CARERULEBOOK MINNESOTA ASSISTED LIVING MANUAL

Intake questionnaire

This questionnaire lists every question the CareRulebook Minnesota assisted living manual builder asks: 26 decisions and 68 details, 94 questions in all, including the ones the builder only asks after certain answers. Use it to collect everything from the facility before you open the builder. You do not need to buy the manual first.

How to use it

1. Settle the decisions in Part 1 with the facility's licensee first. They change what the manual says, not just the names in it.
2. Collect the details in Part 2. Questions marked "Only asked if" depend on an earlier answer; skip them when that answer does not apply.
3. Type the answers into the builder at https://www.carerulebook.com/us/minnesota/assisted-living/manual. The builder asks the questions in the same order, step by step: each step asks its decisions first, then its details. The question numbers (Q1, Q2 and so on) are this questionnaire's own, to help you keep track.
4. Part 3 shows a completed example for a fictional facility and what those answers do to the manual.

Good to know

- Every question carries the same help text as the builder, including the rule references the builder gives.
- You can pay before every answer is in. Only the facility's name is needed, and the builder checks a few things first: You chose 1 to 5 residents: enter a number from 1 to 5. You chose 6 residents: enter 6. You chose 7 to 10 residents: enter a number from 7 to 10. You chose 11 or more residents: enter a number of 11 or more. Type phone numbers in full, with the area code. Type day counts as whole numbers. Any other required answer left blank prints as a gap in square brackets (for example [Licensee (the person or organization that holds or will hold the license)]) for you to fill in later, and the order page lists them. A question that says what prints if left blank is never a gap.
- After buying, you can change your answers and download again for 12 months, so a new manager or phone number does not mean buying again. One purchase covers one facility, so its name, address can only take small corrections, such as a typo.
- Whatever the manual says, the facility is expected to do. Choose what the facility will really do, not what sounds best.
- This questionnaire and the manual are not legal advice.

- This checklist was written from the Minnesota laws and rules it cites. It is not legal advice and it is not a contract or a legal notice. Have a Minnesota lawyer review your assisted living contract and your termination notices before you use them. (Policy 3.2, the assisted living contract checklist, and Policy 3.9, terminations and relocation.)
- Your clinical nurse supervisor reviews, directs and adopts the clinical policies before you use them. Minnesota puts a registered nurse at the center of assisted living care: every facility has a clinical nurse supervisor, an RN assesses each resident before move-in, and medication policies must be developed under the supervision and direction of a registered nurse, licensed health professional or pharmacist, and treatment policies under a registered nurse or licensed health professional. CareRulebook checks every rule the manual quotes against the official text (Rule-verified); the nursing judgment stays with your RN, who signs the adoption block at the end of each clinical policy. Policy 1.1 sets out the steps.
- Not covered: DHS customized living requirements. This manual covers MDH's assisted living licensing rules (Minn. Stat. ch. 144G and Minn. R. ch. 4659), including the waiver and housing support statements your contract must contain. It does not cover DHS enrollment, customized living service rates and billing, the home and community-based services settings rule, or your residents' support plans. Those come from DHS and the lead agency.

Names to have ready

The manual names these people, so agree who they are before you start:

- Licensee (the person or organization that holds or will hold the license)
- Authorized agent
- Managing agent (the company that manages the facility)
- Licensed assisted living director
- Clinical nurse supervisor (registered nurse)
- Who provides or oversees dementia training
- Dementia care consultant
- Pharmacy the facility works with

PART 1

Part 1. Decisions to settle first

These 26 questions change what the manual says. Each one shows the options the builder offers (the builder's default is marked), when it is asked, and which policies it changes. Tick one option for each. The question numbers follow the builder, so they skip where a step asks its details (Part 2) between its decisions and the next step's.

Builder step: Your facility

Q1. Are you applying, buying a licensed facility, or already licensed?

A license cannot be transferred: a buyer applies for a new license and gives MDH 60 days' notice (Minn. Stat. 144G.19). Already licensed? Policy 1.1 then ends with a What to check now table.

☐ Applying for a new (provisional) license (builder default)
☐ Buying a licensed facility (a new license for the new licensee)
☐ Already licensed (updating our manual)

What it changes:

- Changes the wording of 5 policies:
  - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
  - Policy 1.2 Provisional license, notice of the first resident, surveys, correction orders, renewal and changes
  - Policy 3.2 Assisted living contract: content checklist and contract steps
  - Policy 5.6 Life enrichment programs, activity evaluations and activity plans
  - Policy 5.11 Safety risk assessment on and around the property
- Decides whether the builder asks Q16.

Q2. Which license?

A facility that advertises specialized dementia care, or has a secured dementia care unit, needs the dementia care license (Minn. Stat. 144G.08, subd. 8). The dementia care license adds Section 5, eleven more policies.

☐ Assisted living facility (builder default)
☐ Assisted living facility with dementia care

What it changes:

- Section 5, "Dementia care (assisted living facility with dementia care license)", (11 policies) is part of the manual only when Q2 is "Assisted living facility with dementia care". Otherwise the whole section is left out.
- Changes the wording of 16 policies:
  - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
  - Policy 1.2 Provisional license, notice of the first resident, surveys, correction orders, renewal and changes
  - Policy 1.3 Licensed assisted living director, clinical nurse supervisor, on-call RN, job descriptions and organization chart

    - Policy 2.3 Orientation, annual training, emergency training, training records and staff performance reviews
    - Policy 2.5 Dementia, mental illness and de-escalation training for every facility, and the training description
    - Policy 2.7 Admission: initial evaluation, RN assessment before the contract, and the move-in steps
    - Policy 3.1 Uniform Disclosure of Assisted Living Services and Amenities (UDALSA)
    - Policy 3.2 Assisted living contract: content checklist and contract steps
    - Policy 3.3 Meals, food access, housekeeping, laundry, transport help, activities and the call system
    - Policy 3.5 Residents' money and property, and what staff may not do
    - Policy 3.6 Restraints (from January 1, 2027)
    - Policy 3.10 Planned closure
    - Policy 4.1 Staffing plan, daily staffing schedule, awake staff and the on-call RN
    - Policy 4.2 Emergency preparedness plan (42 CFR 483.73 and Appendix Z) and the posted disaster plan
    - Policy 4.3 Fire safety and evacuation plans, and the building
    - Policy 4.4 Missing residents
- Decides whether the builder asks Q3, Q25, Q36, Q40, Q79, Q80, Q81, Q82, Q86, Q87, Q88, Q89 and Q90.

Q3. Do you have a secured dementia care unit?

Only asked if Q2 is "Assisted living facility with dementia care".

A secured dementia care unit is locked or secured to prevent or limit residents leaving (Minn. Stat. 144G.08, subd. 62). It needs an awake person in the unit 24 hours a day (144G.81, subd. 4).

☐ No (builder default)
☐ Yes

What it changes:

- Changes the wording of 8 policies:
    - Policy 2.7 Admission: initial evaluation, RN assessment before the contract, and the move-in steps
    - Policy 3.1 Uniform Disclosure of Assisted Living Services and Amenities (UDALSA)
    - Policy 3.6 Restraints (from January 1, 2027)
    - Policy 4.1 Staffing plan, daily staffing schedule, awake staff and the on-call RN
    - Policy 4.3 Fire safety and evacuation plans, and the building
    - Policy 5.1 Our philosophy of dementia care and the dementia care disclosure

    - Policy 5.3 Wandering and egress prevention, and what staff do if a resident leaves
    - Policy 5.11 Safety risk assessment on and around the property
- Decides whether the builder asks Q89.

Q4. How many residents will you be licensed for?

Some rules depend on size: siting and colocation for six or fewer (Minn. Stat. 144G.15), relocation for five or fewer (144G.195), Food Code notes for ten or fewer (144G.41, subd. 1a(b)), and the building codes (144G.45).

☐ 6
☐ 1 to 5 (builder default)
☐ 7 to 10
☐ 11 or more

What it changes:

- Changes the wording of 5 policies:
    - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
    - Policy 1.2 Provisional license, notice of the first resident, surveys, correction orders, renewal and changes
    - Policy 1.4 Quality management
    - Policy 3.3 Meals, food access, housekeeping, laundry, transport help, activities and the call system
    - Policy 4.3 Fire safety and evacuation plans, and the building

Q5. Is the facility one of several licensed buildings on a campus?

Each building licensed as a facility on a campus has its own license certificate posted at its main public entrance (Minn. R. 4659.0040, subp. 2(B)).

☐ No, one building (builder default)
☐ Yes, a campus

What it changes:

- Changes the wording of 7 policies:
    - Policy 1.2 Provisional license, notice of the first resident, surveys, correction orders, renewal and changes
    - Policy 3.1 Uniform Disclosure of Assisted Living Services and Amenities (UDALSA)
    - Policy 3.8 Transfers within the facility
    - Policy 4.1 Staffing plan, daily staffing schedule, awake staff and the on-call RN
    - Policy 4.2 Emergency preparedness plan (42 CFR 483.73 and Appendix Z) and the posted disaster plan
    - Policy 4.3 Fire safety and evacuation plans, and the building

    - Policy 5.11 Safety risk assessment on and around the property
- Decides whether the builder asks Q23.

Q6. Does a management company run the facility for the licensee?

The licensee stays legally responsible for the facility (Minn. Stat. 144G.10, subd. 1(b)). The contract names the manager (144G.50, subd. 2(b)).

☐ No (builder default)
☐ Yes

What it changes:

- Changes the wording of 4 policies:
    - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
    - Policy 1.3 Licensed assisted living director, clinical nurse supervisor, on-call RN, job descriptions and organization chart
    - Policy 3.2 Assisted living contract: content checklist and contract steps
    - Policy 3.5 Residents' money and property, and what staff may not do
- Decides whether the builder asks Q20, Q21 and Q22.

Builder step: People

Q24. Is your director also your clinical nurse supervisor?

MDH says one person may be both if they hold both licenses (MDH staff FAQ).

☐ No, two people (builder default)
☐ Yes, one person with both licenses

What it changes:

- Changes the wording of 3 policies:
    - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
    - Policy 1.3 Licensed assisted living director, clinical nurse supervisor, on-call RN, job descriptions and organization chart
    - Policy 2.1 Reporting maltreatment of vulnerable adults, individual abuse prevention plans and required postings
- Changes what the manual's cover page lists.

Q25. Do your director and clinical nurse supervisor have experience managing residents with dementia?

Only asked if Q2 is "Assisted living facility with dementia care".

If not, a dementia care applicant employs a consultant for at least the first six months (Minn. Stat. 144G.80, subd. 2(b)). Policy 1.3 then holds the consultant plan.

☐ Yes (builder default)
☐ No

What it changes:

- Changes the wording of 2 policies:
  - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
  - Policy 1.3 Licensed assisted living director, clinical nurse supervisor, on-call RN, job descriptions and organization chart
- Decides whether the builder asks Q40.

Q26. Will you use temporary staffing agency staff or individual contractors?

Temporary staffing agency staff meet the same requirements as employees and are treated as facility staff (Minn. Stat. 144G.60, subd. 5).

☐ No, our own employees only (builder default)
☐ Yes

What it changes:

- Changes the wording of 3 policies:
  - Policy 2.2 Background studies
  - Policy 2.13 Staff records, license verification and the employee roster
  - Policy 4.1 Staffing plan, daily staffing schedule, awake staff and the on-call RN

Q27. Will new staff ever work with residents before DHS issues their background study result?

Until DHS issues one of the notices the law lists, the person may not provide direct contact services unless under continuous direct supervision (Minn. Stat. 245C.13, subd. 2).

☐ No, never (builder default)
☐ Yes, under continuous direct supervision

What it changes:

- Changes the wording of Policy 2.2 Background studies.

Builder step: Services

Q49. Will you provide medication management services?

Medication management services follow Minn. Stat. 144G.71, with policies developed under the supervision and direction of a registered nurse, licensed health professional or pharmacist. Choose No only if no staff member will set up, administer or manage residents'

medications.

☐ Yes (builder default)
☐ No

What it changes:

- Policy 2.15 Prescriptions and orders, storage, time away, disposition, and loss or spillage applies only when Q49 is "Yes". Otherwise it prints as a one-line "Not applicable" statement, so numbering stays the same.
- Changes the wording of 10 policies:
  - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
  - Policy 1.3 Licensed assisted living director, clinical nurse supervisor, on-call RN, job descriptions and organization chart
  - Policy 2.4 Training and competency evaluation of unlicensed personnel, delegated tasks and retraining
  - Policy 2.11 Medication, treatment and exercise reminders
  - Policy 2.14 Medication management: assessment, individualized plan, administration, setup and documentation
  - Policy 2.17 Delegation by registered nurses, supervision of nurses and licensed health professionals, and supervision of unlicensed personnel
  - Policy 3.1 Uniform Disclosure of Assisted Living Services and Amenities (UDALSA)
  - Policy 4.1 Staffing plan, daily staffing schedule, awake staff and the on-call RN
  - Policy 5.4 Medication management and the use and effects of psychotropic medications
  - Policy 5.9 Transportation to and from outside medical appointments
- Decides whether the builder asks Q50 and Q56.

Q50. Will you require a prescription for every medication you manage, including over-the-counter drugs and dietary supplements?

Only asked if Q49 is "Yes".

Your facility's choice. The facility must decide whether it requires a prescription for all medications it manages, and tell each resident whether it requires one for over-the-counter drugs and dietary supplements before agreeing to manage them (Minn. Stat. 144G.71, subd. 11). Policy 2.14 prints your answer.

☐ Yes, a prescription or prescriber's order for every medication we manage (builder default)
☐ No, we may manage over-the-counter drugs and dietary supplements without a prescription

What it changes:

- Changes the wording of Policy 2.14 Medication management: assessment, individualized plan, administration, setup and documentation.

Q51. Will unlicensed staff perform tasks a registered nurse delegates?

Delegated nursing tasks need added training, practical skills tests and RN supervision within 30 calendar days (Minn. Stat. 144G.60, subd. 4(b); 144G.62, subd. 4).

☐ Yes (builder default)
☐ No

What it changes:

- Changes the wording of 9 policies:
  - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
  - Policy 2.4 Training and competency evaluation of unlicensed personnel, delegated tasks and retraining
  - Policy 2.14 Medication management: assessment, individualized plan, administration, setup and documentation
  - Policy 2.15 Prescriptions and orders, storage, time away, disposition, and loss or spillage
  - Policy 2.16 Treatment and therapy management
  - Policy 2.17 Delegation by registered nurses, supervision of nurses and licensed health professionals, and supervision of unlicensed personnel
  - Policy 2.19 Falls without a medical emergency, and lift assistance
  - Policy 4.1 Staffing plan, daily staffing schedule, awake staff and the on-call RN
  - Policy 5.4 Medication management and the use and effects of psychotropic medications

Q52. Will you provide treatment and therapy management services?

For example ordered wound care, oxygen, or therapy exercises staff carry out. These follow Minn. Stat. 144G.72.

☐ Yes (builder default)
☐ No

What it changes:

- Changes the wording of 6 policies:
  - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
  - Policy 2.11 Medication, treatment and exercise reminders
  - Policy 2.16 Treatment and therapy management

    - Policy 2.17 Delegation by registered nurses, supervision of nurses and licensed health professionals, and supervision of unlicensed personnel
    - Policy 3.1 Uniform Disclosure of Assisted Living Services and Amenities (UDALSA)
    - Policy 4.1 Staffing plan, daily staffing schedule, awake staff and the on-call RN
- Decides whether the builder asks Q54.

Q53. Will staff give medication, treatment or exercise reminders?

Reminders need their own policy if provided (Minn. Stat. 144G.41, subd. 2(a)(9)).

☐ Yes (builder default)
☐ No

What it changes:

- Policy 2.11 Medication, treatment and exercise reminders applies only when Q53 is "Yes". Otherwise it prints as a one-line "Not applicable" statement, so numbering stays the same.
- Changes the wording of 3 policies:
    - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
    - Policy 2.14 Medication management: assessment, individualized plan, administration, setup and documentation
    - Policy 2.16 Treatment and therapy management

Q54. Do staff do any lab test, such as fingerstick blood glucose?

Only asked if Q52 is "Yes".

A facility that does waived lab tests keeps a CLIA certificate of waiver; MDH asks for it at the start of the survey if applicable (MDH Entrance Conference form). Lab tests such as blood glucose checks are treatments, so this is asked only if you provide treatment and therapy management services.

☐ No (builder default)
☐ Yes

What it changes:

- Changes the wording of 2 policies:
    - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
    - Policy 2.16 Treatment and therapy management

Q55. Will the facility hold or manage residents' money?

A facility that manages residents' funds keeps records and receipts and follows Minn. Stat. 144G.42, subd. 4. Whatever you choose, staff never take powers of attorney or borrow residents' money (subd. 3).

☐ No (builder default)
☐ Yes

What it changes:

- Changes the wording of 4 policies:
  - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
  - Policy 3.5 Residents’ money and property, and what staff may not do
  - Policy 3.10 Planned closure
  - Policy 5.10 Safekeeping of residents’ possessions

Builder step: Waivers and housing support

Q62. Are you enrolled with DHS to provide customized living services?

Your contract must say whether the facility is enrolled with DHS to provide customized living services under medical assistance waivers, with any limit and private-pay period (Minn. Stat. 144G.50, subd. 2(e)(5)). This manual covers MDH's licensing rules only, not DHS enrollment, rates or support plans.

☐ Yes (builder default)
☐ No

What it changes:

- Changes the wording of 7 policies:
  - Policy 2.7 Admission: initial evaluation, RN assessment before the contract, and the move-in steps
  - Policy 2.9 Assisted living bill of rights: notice, acknowledgment, advocacy information and day-to-day rights
  - Policy 3.1 Uniform Disclosure of Assisted Living Services and Amenities (UDALSA)
  - Policy 3.2 Assisted living contract: content checklist and contract steps
  - Policy 3.6 Restraints (from January 1, 2027)
  - Policy 3.9 Terminations, nonrenewal, appeals, coordinated moves and emergency relocation
  - Policy 3.10 Planned closure
- Decides whether the builder asks Q64, Q65 and Q66.

Q63. Does the facility have an agreement to provide housing support (Minnesota's housing support program, chapter 256I)?

Your contract must say whether the facility has an agreement to provide housing support under section 256I.04, subd. 2(b) (Minn. Stat. 144G.50, subd. 2(e)(5)(ii)).

☐ No (builder default)
☐ Yes

What it changes:

- Changes the wording of 4 policies:
  - Policy 3.1 Uniform Disclosure of Assisted Living Services and Amenities (UDALSA)
  - Policy 3.2 Assisted living contract: content checklist and contract steps
  - Policy 3.8 Transfers within the facility
  - Policy 3.9 Terminations, nonrenewal, appeals, coordinated moves and emergency relocation

Builder step: Emergencies and restraints

Q67. From January 1, 2027, which restraint policy will you adopt?

From January 1, 2027 restraints are prohibited except an emergency manual restraint at imminent risk or an ordered treatment (Minn. Stat. 144G.85). A licensee with a policy prohibiting restraints is exempt from the restraint training (144G.65, subd. 5).

☐ We do not use restraints (builder default)
☐ Trained staff may use an emergency manual restraint at imminent risk

What it changes:

- Changes the wording of 5 policies:
  - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
  - Policy 2.3 Orientation, annual training, emergency training, training records and staff performance reviews
  - Policy 2.13 Staff records, license verification and the employee roster
  - Policy 3.6 Restraints (from January 1, 2027)
  - Policy 5.2 Evaluating behavioral symptoms and supporting intervention plans

Q68. When a resident falls and needs help getting up, how will staff help?

Your facility's choice. From August 1, 2027 the falls policy covers nonemergency needs after a fall, including lift assistance (Minn. Stat. 144G.41, subd. 2(a)(17)). A medical emergency is always handled first (Policy 2.18). MDH's staff record review form lists mechanical lifts

among the tasks a registered nurse delegates, so if your unlicensed personnel perform no delegated tasks, only a nurse may use the device (Policy 2.19): choose the outside service unless a nurse is on site at all hours.

☐ Trained staff use a lift device (builder default)
☐ We call a named outside lift assistance service

What it changes:

- Changes the wording of Policy 2.19 Falls without a medical emergency, and lift assistance.
- Decides whether the builder asks Q76.

Q69. Does the facility have a backup generator?

The emergency plan covers how the facility keeps residents safe if the power fails (42 CFR 483.73, adopted by Minn. R. 4659.0100).

☐ No (builder default)
☐ Yes

What it changes:

- Changes the wording of 2 policies:
  - Policy 3.1 Uniform Disclosure of Assisted Living Services and Amenities (UDALSA)
  - Policy 4.2 Emergency preparedness plan (42 CFR 483.73 and Appendix Z) and the posted disaster plan

Builder step: Staffing and training

Q77. Which TB test will you use for new staff?

MDH says baseline TB screening is required at hire for all health care personnel, and every MDH-licensed provider completes a TB risk assessment each year (MDH staff FAQ).

☐ Either a TB blood test or a two-step skin test (builder default)
☐ A TB blood test (IGRA)
☐ A two-step tuberculin skin test

What it changes:

- Changes the wording of Policy 2.12 Tuberculosis prevention and control program and staff screening.

Q78. Will your training include hearing loss?

Optional. Orientation and annual training may include serving residents with hearing loss, if it is high quality, research based and covers at least one listed topic (Minn. Stat. 144G.63, subds. 2(b), 5(b)).

☐ No (builder default)
☐ Yes

What it changes:

- Changes the wording of Policy 2.3 Orientation, annual training, emergency training, training records and staff performance reviews.

Builder step: Records and dates

Q91. How will you keep resident and staff records?

Records, written or electronic, are protected against loss, tampering or unauthorized disclosure, and kept so they can be accessed, printed or sent in good time (Minn. Stat. 144G.43, subds. 1(b), 2).

☐ Partly on paper and partly electronically (builder default)
☐ On paper
☐ Electronically

What it changes:

- Changes the wording of 3 policies:
  - Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist
  - Policy 2.13 Staff records, license verification and the employee roster
  - Policy 3.7 Resident records, rosters and retention

Q92. Include Recommended practice?

Recommended practice sections give good practice beyond the rules, each labelled as guidance. Leave them out and the manual commits only to what the rules and your answers require.

☐ Include (builder default)
☐ Leave it out

What it changes:

- Keeps or removes the "Recommended practice" section at the end of 46 policies. Once adopted, recommended practices are the facility's own commitments, so only keep them if the facility will follow them.
- Changes the wording of Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist.

Also decide: commitments you write in Part 2

These details are commitments too: the manual prints them as what the facility will do, and the regulator can check that it does. Agree them at the same time.

- Q15. Licensed or requested capacity (number of residents)
- Q33. Job title for unlicensed staff (pre-filled: Resident aide)
- Q42. Days to answer a complaint in writing (pre-filled: 10)
- Q64. Limit on residents using customized living or housing support (pre-filled: No limit)
- Q65. Private-pay period before the facility accepts waiver or housing support payment (pre-filled: None)

PART 2

Part 2. Facility details

These 68 answers fill in the names, contacts, dates and numbers the manual prints. Write each answer exactly as it should appear.

Builder step: Your facility

Q7. Facility name

Required.

As it appears on your license application. It prints on the cover, on the header of every page and on every form. From January 1, 2027 a licensee's facility name may not include "home care" or "nursing home" (Minn. Stat. 144G.10, subd. 5(b)).

Example: Sample Assisted Living
Prints in: the cover page and 48 policies (including 1.1, 1.2, 1.3 and 1.4)

Answer: _____

Q8. Licensee (the person or organization that holds or will hold the license)

Required.

The licensee is legally responsible for the facility, even with a management agreement (Minn. Stat. 144G.10, subd. 1(b)).

Example: Sample Senior Living, LLC
Prints in: the cover page and 9 policies (including 1.1, 1.2, 1.3 and 2.6)

Answer: _____

Q9. MDH Health Facility ID (HFID)

Optional.

MDH issues the HFID when you apply. It prints on the cover and on forms; the contract must show the facility's legal name and HFID (Minn. Stat. 144G.50, subd. 2(a)). Leave blank if you do not have one yet: the manual prints [MDH Health Facility ID (HFID)] for you to fill in.

Example: 12345
Prints in: the cover page and policies 2.13, 3.1 and 3.2

Answer: _____

Q10. Facility address

Required.

The street address of the facility (on a campus, the main building).

Example: 1200 Lake Street, Saint Paul, MN 55101
Prints in: the cover page and 7 policies (including 2.3, 2.6, 2.9 and 2.18)

Answer: _____

Q11. County

Required.

Several local contacts in the manual are county services.

Example: Ramsey
Kept with your answers; the manual does not print it at the moment.

Answer: _____

Q12. Facility phone

Required.

Format: a full phone number, with area code
Example: (651) 555-0100
Prints in: 9 policies (including 1.3, 2.1, 2.6 and 2.7)

Answer: _____

Q13. Facility email address

Required.

Prints on the bill of rights page and the posted grievance procedure (Minn. Stat. 144G.90, subd. 1(c); 144G.41, subd. 7). Use an address someone checks every day.

Example: office@sampleassistedliving.com
Prints in: policies 1.3, 2.6, 2.7, 2.8 and 2.9

Answer: _____

Q14. Facility website

Optional.

Surveyors take a copy of your website or advertising information at the start of the survey (MDH Entrance Conference form). Leave blank if you have none.

Example: www.sampleassistedliving.com
Kept with your answers; the manual does not print it at the moment.

Answer: _____

Q15. Licensed or requested capacity (number of residents)

Required.

The number must fit the capacity band you chose. The statute treats facilities of five or fewer, six or fewer and ten or fewer differently in places (Minn. Stat. 144G.15, 144G.195, 144G.41, subd. 1a(b), 144G.45, subd. 3).

Format: a whole number of up to three digits
Example: 5
Prints in: the cover page and policy 1.2

Answer: _____

Q16. MDH license number

Optional; only asked if Q1 is "Already licensed (updating our manual)".

As printed on your license certificate. Leave blank to print a space to fill in.

Example: 1234567
Prints in: policy 1.1

Answer: _____

Q17. Authorized agent

Required.

The person MDH and residents contact for the licensee. The contract must give the authorized agent's name, telephone number and physical mailing address, which may not be a post office box (Minn. Stat. 144G.50, subd. 2(b)).

Example: Jordan Lee
Prints in: policies 1.1, 1.2, 1.3, 2.1, 2.2 and 3.2

Answer: _____

Q18. Authorized agent's telephone number

Required.

Format: a full phone number, with area code
Example: (651) 555-0101
Prints in: policy 3.2

Answer: _____

Q19. Authorized agent's physical mailing address (not a post office box)

Required.

A street address. Minn. Stat. 144G.50, subd. 2(b) and 144G.90, subd. 5(b) say this address may not be a public or private post office box.

Example: 1200 Lake Street, Saint Paul, MN 55101
Prints in: policy 3.2

Answer: _____

Q20. Managing agent (the company that manages the facility)

Only asked, and then required, if Q6 is "Yes".

The contract names the manager, if there is one, with telephone number and physical mailing address (Minn. Stat. 144G.50, subd. 2(b)).

Example: Sample Management, Inc.
Prints in: policies 1.1, 1.3, 3.2 and 3.5

Answer: _____

Q21. Managing agent's telephone number

Only asked, and then required, if Q6 is "Yes".

Format: a full phone number, with area code
Example: (651) 555-0102
Prints in: policy 3.2

Answer: _____

Q22. Managing agent's physical mailing address (not a post office box)

Only asked, and then required, if Q6 is "Yes".

Example: 400 Main Street, Minneapolis, MN 55401
Prints in: policy 3.2

Answer: _____

Q23. Buildings licensed on the campus

Only asked, and then required, if Q5 is "Yes, a campus".

Each building licensed as a facility on a campus gets its own license certificate, posted at its main public entrance (Minn. R. 4659.0040, subp. 2(B)).

Example: North Building, 1200 Lake Street; South Building, 1210 Lake Street
Prints in: policies 1.2, 3.1, 3.8, 4.1, 4.2 and 4.3

Answer: _____

Builder step: People

Q28. Licensed assisted living director

Required.

Every facility employs a director licensed or permitted by the Board of Executives for Long Term Services and Supports and affiliated with the board as director of record (Minn. Stat. 144G.10, subd. 1a).

Example: Alex Kim
Prints in: the cover page and 47 policies (including 1.1, 1.2, 1.3 and 1.4)

Answer: _____

Q29. Director's BELTSS license or permit number

Optional.

Leave blank if the director is still applying: the manual prints a space to fill in. BELTSS says an unlicensed director of record applies for a residency permit within 30 days of being designated (BELTSS Temporary Permit page).

Example: ALD 1234
Prints in: the cover page and policy 1.3

Answer: _____

Q30. Clinical nurse supervisor (registered nurse)

Required.

Every facility has a clinical nurse supervisor who is a Minnesota-licensed RN (Minn. Stat. 144G.41, subd. 4). If your director is also your clinical nurse supervisor, enter the same person here. Enter the name only: the manual adds "RN" after it. Your clinical nurse supervisor signs the adoption block at the end of each clinical policy.

Example: Morgan Diaz
Prints in: the cover page and 35 policies (including 1.1, 1.3, 1.4 and 2.1)

Answer: _____

Q31. Clinical nurse supervisor's RN license number

Optional.

Example: R 123456
Prints in: policy 1.3

Answer: _____

Q32. How staff reach the on-call registered nurse

Required.

Staff must have access to an on-call registered nurse 24 hours a day, seven days a week (Minn. Stat. 144G.41, subd. 1(13)).

Example: Call the on-call RN cell phone, (651) 555-0199
Prints in: 14 policies (including 1.3, 2.8, 2.11 and 2.14)

Answer: _____

Q33. Job title for unlicensed staff

Pre-filled if left blank.

The title your facility uses for unlicensed personnel (for example resident aide, care attendant or universal worker). It prints in job descriptions, training records and schedules.

Example: Resident aide
If left blank, prints as: Resident aide
Prints in: 13 policies (including 1.3, 2.1, 2.2 and 2.3)

Answer: _____

Q34. Who trains unlicensed staff and evaluates their competency

Required.

Training and competency evaluations of unlicensed personnel are conducted by a registered nurse, or by another instructor with the RN; for staff who give only clauses (1) to (5) services, by people with work experience and training in those services (Minn. Stat. 144G.61, subd. 1).

Example: Morgan Diaz, RN
Prints in: policies 2.3 and 2.4

Answer: _____

Q35. Who provides or oversees dementia training

Required.

Every facility trains staff on dementia, mental illness and de-escalation (Minn. Stat. 144G.64); a trainer or qualified supervisor is available to new staff until their initial training is done. In a facility with dementia care, the person providing or overseeing staff training also needs two years of related work experience and must pass a skills competency or knowledge test MDH accepts (144G.83, subd. 3).

Example: Taylor Brooks
Prints in: policies 2.5 and 5.5

Answer: _____

Q36. Dementia knowledge test the trainer passed

Only asked, and then required, if Q2 is "Assisted living facility with dementia care".

MDH's staff FAQ lists the tests it accepts and recommends the Alzheimer's Association essentiALZ exam.

Example: essentiALZ exam (Alzheimer's Association)
Prints in: policies 2.5 and 5.5

Answer: _____

Q37. Person responsible for the TB prevention and control program

Required.

Every facility keeps a TB infection control program and plan to current CDC guidelines (Minn. Stat. 144G.42, subd. 9).

Example: Morgan Diaz, RN
Prints in: policy 2.12

Answer: _____

Q38. Person who leads quality management

Required.

Every facility engages in quality management appropriate to its size and the services it provides, with two years of documentation (Minn. Stat. 144G.42, subd. 2).

Example: Alex Kim, Director
Prints in: policy 1.4

Answer: _____

Q39. Person who oversees the infection prevention and control program

Required.

Every facility keeps an infection control program consistent with current CDC guidelines, with written evidence (Minn. Stat. 144G.41, subd. 3). MDH's infection control survey form asks for the name and title of the person assigned to oversee the program, who should have training in infection prevention and control. It may be your clinical nurse supervisor.

Example: Morgan Diaz, RN
Prints in: policy 2.10

Answer: _____

Q40. Dementia care consultant

Required if Q25 is "No"; only asked if Q2 is "Assisted living facility with dementia care" and Q25 is "No".

If the director and clinical nurse supervisor have no experience managing residents with dementia, a dementia care applicant employs a consultant for at least the first six months of operation (Minn. Stat. 144G.80, subd. 2(b)).

Example: Riley Chen, Dementia Care Consulting LLC
Prints in: policy 1.3

Answer: _____

Builder step: Rights and contacts

Q41. People who handle resident grievances (names, telephone and email)

Required.

The posted grievance procedure gives the name, telephone number and email contact of the people responsible for handling grievances (Minn. Stat. 144G.41, subd. 7).

Example: Alex Kim, Director, (651) 555-0100, director@sampleassistedliving.com
Prints in: policies 1.3, 2.6, 2.9 and 3.2

Answer: _____

Q42. Days to answer a complaint in writing

Pre-filled if left blank.

No Minnesota statute sets this number. It is your facility's choice and becomes your policy, and MDH holds you to it.

Format: a whole number of up to three digits
Example: 10
If left blank, prints as: 10
Prints in: policy 2.6

Answer: _____

Q43. Staff contact for the resident council

Optional.

The facility designates a staff person, approved by the resident council, to assist the council and respond to its written requests (Minn. Stat. 144G.41, subd. 5). Leave blank to print a space to fill in once the council approves someone.

Example: Alex Kim, Director
Prints in: policy 3.4

Answer: _____

Q44. Staff contact for the family council

Optional.

Leave blank to print a space to fill in later.

Example: Alex Kim, Director
Prints in: policy 3.4

Answer: _____

Q45. A local legal services or advocacy organization

Required.

The facility gives residents the names and contact information, including telephone numbers and email addresses, of at least three organizations that provide advocacy or legal services, one of them the protection and advocacy organization for people with disabilities (Minn. Stat. 144G.41, subd. 8(1)). MDH's bill of rights notice names Mid-Minnesota Legal Aid/Minnesota Disability Law Center and Minnesota Aging Pathways; enter a third here, with its telephone number and email address.

Example: Sample County Legal Aid, (651) 555-0180, intake@example.org
Prints in: policy 2.9

Answer: _____

Q46. Local police non-emergency number

Required.

Format: a full phone number, with area code
Example: (651) 555-0110
Prints in: policies 4.2 and 4.4

Answer: _____

Q47. Fire department

Required.

Example: City Fire Department, (651) 555-0120
Prints in: policies 4.2 and 4.3

Answer: _____

Q48. County or city emergency management office

Required.

Your emergency plan includes a process for working with local emergency preparedness officials (42 CFR 483.73(a)(4), adopted by Minn. R. 4659.0100).

Example: County Emergency Management, (651) 555-0130
Prints in: policy 4.2

Answer: _____

Builder step: Services

Q56. Pharmacy the facility works with

Optional; only asked if Q49 is "Yes".

Example: Sample Pharmacy, (651) 555-0140
Prints in: policies 2.14 and 4.2

Answer: _____

Q57. Meal times

Required.

Every facility offers at least three nutritious meals a day with snacks available seven days a week (Minn. Stat. 144G.41, subd. 1a(a)).

Example: Breakfast 8:00 a.m., lunch 12:00 p.m., dinner 5:30 p.m.
Prints in: policy 3.3

Answer: _____

Q58. Special diets the facility offers

Optional.

The contract discloses the facility's ability to provide specialized diets (Minn. Stat. 144G.50, subd. 2(c)(7)).

Example: Diabetic, low sodium, mechanical soft
Prints in: policies 3.1, 3.2 and 3.3

Answer: _____

Q59. Who helps residents arrange transportation and community resources

Required.

Facilities provide the name of the person responsible for this help (Minn. Stat. 144G.41, subd. 1b(3)-(4)).

Example: Jamie Park, Activities Coordinator
Prints in: policies 1.3, 3.3 and 5.9

Answer: _____

Q60. Who leads the daily activity program

Required.

Example: Jamie Park, Activities Coordinator
Prints in: policies 1.3, 3.3, 5.1 and 5.6

Answer: _____

Q61. How residents call for help 24 hours a day (type of call system)

Required.

Every facility provides a means for residents to request assistance for health and safety needs 24 hours a day, seven days a week (Minn. Stat. 144G.41, subd. 1(5)). MDH's Entrance Conference form asks for the type of system. It prints in Policy 3.3 and the UDALSA guide in Policy 3.1.

Example: Wireless pendants and wall call buttons that alert the pagers staff carry
Prints in: policies 3.1, 3.3, 5.1 and 5.11

Answer: _____

Builder step: Waivers and housing support

Q64. Limit on residents using customized living or housing support

Pre-filled if left blank; only asked if Q62 is "Yes".

Your contract states any limit on the number of residents who may receive customized living or housing support payments (Minn. Stat. 144G.50, subd. 2(e)(5)). "No limit" is allowed.

Example: No limit
If left blank, prints as: No limit
Prints in: policies 3.1, 3.2 and 3.9

Answer: _____

Q65. Private-pay period before the facility accepts waiver or housing support payment

Pre-filled if left blank; only asked if Q62 is "Yes".

Your contract states any period of private payment required before the facility accepts these payments (Minn. Stat. 144G.50, subd. 2(e)(5)). "None" is allowed.

Example: None
If left blank, prints as: None
Prints in: policies 3.1, 3.2 and 3.9

Answer: _____

Q66. Rent requirements for waiver-eligible residents without housing support

Only asked, and then required, if Q62 is "Yes".

Example: The monthly rate in the resident's contract
Prints in: policy 3.2

Answer: _____

Builder step: Emergencies and restraints

Q70. First temporary relocation site (name, address and phone)

Required.

The emergency disaster plan identifies temporary relocation sites (Minn. Stat. 144G.42, subd. 10(a)(1)).

Example: Sample Community Center, 50 Elm Street, Saint Paul, (651) 555-0150
Prints in: policies 4.2 and 4.3

Answer: _____

Q71. Second temporary relocation site (name, address and phone)

Required.

Example: Sample Assisted Living North, 900 Pine Street, Saint Paul, (651) 555-0160
Prints in: policies 4.2 and 4.3

Answer: _____

Q72. Outdoor assembly point after evacuation

Required.

Example: The north parking lot by the flagpole
Prints in: policies 4.2 and 4.3

Answer: _____

Q73. Where the utility shutoffs are

Required.

Example: Gas: outside east wall. Water: basement utility room. Electric panel: garage.
Prints in: policy 4.3

Answer: _____

Q74. Where emergency supplies are kept

Required.

Example: Storage closet by the kitchen
Prints in: policies 4.2 and 4.3

Answer: _____

Q75. Where residents and staff shelter in place (for example in a tornado warning)

Required.

The emergency disaster plan addresses sheltering in place, and the emergency preparedness policies give a means to shelter in place for residents, staff and volunteers who remain in the facility (Minn. Stat. 144G.42, subd. 10(a)(1); 42 CFR 483.73(b)(4), adopted by Minn. R. 4659.0100). It prints in Policy 4.2.

Example: The interior hallway and bathrooms on the lower level, away from windows
Prints in: policy 4.2

Answer: _____

Q76. Outside service the facility calls for lift assistance

Only asked, and then required, if Q68 is "We call a named outside lift assistance service".

Your facility's choice. From August 1, 2027 the falls policy says how staff meet nonemergency needs after a fall, including lift assistance (Minn. Stat. 144G.41, subd. 2(a)(17)).

Example: Sample Lift Assist Service, (651) 555-0170
Prints in: policy 2.19

Answer: _____

Builder step: Staffing and training

Q79. Awake staff on duty, day shift

Required if Q2 is "Assisted living facility with dementia care".

Your planned staffing pattern. The statute sets no staff-to-resident ratio: staffing must meet residents' scheduled and reasonably foreseeable unscheduled needs (Minn. Stat. 144G.41, subd. 1(11); MDH staff FAQ).

Example: 2
Prints in: policies 3.1, 4.1 and 5.1

Answer: _____

Q80. Awake staff on duty, evening shift

Required if Q2 is "Assisted living facility with dementia care".

Example: 2
Prints in: policies 3.1, 4.1 and 5.1

Answer: _____

Q81. Awake staff on duty, night shift

Required if Q2 is "Assisted living facility with dementia care".

Staff are always awake: MDH says there are no circumstances in which assisted living staff may be asleep (MDH staff FAQ).

Example: 1
Prints in: policies 3.1, 4.1 and 5.1

Answer: _____

Q82. Registered nurse hours at the facility

Required if Q2 is "Assisted living facility with dementia care".

Required for the dementia care license: it prints in the dementia care disclosure, which must describe staff availability (Minn. Stat. 325F.72, subd. 2(4)).

Example: Monday to Friday, 9:00 a.m. to 1:00 p.m., and on call at all other times
Prints in: policies 3.1, 4.1 and 5.1

Answer: _____

Q83. Shift times

Optional.

Your facility's choice. They print in the staffing plan and the daily staffing schedule, which shows each direct-care staff member's shifts, including days and hours worked (Minn. R. 4659.0180, subp. 4). Leave blank to print a space to fill in.

Example: Day 7:00 a.m. to 3:00 p.m., evening 3:00 p.m. to 11:00 p.m., night 11:00 p.m. to 7:00 a.m.
Prints in: policy 4.1

Answer: _____

Q84. Months of the twice-yearly staffing evaluation

Required.

The staffing plan is evaluated at least twice a year (Minn. Stat. 144G.41, subd. 1(11)(i)). The months are your facility's choice.

Example: January and July
Prints in: policy 4.1

Answer: _____

Q85. Months of the quarterly missing resident plan review

Required.

The missing resident plan is reviewed at least quarterly (Minn. R. 4659.0110, subp. 4). The months are your facility's choice.

Example: January, April, July and October
Prints in: policy 4.4

Answer: _____

Builder step: Dementia care

Q86. Your values in dementia care

Only asked, and then required, if Q2 is "Assisted living facility with dementia care".

Prints in the philosophy of dementia care (Minn. Stat. 144G.82, subd. 3(a)(1)).

Example: Dignity, choice and a calm, familiar home
Prints in: policy 5.1

Answer: _____

Q87. Your mission in dementia care, in one or two sentences

Only asked, and then required, if Q2 is "Assisted living facility with dementia care".

Example: We help each resident living with dementia keep the routines and relationships that matter to them.
Prints in: policy 5.1

Answer: _____

Q88. Design and security features of your dementia care setting

Only asked, and then required, if Q2 is "Assisted living facility with dementia care".

The written dementia care disclosure describes the physical environment and the design and security features that address the needs of residents with Alzheimer's disease or other dementias (Minn. Stat. 325F.72, subd. 2(5)). Describe what your building has; prints in Policy 5.1.

Example: A single-story building with a fenced garden, door chimes on every outside door, and clear signs and contrasting colors to help residents find their way
Prints in: policy 5.1

Answer: _____

Q89. Fees for additional services in the secured dementia care unit

Only asked, and then required, if Q2 is "Assisted living facility with dementia care" and Q3 is "Yes".

The written dementia care disclosure includes the fee schedules for additional services to residents of the secured dementia care unit (Minn. Stat. 325F.72, subd. 2(8)). Name each fee and amount, or write "None". Prints in Policy 5.1.

Example: None: secured unit residents pay the rates in their contract and the Uniform Disclosure
Prints in: policy 5.1

Answer: _____

Q90. Staff contact for family support

Only asked, and then required, if Q2 is "Assisted living facility with dementia care".

Support is offered to family and other significant relationships on a regular schedule, at least quarterly (Minn. Stat. 144G.84(f)).

Example: Jamie Park, Activities Coordinator
Prints in: policies 5.1 and 5.7

Answer: _____

Builder step: Records and dates

Q93. Date the facility adopts the manual

Required.

MDH's provisional application asks you to attest that every required policy is in place on licensure and to keep them current.

Format: a date
Example: November 1, 2026
Prints in: the cover page and policies 1.1, 2.18, 2.19 and 3.6

Answer: _____

Q94. Next review date

Required.

Your facility's choice. Our suggestion: review every year before renewal, and before January 1 and August 1, 2027, when new duties take effect.

Format: a date
Example: November 1, 2027
Prints in: the cover page and policy 1.1

Answer: _____

PART 3

Part 3. Sample completed questionnaire

This is the questionnaire filled in for Sample Assisted Living, LLC, a fictional facility, with the builder's example answers and default choices. It is an illustration of the format, not a recommendation: every facility's answers will differ.

Builder step: Your facility

	Question	Sample answer
Q1	Are you applying, buying a licensed facility, or already licensed?	Applying for a new (provisional) license
Q2	Which license?	Assisted living facility
Q3	Do you have a secured dementia care unit?	Not asked with these answers
Q4	How many residents will you be licensed for?	1 to 5
Q5	Is the facility one of several licensed buildings on a campus?	No, one building
Q6	Does a management company run the facility for the licensee?	No
Q7	Facility name	Sample Assisted Living, LLC
Q8	Licensee (the person or organization that holds or will hold the license)	Sample Senior Living, LLC
Q9	MDH Health Facility ID (HFID)	12345
Q10	Facility address	1200 Lake Street, Saint Paul, MN 55101
Q11	County	Ramsey
Q12	Facility phone	(651) 555-0100
Q13	Facility email address	office@sampleassistedliving.com
Q14	Facility website	www.sampleassistedliving.com
Q15	Licensed or requested capacity (number of residents)	5
Q16	MDH license number	Not asked with these answers
Q17	Authorized agent	Jordan Lee
Q18	Authorized agent's telephone number	(651) 555-0101
Q19	Authorized agent's physical mailing address (not a post office box)	1200 Lake Street, Saint Paul, MN 55101
Q20	Managing agent (the company that manages the facility)	Not asked with these answers

	Question	Sample answer
Q21	Managing agent's telephone number	Not asked with these answers
Q22	Managing agent's physical mailing address (not a post office box)	Not asked with these answers
Q23	Buildings licensed on the campus	Not asked with these answers

Builder step: People

	Question	Sample answer
Q24	Is your director also your clinical nurse supervisor?	No, two people
Q25	Do your director and clinical nurse supervisor have experience managing residents with dementia?	Not asked with these answers
Q26	Will you use temporary staffing agency staff or individual contractors?	No, our own employees only
Q27	Will new staff ever work with residents before DHS issues their background study result?	No, never
Q28	Licensed assisted living director	Alex Kim
Q29	Director's BELTSS license or permit number	ALD 1234
Q30	Clinical nurse supervisor (registered nurse)	Morgan Diaz
Q31	Clinical nurse supervisor's RN license number	R 123456
Q32	How staff reach the on-call registered nurse	Call the on-call RN cell phone, (651) 555-0199
Q33	Job title for unlicensed staff	Resident aide
Q34	Who trains unlicensed staff and evaluates their competency	Morgan Diaz, RN
Q35	Who provides or oversees dementia training	Taylor Brooks
Q36	Dementia knowledge test the trainer passed	Not asked with these answers
Q37	Person responsible for the TB prevention and control program	Morgan Diaz, RN
Q38	Person who leads quality management	Alex Kim, Director
Q39	Person who oversees the infection prevention and control program	Morgan Diaz, RN
Q40	Dementia care consultant	Not asked with these answers

Builder step: Rights and contacts

	Question	Sample answer
Q41	People who handle resident grievances (names, telephone and email)	Alex Kim, Director, (651) 555-0100, director@sampleassistedliving.com
Q42	Days to answer a complaint in writing	10
Q43	Staff contact for the resident council	Alex Kim, Director
Q44	Staff contact for the family council	Alex Kim, Director
Q45	A local legal services or advocacy organization	Sample County Legal Aid, (651) 555-0180, intake@example.org
Q46	Local police non-emergency number	(651) 555-0110
Q47	Fire department	City Fire Department, (651) 555-0120
Q48	County or city emergency management office	County Emergency Management, (651) 555-0130

Builder step: Services

	Question	Sample answer
Q49	Will you provide medication management services?	Yes
Q50	Will you require a prescription for every medication you manage, including over-the-counter drugs and dietary supplements?	Yes, a prescription or prescriber's order for every medication we manage
Q51	Will unlicensed staff perform tasks a registered nurse delegates?	Yes
Q52	Will you provide treatment and therapy management services?	Yes
Q53	Will staff give medication, treatment or exercise reminders?	Yes
Q54	Do staff do any lab test, such as fingerstick blood glucose?	No
Q55	Will the facility hold or manage residents' money?	No
Q56	Pharmacy the facility works with	Sample Pharmacy, (651) 555-0140
Q57	Meal times	Breakfast 8:00 a.m., lunch 12:00 p.m., dinner 5:30 p.m.
Q58	Special diets the facility offers	Diabetic, low sodium, mechanical soft

	Question	Sample answer
Q59	Who helps residents arrange transportation and community resources	Jamie Park, Activities Coordinator
Q60	Who leads the daily activity program	Jamie Park, Activities Coordinator
Q61	How residents call for help 24 hours a day (type of call system)	Wireless pendants and wall call buttons that alert the pagers staff carry

Builder step: Waivers and housing support

	Question	Sample answer
Q62	Are you enrolled with DHS to provide customized living services?	Yes
Q63	Does the facility have an agreement to provide housing support (Minnesota's housing support program, chapter 256I)?	No
Q64	Limit on residents using customized living or housing support	No limit
Q65	Private-pay period before the facility accepts waiver or housing support payment	None
Q66	Rent requirements for waiver-eligible residents without housing support	The monthly rate in the resident's contract

Builder step: Emergencies and restraints

	Question	Sample answer
Q67	From January 1, 2027, which restraint policy will you adopt?	We do not use restraints
Q68	When a resident falls and needs help getting up, how will staff help?	Trained staff use a lift device
Q69	Does the facility have a backup generator?	No
Q70	First temporary relocation site (name, address and phone)	Sample Community Center, 50 Elm Street, Saint Paul, (651) 555-0150
Q71	Second temporary relocation site (name, address and phone)	Sample Assisted Living North, 900 Pine Street, Saint Paul, (651) 555-0160
Q72	Outdoor assembly point after evacuation	The north parking lot by the flagpole
Q73	Where the utility shutoffs are	Gas: outside east wall. Water: basement utility room. Electric panel: garage.
Q74	Where emergency supplies are kept	Storage closet by the kitchen
Q75	Where residents and staff shelter in place (for example in a tornado warning)	The interior hallway and bathrooms on the lower level, away from windows

	Question	Sample answer
Q76	Outside service the facility calls for lift assistance	Not asked with these answers

Builder step: Staffing and training

	Question	Sample answer
Q77	Which TB test will you use for new staff?	Either a TB blood test or a two-step skin test
Q78	Will your training include hearing loss?	No
Q79	Awake staff on duty, day shift	2
Q80	Awake staff on duty, evening shift	2
Q81	Awake staff on duty, night shift	1
Q82	Registered nurse hours at the facility	Monday to Friday, 9:00 a.m. to 1:00 p.m., and on call at all other times
Q83	Shift times	Day 7:00 a.m. to 3:00 p.m., evening 3:00 p.m. to 11:00 p.m., night 11:00 p.m. to 7:00 a.m.
Q84	Months of the twice-yearly staffing evaluation	January and July
Q85	Months of the quarterly missing resident plan review	January, April, July and October

Builder step: Dementia care

	Question	Sample answer
Q86	Your values in dementia care	Not asked with these answers
Q87	Your mission in dementia care, in one or two sentences	Not asked with these answers
Q88	Design and security features of your dementia care setting	Not asked with these answers
Q89	Fees for additional services in the secured dementia care unit	Not asked with these answers
Q90	Staff contact for family support	Not asked with these answers

Builder step: Records and dates

	Question	Sample answer
Q91	How will you keep resident and staff records?	Partly on paper and partly electronically
Q92	Include Recommended practice?	Include

	Question	Sample answer
Q93	Date the facility adopts the manual	November 1, 2026
Q94	Next review date	November 1, 2027

What these answers do to the manual

- Section 5 is left out of the manual, because it applies only when Q2 is "Assisted living facility with dementia care".
- In 40 policies, passages written for other answers are left out and the ones that match these answers are kept, so the manual describes only the services and arrangements this facility chose.
- Every name, phone number, address and date above prints where the manual needs it. Part 2 shows where each one prints.

How answers become policy text

Examples from the manual itself, with the sample answers filled in.

Q2. Which license?

In Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist, the sample answer "Assisted living facility" prints:

> This manual has four sections. Sample Assisted Living, LLC holds the assisted living facility license, so the ten dementia care policies that a facility with the assisted living facility with dementia care license must also have (Minn. Stat. 144G.82, subd. 3), and its dementia care safety risk assessment (144G.81, subd. 1(1)), are not part of it.
>
> `Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist, sample answer`

The answer "Assisted living facility with dementia care" prints this instead:

> This manual has five sections. Sample Assisted Living, LLC holds the assisted living facility with dementia care license, so Section 5 holds the dementia care policies that license requires (Minn. Stat. 144G.82, subd. 3).
>
> `Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist, other answer`

Q49. Will you provide medication management services?

In Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist, the sample answer "Yes" prints:

> 5. Policy 2.15, prescriptions, orders, storage, time away, disposition, and loss or spillage;
> 6. Policy 2.16, treatment and therapy management;
> 7. Policy 2.17, delegation and supervision;
> 8. Policy 2.18, medical emergencies;
> 9. Policy 2.19, falls and lift assistance; and
> 10. Policy 4.1, the staffing plan.
>
> `Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist, sample answer`

The answer "No" prints this instead:

> 5. Policy 2.16, treatment and therapy management;
> 6. Policy 2.17, delegation and supervision;
> 7. Policy 2.18, medical emergencies;
> 8. Policy 2.19, falls and lift assistance; and
> 9. Policy 4.1, the staffing plan.
>
> `Policy 1.1 About this manual: adoption, RN adoption steps, keeping policies current, the MDH Entrance Conference index and the 2027 checklist, other answer`

Q53. Will staff give medication, treatment or exercise reminders?

Policy 2.11 Medication, treatment and exercise reminders prints in full only when Q53 is "Yes". With any other answer, the policy keeps its number and prints this one statement instead:

> Sample Assisted Living, LLC does not give medication, treatment or exercise reminders, so it needs no reminder procedures (Minn. Stat. 144G.41, subd. 2(a)(9): "if provided"). If it starts giving reminders, it adopts this policy first.
>
> `Policy 2.11 Medication, treatment and exercise reminders, when it does not apply`

See it printed. The free sample policy uses exactly these answers: Policy 3.6, Restraints (from January 1, 2027), as it prints in the Minnesota assisted living manual: https://www.carerulebook.com/samples/us-minnesota-assisted-living.pdf