 E 8TH STREET
ST PAUL MN
55101

ASSN OF MINN COUNTIES
55 SHERBURNE AVE #203
ST PAUL MN
55103

ANDERSON GRAHAM
951 E HENN
MPLS MN
55414

ANDERSON JAMES
7703 NORMANDALE RD
MPLS MN
55435

BABCOCK LOCHER NELSON ET AL
118 E MAIN ST
ANOKA MN
55303

BARTHOLOW HAROLD E FIRE CHF
2600 109 AVE N W
COON RAPIDS MN
55433

BATES DENNIS
446 STATE OFF BLDG
ST PAUL MN
55155

BEGALKA D REV
212 N ELK ST
BELLE PLAINE MN
56011

BEMIDJI STATE COLLEGE
PLACEMENT BUR. J. C. BRADY
BEMIDJI MN
56601

BERGSETH THOMAS
1011 NICOLLET MALL
MPLS MN
55403

BERGUSON & LOFGREN
MN GAS 700 LINDEN W
MPLS MN
55403

BLANDIN PAPER CO W J LICKE
115 1ST ST SW
GRAND RAPIDS MN
55744

BLOMQUIST BARRY L

NORTH BRANCH MN
55056

BOWMAN & BRUNS ATTN R MASON
1616 PIONEER BLDG
ST PAUL M
55101

BREHL JAMES W
332 HAMM BLDG
ST PAUL MN
55102

BRIGHAM E M III
RR4
RED WING MN
55066

BROEKER JOHN
2850METRO DR. SUITE 504
BLOOMINGTON MN
5542C

BROWN H D
4961 KINGSBERRY LANE
MINNETONKA MN
55343

BRUBACHER RICHARD COMM ADM
208 ADM BLDG
ST PAUL MN
55101

BURGER ALBERT
600 DEGREE OF HONOR BLD
ST PAUL MN
55101

BUR. ENGR. IND. DIV. MR. KIBIGER
219 N. 2ND ST.
MPLS. MN

CABLE COMM SYST-H SARRAZIN
BOX 777
HECTOR MN
55342

ASSN RESIDENCES FOR RETARDED
459 RICE SUITE 301
ST PAUL MN
55103

AUTOMOBILE MFRS ASSN INC
55 SHERBURNE AVE
ST PAUL MN
55103

ANDERSON HERBERT
418 8TH ST. SO.
VIRGINIA MN
55792

ANDERSON HAROLD
BOX 3047
MANKATO MN
56001

BADALICH JOHN P
2025 THOMPSON AVE
SO ST PAUL MN
55075

BARRETT FRED
ST LOUIS CO COURT HOUSE
DULUTH MN

BECK PAT
953 HYACINTH AVE
ST PAUL MN
55106

BEECHER EVERETT
10 10 1ST ST SO
HOPKINS MN

BENSONI PETER USW OF AM.
609 PROVIDENCE BLDG.
DULUTH MN

BERGERUD ALF
300 ROANOKE BLDG
MPLS MN
55402

BEST FLANAGAN ET AL
4040 IDS CENTER
MPLS MN
55402

BEUTEL ROBERT
2200 SILVER LAKE RD
NEW BRIGHTON MN
55112

BLOOMINGTON CITY CLERK
2215 W OLD SHAKOPEE RD
BLOOMINGTON MN
55431

BOLTON MALCOLM
422 ALDRICH AVE NO
MPLS MN
55405

BRICK PHILIP D
807 SELLWOOD BLDG
DULUTH MN
55802

BRIGGS & MORGAN - B F FRI
2200 W 1ST NATL BK BLDG
ST PAUL MN
55101

BROCKS WILLIAM F JR
854 MIDLAND BK BLDG
MPLS MN
55401

BROWN D M GOODRIDGE PUB S
IND DIST #561
GOODRIDGE MN
56725

BRUNING C.R.DEPT.CLINIC.EXP.
BURTON HALL
MPLS. MN
55455

BUCHHOLTZ CHARLES
5044 BRENT AVE E
INV GRV HTS MN
55075

BUR NATL AFFAIRS INC
1231 25TH ST NW
WASHINGTON DC
20037

BUSCH NOEL
3131 FERNBROOK LANE N
MPLS MN
55441

CAIN RUTH
730 E 38TH ST
MPLS MN
55407

CAIRNS JOHN A
47TH FLR IDS CENTER
MPLS MN
55402

SCHNEIDER & NEESER
706 1ST ST SO PO BX 876
WILLMAR MN
56201

SCHROEDER ALFRED H
2172 CARROLL AVE
ST PAUL MN
55104

SENATE COUN OFF ROOM 24
STATE CAPITOL
ST PAUL MN
55101

SENATE FINANCE COMMITTEE
113 STATE CAPITOL
ST PAUL MN
55101

SHARP BOB
4125 HIGHWOOD RD
ST LOUIS PK MN
55416

SHAW ROBERT M
616 MOBIL OIL BLDG
MPLS MN
55402

SIX EAST REG. DEV. COMM.
311 W 6TH ST
WILLMAR MN
56201

SIX W REG. DEV. COMM
128 W SORENSON
APPLETON MN
56208

SNELL LYN
BOX 314
EDEN VALLEY MN
55329

Snyder, Robt W.
c/o Agr & Applied Ec. Dept.
Rm. 248 C, Classroom Off. Bldg.
U of M
St. Paul, Mn. 55108

STANSFIELD ARLENE LAND OLKS
PO BOX 116
MPLS MN
55440

STATE BD VETERINARY EXAMI
C/O DR A C SPANNAUS DVM
WACONIA MN

STATE REGISTER
95 SHERBURNE, RM 208
ST PAUL MN
55103

STD AM LIFE & ANNUITY CO
3801 W 50TH ST
MPLS MN
55410

STUPKA & MOREM
MIDTOWN BLDG
AUSTIN MN
55912

SULLIVAN J KIRK
PO BOX 200
BOISE ID
83701

SWANSON BURT E
W-2162 1ST NATL BK BLDG
ST PAUL MN
55101

SWANSON DALE
P O BOX 339
FOREST LAKE MN
55025

SWEITZER R L HONEYWELL INC
2701 4TH AVE S
MPLS MN
55408

THOMPSON HESSIAN ET AL
1500 MIDWEST PLAZA BLDG
MPLS MN
55402

TIMESAVERS INC ATT R S VC
5270 HANSON COURT
MPLS MN
55422

UNION STOCK YARDS
ATTN PRES
SO ST PAUL MN
55075

SCHWERMAN EARL JR
1535 8TH AVE SE
ROCHESTER MN
55901

SCHWINN ROBT.P.
1400 SOO LINE BLDG.
MPLS. MN
55402

SELECTVISION INC FR VALENTIN
245 PARK AVE
NEW YORK NY
10017

SEMHSA R C MELIN
1903 S BDWY
ROCHESTER MN
55901

SENATE GOV OP COMM
RM 303 STATE CAPITOL
ST PAUL MN
55155

SHABATURA EUGENE H
2833 LAKE AVE SO
DULUTH MN
55811

SILVERMAN JUDITH
8545 W 28TH ST
ST LOUIS PARK MN
55426

SITE ENGINEERS INC
900 REDWELL LANE
APPLE VALLEY MN
55124

SMERIKA WN.
BOISE CASCADE PAPERS
INTL FALLS MN
56649

SMITH MICHAEL
1423 NEWTON AVE N
MPLS MN
55411

SODERBERG HAROLD J
1500 MIDWEST PLAZA.BLDG
MPLS MN
55402

SODERMAN ANTHONY
152 S PLAZA BLDG
MPLS MN
55416

STATE&FED ASSOC
1101 15TH ST NW_S.309
WASHINGTON DC
20005

STATE & FED ASSOCIATES
1101 15TH ST NW S 309
WASHINGTON DC
20005

STEELWORKERS CREDIT UNION
BOX 250
BABBITT MN
55706

STOLPESTAD BROWN & SMITH
1550 NW BK BLDG
ST PAUL MN
55101

SUMMIT NATL BANK D L MORRILL
205 AURORA AVE
ST PAUL MN
55103

SUSSEL CO.ATTN:TED SCHWENKER
1850 COMO AVE.
ST PAUL MN
55108

SWANSON GERALD H
212 CITY HALL
ROCHESTER MN
55901

SWANSON MORTIMER C
5824 FRANCE AVE S
EDINA MN
55410

TATE VERN 3M CO
3M CENTER 220/6W
ST PAUL MN
55101

THOMPSON CONRAD
1107 23RD ST NW
ROCHESTER MN
55901

TOUCHE ROSS & CO K H STOCKE
780 NORTHSTAR CNTR
MPLS MN
55402

TWIN CITY RETAIL DRUGGIST AS
2388 UNIV AVE
ST PAUL MN
55104

PROCTOR&GAMBLE L THEOHAROUS
IVORYDALE TECH CENTER
CINCINNATI OH
45217

PULSCHER RBT SPRINGSTED INC
813 OSBORN BLDG
ST PAUL MN
55102

RADMAN RICHARD-LABOR TEMPLE
418 AUDITORIUM
ST PAUL MN
55102

RALPH BURKE ASSOCIATES
7710 COMPUTER =S101
MPLS MN
55435

RAUENHORST CORP-C ANDERSON
7900 XERXES S. S-2200
MPLS MN
55431

REAGAN MICHAEL
% MINN LEARNING CTR
BRAINERD MN
56401

RED OWL STORES INC
215 E EXCELSIOR AVE
HOPKINS MN
55343

REGION FIVE REG. DEV. COMM.
102 6TH ST N
STAPLES MN
56479

RENNER R.H. ST PAUL AREA CC
300 OSBORN BLDG.
ST PAUL MN
55102

RENQUIST ARTHUR NSP CO
414 NICOLLET MALL
MPLS MN
55401

RIEKE DAVID R
P O BX 509
THIEF RIV FLS MN
56701

RIERSON G
1335 WHITE BEAR AVE
ST PAUL MN
55106

ROBERTS DR ALAN
BOX 297 MAYO U OF M
MPLS MN
55455

ROBERTS DAVID E
1260 NW NATL BK BLDG
ST PAUL MN
55101

RUDY FLOYD
118 AVE C
CLOQUET MN
55720

SATHRE, HARVEY
375 MARION STREET
ST PAUL MN
55103

SAX DOVE & STENSON
310 ENDICOTT BLDG
ST PAUL MN
55101

ST PAUL BUR HLTH DR P COX
555 CEDAR ST
ST PAUL MN
55101

ST PAUL FOOD RETAILERS ASSN
1220 ARCADE
ST PAUL MN
55106

SCHLICHT REV ROBT
611 W MAIN ST
BELLE PLAINE MN
56011

SCHMIDT D R MN ASSN REALTORS
6101 WAYZATA BLVD
MPLS MN
55416

SCHMIDT WARREN WELLCOME MHS
GARDEN CITY MN
56034

SCHNEIDER MAHLON
GREEN GIANT
LESUEUR MN
56058

RANALLO CLARENCE
800 CENTRAL AVE N E
MPLS MN
55413

RAMSEY CO MEDICAL SOC
508 AM NATL BK BLDG
ST PAUL MN
55101

REARDON MRS HELEN
1125 S E 6TH ST
WILLMAR MN
56201

REID DAVID H
6469 N GRAHAM RD
INDIANAPOLIS IN
46220

REGION NINE DEV. COMM.
709 N FRONT ST
MANKATO MN
56001

REINO O LAINE 3M COMPANY
3M CENTER
ST PAUL MN
55101

RICHARDSON THOS
7851 METRO PKWY S 103
MPLS MN
55420

RICHARDS MONTGOMERY ET AL
1430 RAND TOWER
MPLS MN
55402

ROE DAVID
175 AURORA
ST PAUL MN
55103

ROBBIE JOSEPH
904 CARGILL BLDG NO CTR
MPLS MN
55402

ROSS ALFRED
6356 WARE RD
LINO LAKES MN
55014

ROSS ROY J
CLK TREAS
LITCHFIELD MN
55355

SAN SIMEON DEVELOP CORP
OLD 1ST STATE BK BLDG
PAYNESVILLE MN

SANFORD S M
7000 PORTLAND AVE
RICHFIELD MN
55423

SE MN REG DEV COMM
301 MARQ BK BLDG
ROCHESTER MN
55901

ST PAUL ASSN PLBG HTG MEC
614 AM NATL BK
ST PAUL MN

SW REGIONAL DEV COMM
2811 BDWY
SLAYTON MN
56172

SCARBOROUGH WILLIAM
DIV.ED. U.M.
MORRIS MN
56267

SCHMIDT H W TCHRS RETIREMENT
302 CAPITOL SQ BLDG
ST PAUL MN
55101

SCHMIDT LARRY WCCO-TV NEW
50 S 9TH ST
MPLS MN
55402

SCHUTZ LINDA
RM 328 CAPITOL BLDG
ST PAUL MN
55155

SCHWARTAU NEAL METH HOSP
201 W CENTER ST
ROCHESTER MN
55901

MURPHY DIANA E
4200 IDS-LINDQUIST VENN
MPLS MN
55402

NATL COUNCIL JEWISH WOMEN
4330 CEDAR LK RD
MPLS MN
55416

NATL FAMILY INS CO
2147 UNIV AVE
ST PAUL MN
55114

NEDELL HAROLD - MEINEKE
6300 W LOOP S SUITE 200
BELLAIRE TX
77401

NEREN MADONNA
376 NEAL AVE S
AFTON MN
55001

NO SUB MONTESSORI-S SADDLER
2487 HELEN COURT
NO ST PAUL MN
55109

NORTH CENTRAL ELEC ASSN
PO BOX 202
BATTLE LAKE MN
56515

NURSING HOME ADMRS BD EXAMRS
RM 340 717 DELAWARE SE
MPLS MN
55414

NURSING HOME RES ADV CO.
111 E FRANKLIN S210
MPLS MN
55409

NW REG. DEV. COMM
425 WOODLAND AVE
CROOKSTON MN
56716

NYQUIST DEAN A
3707 53RD PL N
BROOKLYN CTR MN
55429

OFFICE OF THE GOVERNOR
130 STATE CAPITOL
ST PAUL MN
55101

OLD COLONY GAS & OIL COMP
17TH AVE N AT 2ND ST
MPLS MN
55411

OSTRUM DONALD E
PO BOX 33163
COON RAPIDS MN
55433

OTTER TAIL POWER CO.
215 S. CASCADE ST.
FERGUS FALLS MN
56537

PAYNE COL ALVIN

DEGRAFF MN
56233

PAYNE WM B
2400 FIRST NATL BK BLDG
MPLS MN
55402

PHAR MFGRS ASSN WM D PATTON
1155 15TH ST NW
WASHINGTON DC DC
20005

PHILLIPS LEGISLATIVE SERV
459 RICE ST
ST PAUL MN
55103

PORTER DAVID
5217 27TH AVE S
MPLS MN
55417

PORTER LYLE O

TRACY MN
56175

POYZER ROBT
BOX 675
FERGUS FALLS MN
56357

PRAUSE JOS.C.
2220 105TH AVE.N.W.
COON RAPIDS MN
55433

MPLS TRIBUNE CITY DESK
425 PORTLAND AVE
MPLS MN
55415

MT OLIVET ROLLING ACRES
R 1 BOX 576
EXCELSIOR MN
55331

NASS GEO V HENN CO GEN HOSP
5TH AND PORTLAND AVE
MPLS MN
55415

NATL CAR RENTAL ATT D MITZEL
5501 GREEN VALLEY DR
MPLS MN
55437

NAT'L SOLID WASTES-R. GRASSO
1730 RHODE ISLAND AV.NW
WASHINGTON DC
20036

NCEC INC C/O DR DAHLBERG
CONCORDIA COLLEGE
MOORHEAD MN
56560

NEUMAN RALPH W
RT 2 BOX 125
EMBARRASS MN
55732

NIELSEN STOCK & BLACKBURN
415 730 BLDG
MPLS MN

NUGENT, CYNTHIA L.
3581 OWASSO ST #209
ST PAUL MN
55112

NW COUNTRY ELEVATOR ASSN
802 GRAIN EXCH BLDG
MPLS MN
55415

NUTTER JULIA
743 W MONTANA
ST PAUL MN
55117

NW BELL TEL CO LEGAL DEPT
224 S 5TH ST RM 2000
MPLS MN
55402

O'BRIEN J.DENNIS
1100 1ST NATL.BANK BLDG
MINNEAPOLIS MN
55402

OLOFSON ARTHUR MBO & MAINC
927 SOO LINE BLDG
MPLS MN
55402

OLSON KATHLEEN
192 SEYMOUR AVE SE
MPLS MN
55914

PATTISON ORVIS
BOX 645
WILLMAR MN
56201

PETERSON GARY
854 MIDLAND BK BLDG
MPLS MN
55401

PFEIFER AND SHULTZ, INC
1433 UTICA AVE S
MPLS MN
55416

PINNETTI NICK M HALEY & ASS.
40 CENTRAL PARK S
NEW YORK NY
10019

POPOVICH PETER S
314 MINN BLDG
ST PAUL MN
55101

PORT AUTH CITY OF ST PAUL
330 MINNESOTA BLDG
ST PAUL MN
55101

POSS DONALD G
6301 SHINGLE CREEK PKWY
BROOKLYN CTR MN
55430

ALBERT,AA CALDER CORP
366 JACKSON ST
ST PAUL MN
55101

ALLENDORF MARSHALL
220 GRAIN EX 400 S 4TH
MPLS MN
55415

AMER CAMPING ASSN
3639-21/2 ST N.E.
MPLS MN
55418

AM INST PROF GEOLOGISTS
2201 PRINCETON AVE
ST PAUL MN
55105

ANCHOR BLOCK COMPANY
PO BOX 3360
ST PAUL MN
55165

ANDERSON MARY
4425 RUTLEDGE AVE
EDINA MN
55436

ANDERSON STANFORD P
14600 MINNETONKA BLVD
MINNETONKA MN
55343

ANDREW MARK STATE SENATE
235 STATE CAPITOL
ST PAUL MN
55155

ANTHONY DICK WDSM RADIO
230 E SUPR ST
DULUTH MN
55102

ANTI-TRUST DIV.ATTY GEN.
160 STATE OFF BLDG
ST PAUL MN
55155

ARNOLD ROBERT MESPA
41 SHERBURNE
ST PAUL MN
55103

ARROWHEAD REG. DEV COMM.
211 W 2ND ST
DULUTH MN
55802

ARROWHEAD REGIONAL DEV COMM
200 ARROWHEAD PLACE
DULUTH MN
55802

ARVER JOHN A
2467 COHANCY
ST PAUL MN
55113

ASMUSSEN,DENNIS,MPIRG
3036 UNIV AVE SE
MPLS MN
55414

MINN COUNCIL STATE EMP NO 6
475 RICE ST
ST PAUL MN
55103

MINN DEPT HEALTH J C MCKA
717 DELAWARE S E
MPLS MN
55440

MINN HEREFORD-LJ SCHAFER

BUFFALO LAKE MN
55314

MINN. HOTEL & MTR. ASSN
2001 UNIVERSITY AVE
ST PAUL MN

MINN LAND USE COMMITTEE
4344 IDS CENTER
MPLS MN
55402

MINN LP GAS ASSN
7515 WAYZATA BLVD 106
MPLS MN
55426

MINN PETROLEUM COUNCIL
1020 NORTHERN FED BLDG
ST PAUL MN
55102

MINN POLLUTION CONTROL AG
1935 W CO RD 82
ROSEVILLE MN
55113

MINN RESTAURANT ASSN
2001 UNIVERSITY AVE.
ST PAUL MN
55104

MINN RETAIL FED INS
131 METRO SP
ST PAUL MN
55101

MINN SOC CERTIFIED PUB ACCTS
1102 WESLEY TEMPLE BLDG
MPLS MN
55403

MINN STATE BAR ASSN
100 MINN FED BLDG
MPLS MN
55402

MINN STATE MED ASSN
375 JACKSON ST
ST PAUL MN
55101

MINN STATE RETIREMENT SYS
529 JACKSON ST
ST PAUL MN
55101

MINN.TURKEY GROWERS ASSN
2383 UNIV AVE
ST PAUL MN
55114

MINN VETERANS MED ASSN
2175 W HWY 36
ROSEVILLE MN
55113

MN. ASN.C&IND H.D.PETERSON
480 CEDAR ST.
ST.PAUL MN
55101

MN AFL-CIO L.O. LASHOMB
175 AURORA
ST PAUL MN
55103

MN PUB INT RESEARCH GROUP
3036 UNIV AVE SE
MPLS MN
55414

MN SOC SERV ASS J HOCD
614 PORTLAND
ST PAUL MN
55102

MOOD R BLOOMINGTON HLTH DEPT
10200 PENN SO
BLOOMINGTON MN
55431

MORTON BUILDINGS INC
R #1
FOLEY MN
56329

MPLS CITY ATTORNEY
325M CITY HALL
MPLS MN
55415

MPLS STAR PRESS ROOM
STATE CAPITOL
ST PAUL MN
55101

MINN COMM FOR HANDICAPPED
METRO SQ 492 7TH & ROBT
ST PAUL MN
55101

MINN COMMUNITY DEVELOP SERV
512 ROSSMOR BLDG
ST PAUL MN
55101

MINN FARMERS UNION PRES OFF
1275 UNIV AVE
ST PAUL MN
55104

MINN FOOD RETAILERS ASSN
555 WABASHA
ST PAUL MN
55101

MINN HOUSING INST N T CARTER
7801 METRO PKWY
MPLS MN
55420

MINN HWYS MANAGEMENT SERVICE
407 HWY BLDG
ST PAUL MN
55101

MINNE MINE CREDIT UNION
3000 HUDSON PK S 100
ST PAUL MN
55119

MINN.MTR.TRANSP. .J.N.DENN
1821 UNIV.
ST.PAUL MN
55104

MINN POULTRY & HATCHERY ASSN
BOX 158
MADELIA MN
56062

MN REP STATE CENTRAL COMM
555 WABASHA AVE
ST PAUL MN
55102

MINN RETAIL HARDWARE ASSN
3033 EXCELSIOR BLVD 313
MPLS MN
55416

MINN SOCIETY ARCHITECTS AIA
NW NATL BK BLDG
ST PAUL MN
55101

MINN STATE BD DENTISTRY
717 SE DELAWARE
MPLS MN
55414

MINN STATE BD PHARMACY
717 DELAWARE ST SE #351
MPLS MN
55414

MINN TEAMSTERS CREDIT UNION
2021 HENN AVE E
MPLS MN
55413

MINN TBR PRODUCERS ASSN
200 CHRISTIE BLDG
DULUTH MN
55802

MINN WATER RESOURCES BD
RM 206 555 WABASHA ST
ST PAUL MN
55102

MINN-WISC BOUNDARY AREA COMM
600 2ND ST
HUDSON WI
54016

MN.BD OF NURSING
717 DELAWARE ST SE
MPLS MN
55414

MN ELECTRICAL ASSN
3100 HUMBOLT SO
MPLS MN
55408

MN STATE SER BLIND-K NATARDY
1745 UNIVERSITY AVE
ST PAUL MN
55104

MOFFITT R C
RM 301 M MPLS CITYHALL
MPLS MN
55415

MPIRG
BOX 45 ST MARYS COLLEGE
WINONA MN
55987

MPLS ASSN RETARDED CITIZENS
3100 W LAKE ST
MPLS MN
55416

LARSON HANS P DIV HOSP SERV
717 DELAWARE ST SE
MPLS MN
55440

LEAGUE MN MUNIC
300 HANOVER 480 CEDAR
ST PAUL MN
55101

LEWIS DR.G.M JR.
ABBOTT 110 E 18TH ST
MPLS MN
55403

LIBBEY LEONARD
BOX 17011 NOKOMIS STA
MPLS MN
55417

LOOS CALVIN J
6809 LYNDALE AVE SO
MPLS MN
55423

LOWE DOUG
2701 N LEXINGTON AVE
ROSEVILLE MN
55113

MANKATO STATE STUDENT ASSN
BOX 58 MANKATO COLLEGE
MANKATO MN
56001

MANSFIELD LARRY HCARC
1800 CHICAGO AVE S
MPLS MN
55404

MASTOR & MATTSON LTD
315 PEAVEY BLDG
MPLS MN
55402

MAUL WARREN E
320 S 4TH ST
MPLS MN
55415

MCFADDEN G H DISPATCH-PRESS
55 E 4TH ST
ST PAUL MN
55101

MCKIBBON MRS SHIRLEY
11 EVERGREEN LN
BABBITT MN
55706

MET. WASTE CONTCL COMM.
350 METRO SQ BLG
ST PAUL M
55101

MEIEROTTO, JOAN
1794 SO LEXINGTON
ST PAUL MN
55118

METROPOLITAN COUNCIL LIBRARY
300 METRO SQUARE
ST PAUL MN
55155

MEYER HERBERT
10824 ZENITH AVE S
BLOOMINGTON MN
55431

MILLER RICHARD A
1020 PLYMOUTH BLDG
MPLS MN
55402

MILLER TOM
2311 PILLSBURY AVE S
MPLS MN
55404

MINN ASSN COOPERATIVES
55 SHERBURNE AVE
ST PAUL MN
55103

MINN ASSN ELEC COOPERATIV
4901 W 77TH ST
MPLS MN
55435

MINN ASSN WATERSHED DIST'S

ADA MN
56510

MINN AUTOMOBILE DEALERS A
GRIGGS MIDWAY BLDG
ST PAUL MN
55104

LAPP LAZAR LAURIE ET AL
1200 BUILDERS EXCHANGE
MINNEAPOLIS MN
55402

LARSON C L
3800 MINNEHAHA AVE SO
MPLS MN
55406

LEAGUE WOMEN VOTERS OF MINN
555 WABASHA
ST PAUL MN
55102

LEG.REF.LIB-Z. DEWITT
RM 111 STATE CAPITOL
ST PAUL MN
55155

LINDALL & JONATHAN DEVELOP.
VILLAGE ONE CENTER
CHASKA MN
55318

LOCKNER GARY
R R 1 BOX 23
BAUDETTE MN
56623

LUTH SOC SERVICE OF MN
2414 PARK AVE
MPLS M
N5540

LYNCH DONALD SIBLEY CO
184 E 6TH ST
ST PAUL MN
55102

MALONE E I COMM LABOR & INDU
444 LAFAYETTE RD 5TH FL
ST PAUL MN
55101

MANKATO STAT STUDENT SENATE
CENTENNIAL STUDENT UN
MANKATO MN
56001

MANTHEY T J PICKANDS MATHER
1100 SUPERIOR AVE
CLEVELAND OH
44114

MARRINAN MARGARET M
1117 COMMERCE BLDG
ST PAUL MN
55101

MAYO FOUNDATION G ORWOLL
200 FIRST AVE NW
ROCHESTER MN
55901

MCDONALD PHILIP M
2077 SELBY AVE
ST PAUL MN
55104

MCLELLAN LARKIN
215 ADM BLDG ST CAPITOL
ST PAUL MN
55101

MECCA
867 GRAND AVE
ST PAUL MN
55105

MERRITT GRANT POLLUTION CONT
1935 W CO RD 32
ROSEVILLE MN
55113

MET TFR MEN ASSN A ROSENTHAL
1821 UNIV AVE
ST PAUL MN
55104

MIDLAND GLASS-HD SPURLING
PO BOX 69
SHAKOPEE MN
55379

MILLER PAUL J PHARMACY SERV
ST MARYS HOSP
ROCHESTER MN
55901

MINN APT ASSN
GRIGGS-MIDWAY BLDG
ST PAUL MN
55104

MINN ASPHALT PAVEMENT ASSN
555 WABASHA RM 209
ST PAUL MN
55102

MINN. ASSN. PET RETAILERS
1115 2ND AVE. SO.
MINNEAPOLIS MN
55403

MINN ASSN VOL SOC SERVICE
1821 UNIV SUITE 389
ST PAUL MN
55114

INS FED OF MINN
902 SOO LINE BLDG
MPLS MN
55402

INTERSTATE POWER RW STEELE
1000 MAIN ST
DUBUQUE IA
52001

IZAAK WALTON MN DIV
111 E FRANKLIN RM-210
MPLS MN
55404

JENCS INC
525 LAKE AVE SO
DULUTH MN
55801

JENSEN ARTHUR,CITY CLK
2215 W OLD SHAKOPEE RD
BLOOMINGTON MN
55431

JOHANSEN BUS SERV INC
19 DAYTON RD
CHAMPLIN MN
55316

JOHNSON & SANDERSON
ST MARYS HOSPITAL
ROCHESTER MN
55901

JOHNSON LEROY
9939 BLUEBIRD ST NW
COON RAPIDS MN
55433

JOHNSON M.D. FRUNDT & FRUNDT

BLUE EARTH MN
56013

KABLE RICHARD W

BETHEL MN
55006

KAVANEY RICHARD
1220 NORTHERN FED BLDG
ST PAUL MN
55102

KEILY DANILE
3549 V2 PLEASANT AVE
MPLS MN
55408

KIMBALL ROBERT
647 CAPITOL SQ BLDG
ST PAUL MN
55101

KLUZ STEVEN J
1910 1ST NATL BK BLDG
MPLS MN
55402

KNAPP J A
RM 3 CAPITOL
ST PAUL MN
55155

KNUTSON R N GRANNIS ETAL
F J SCHULT BLDG
ST ST PAUL MN
55075

KNUDSON ROBT
4375 BROWNDALE AVE
MPLS MN
55424

KRAMER ERNEST W
717 DELAWARE ST SE
MPLS MN
55440

KROEGER CHARLES
122 NW 7TH STREET
FARIBAULT MN
55021

KUHL CARL
4421 4TH ST NE
COL HEIGHTS MN
55421

KVB ENGINEERING INC
600 S CO RD 18
MPLS MN
55426

LAKE SUPERIOR INDUSTRIAL BUR
828 FIRST AM. BK. BLDG.
DULUTH MN
55802

LANAHAN E F - SIBLEY CO
184 E 6TH ST
ST PAUL MN
55101

IUOF LOC 49 CHAS SWENSON
2580 UNIV AVE
ST PAUL MN
55101

IVERSON DR JOS DEPT ED
ST OLAF COLLEGE
NORTHFIELD MN
55057

JACKMAN DONALD G
4023 E LAKE ST
MPLS MN
55406

JAIN NIRMAL ENIV PROCESS
1220 GLENWOOD AVE
MPLS MN
55405

JENSEN CARL A
127 E MAIN ST
SLEEPY EYE MN
56085

JENSEN MRS GAYNOLD
111 WEST 107TH ST
MPLS MN
55420

JOHNSON CLARENCE IBEW LU 292
3615 37TH AVE S
MPLS MN
55406

JOHNSON G ROBERT
4344 IDS CENTER
MPLS MN
55402

JOHNSON LANCE J
265 S LAFAYETTE RD
ST PAUL MN
55107

KEABLE MIKE
909 6TH AVE N
ST CLOUD MN
56301

KEENAN RICHARD J
4444 IDS BLDG
MPLS MN
55402

KJERVIK DIANE
4302 POWEL HALL U OF M
MPLS MN

KLOSTER MARION PEAVEY CO
730 2ND AVE S
MPLS MN
55402

KNOPP TIMOTHY
COLLEGE FORESTRY U OF M
ST PAUL MN
55108

KNUTSON DR KEITH, BIOLOGY
ST CLOUD STATE
ST CLOUD MN
56301

KOLLER MR & MRS ERWIN A
1568 DULUTH ST
ST PAUL MN
55108

KOPP MRS VERNON
2050 65TH ST E
INVER GR HGHT MN
55075

KRONLOKKEN J E
10048 NORD RD
BLOOMINGTON MN
55437

KROON H CLIFTON
210 E WALNUT
MANKATO MN
56001

LABELLE JUANITA MRS
5816 AQUILA AVE NO
NEW HOPE MN
55428

LANGVIN DAVID
7500 80TH ST S
COTTAGE GROVE MN
55016

LANSING & OAKES
400 SIBLEY ST
ST PAUL MN
55101

VAN EVERA MURDT ET AL
700 TORREY BLDG
DULUTH MN
55802

VERRILL JOHN E
DEPT SECONDARY ED UOF M
DULUTH MN
55812

VIITALA, W.C. HONEYWELL
HONEYWELL PLAZA
MPLS MN
55408

VILLAGE OF WOODBURY
2100 RADIO DRIVE
WOODBURY MN
55042

VOLDNESS PERRY
IDS 8TH & MARQUETTE
MPLS MN
55402

VOSS REV GORDON O
11120 NE 7TH ST
BLAINE MN
55434

VOS LEROY
2137 BURNS AVE
ST PAUL MN
55119

WALD JEAN
5746 SANDER DR
MPLS MN
55417

WALTERS THOS H
4510 W 77TH ST STE 235
MPLS MN
55435

WANQUIST ALLEN
RM 252 FEDERAL BLDG
ST PAUL MN
55101

WATERS, DONNA M.
110506 WINDMILL COURT
CHASKA MN
55318

WELK G V NORTHERN STATES
414 NICOLLET MALL
MPLS MN
55401

WELLINGTON R R SKELLY OIL
PO BOX 1650
TULSA OK
75102

WEST CENTRAL REG. DEV.
ADM BLDG, COMMUNITY COLL
FERGUS FALLS MN
56537

WESTIN CHAS W
220 MEDICAL ARTS BLDG
DULUTH MN
55802

WHITING RALPH
555 WABASHA SUITE 204
ST PAUL MN
55102

WHITLOCK A G
ECON LAB OSBORN BLDG
ST PAUL MN
55102

WILCOX J PATRICK
1220 NORTHERN FED BLDG
ST PAUL MN
55102

WM.MITCHEL COLLEGE LAW LI
2100 SUMMIT AVE.
ST.PAUL MN
55105

WILEY ENTERPRISES
101 5TH AVE SE
CSSEO MN
55369

WILLIAMS THOS W
4915 W 35TH ST
MPLS MN
55416

WILSON R GARY PPG INDUSTR
1 GATEWAY CENTER
PITTSBURGH PA
15222

WIS FEEDER PIG MARKET CO-

FRANCIS CREEK WI

WOLKERSTORTER THEODORE
676 17TH AVE NW
NEW BRIGHTON MN
55112

WOZNIAK D D
401 FIRST FED BLDG
ST PAUL MN
55101

WYANT CLINTON W ATTY

ATKIN MN
56431

ZIMMERMAN & OFFERMAN
CAMBRIDGE STATE HOSP
CAMBRIDGE MN
55008

Welfare Rights Organization, Stephen Parsons, 1118 Newton Ave. N, Mpls 55411

West Central Mental Health Center, 323 W. 6th St., Willmar 56201

Public Relief, Bd of Public Welfare, Att: Dir. Jensen, 250 S. 4th St., Mpls.

Rosenthal, Robert F., Hospital Adm. 2110 E. Center St., Rochester 55901

Sister Letitia M. Close, B.V.M., 415 Summit Ave., St. Paul 55102

Southwestern Mental Health Center, 306 N. McKenzie St., Luverne 56156

Upper Mississippi Mental Health Ct., Att: Dr. Howard C. Reid, 510 Beltrami, Bemidji

Usher, Janice, Isanti Co., Public Health Nursing Serv., 237 SW 2nd, Cambridge 55008

Veterans Affairs, Veterans Service Bldg., St. Paul 55155

inn,Assn for Ed. of Young Children, Rm 373 S. Griggs Midway, 1821 Univ. St. Paul 55104

inn,Assn of Health Care Facilities, 2850 Metro Dr., Suite 431, Mpls. 55420

inn.Legislative Comm of Blind, 1605 Eustis, St. Paul, 55108

inn.Recipients Alliance, 116 E. 32nd St., Mpls. 55404

inn,State Pharmaceutical Ass. 2388 Univ. Ave., St. Paul 55104

inn.Valley Soc. Adaptation Center, Att: M. Jones 100 Freeman Dr., St. Peter 56082

Mitchell, Malcolm, Met Health Bd., 300 Metro Sq. Bldg. 7th & Robt., St. Paul

Moratzka, Timothy 1304 Vermillion St., Hastings 55033

Neff, Walter S. (Dr.) Virginia 55792

Northland Mental Health Center, 415 S. Pokegema, Grand Rapids 55744

N.W. Mental Health Center, Inc., Box 603, Crookston 56716

Friesen, Miller A., Hiawatha Valley Mental Health Ct., Box 619, Winona 55987

Goldberg, Paula, 5315 James Ave. S., Mpls 55419

Henn Cty Family Day Care Ass., 404 E. 48th St., Mpls 55409

Hiawatha Valley Mental Health Center, 76 E. 4th St., Winona 55987

Karlins, Miriam, 6450 York Ave. S., Mpls. 55435

Kurtz, Kirsten (Mrs.) MN Nurses Ass., 1821 Univ. Ave., St. Paul 55104

Legal Aid Society, 501 Park Ave., Mpls 55415

Local #34, AFSC & ME, Box 2016, Commerce Sta., Mpls 55415

Long, Nicholas (Dr.), 407 Medical Arts Bldg., Mpls. 55402

Lutheran Soc. Service., Att: H.L. Paulsen, 2414 Park Ave. S., Mpls. 55404

Metro Community Health Consortium, 1729 Nicollet Ave., Mpls 55403

Minneapolis & Henn Cty Mental Health Clinic, 619 S. 5th St., Mpls 55415

Allin, Kent, Welfare Advocacy Unit., 370 Selby Ave., St. Paul 55102

Anoka Co. Comprehensive Health Dept., Courthouse, Anoka 55303

Blade, Joe, Mpls. Star., 425 Portland Ave., Mpls.

Children's Placement Service, Amherst H. Wilder Foundation, 919Lafond Ave. St. Paul 55104

Community Mental Health Bd. of the Northern Pines Mental Health Ct., 103-105 1st St. S.E., Little Falls, 5634

Cooper, Laura Prof.,U of M Law Sch, Rm 125 Fraser Hall, Mpls 55455

Curtis E. Louis (Cr.) Prof. Education U M, Morris, 56267

Dale, Randy L, Immanuel-St. Joseph Hospital, Mankato 56001

Damon Corp., Att: B.G. Goodman, 115 4th Ave., Needham Heights, MA 02194

Deephaven Montessori School, Inc., 188 S. Circle A Drive, Wayzata 55391

NAME	ADDRESS	CITY	STATE	ZIP
Snyder, Robt W. c/o Agr & Applied Ec. Dept. Rm. 248 C, Classroom Off. Bldg. U of M St. Paul, Mn 55108	xxx letter			
CARTER LOCEY & ASSOC	2353 N RICE ST	ST PAUL	MN	55113
PETERSON G	1335 WHITE BEAR AVE	ST PAUL	MN	55106

TYPE ENVELOPES

	ADDRESS	CITY	STATE	ZIP
[illegible], Robt W. [illegible] Agr & Applied Sc. Dept. Rm. [illegible] C, Classroom Off. Bldg. U of M St. Paul, Mn 55108	see letter			
CARTER LOCEY & ASSOC	2353 N RICE ST	ST PAUL	MN	55113
PETERSON G	1335 WHITE BEAR AVE	ST PAUL	MN	55106

TYPE ENVELOPES