

Minnesota Bill of Rights for Assisted Living

Before receiving services, residents have the right to be informed by the facility of the rights granted under this section and the recourse residents have if rights are violated. The information must be in plain language and in terms residents can understand. The facility must make reasonable accommodations for residents who have communication disabilities and those who speak a language other than English. When providers violate the rights in this section, they are subject to fines and licensing actions.

Providers must do the following:

- Provide the resident a written notice of the rights under [Minnesota Statutes, section 144G.91](https://www.revisor.mn.gov/statutes/cite/144G.91) (<https://www.revisor.mn.gov/statutes/cite/144G.91>) before the initiation of services to that resident. The facility shall make all reasonable efforts to provide notice of the rights to the resident in a language the resident can understand.
- Include a statement describing how to file a complaint or report suspected abuse. The statement must also include a clause that the facility will not retaliate because of a complaint.
- Obtain written acknowledgment from the resident of the resident's receipt of the assisted living bill of rights or shall document why an acknowledgment cannot be obtained. Acknowledgment of receipt shall be retained in the resident's record.

Applicability

This Bill of Rights applies to residents living in assisted living facilities in Minnesota.

1. Appropriate care and services.

Residents have the right to care and assisted living services that are appropriate based on the resident's needs and according to an up-to-date service plan subject to accepted health care standards.

Residents have the right to receive health care and other assisted living services with continuity from people who are properly trained and competent to perform their duties and in sufficient numbers to adequately provide the services agreed to in the assisted living contract and the service plan.

2. Refusal of care or services.

Residents have the right to refuse care or assisted living services and to be informed by the facility of the medical, health-related, or psychological consequences of refusing care or services.

3. Participation in care and service planning.

Residents have the right to actively participate in the planning, modification, and evaluation of their care and services. This right includes:

- the opportunity to discuss care, services, treatment, and alternatives with the appropriate caregivers.
- the right to include the resident's legal and designated representatives and persons of the resident's choosing.
- the right to be told in advance of and take an active part in decisions regarding any recommended changes in the service plan.

Designated support person

- Subject to the last bullet point, an assisted living facility must allow, at a minimum, one designated support person chosen by the resident to be physically present with the resident at times of the resident's choosing while the resident resides at the facility.
- For purposes of this subdivision, "designated support person" means any person chosen by the resident to provide comfort to the resident, including but not limited to the resident's spouse, partner, family member, or another person related by affinity.
- A facility may restrict or prohibit the presence of a designated support person if the designated support person is acting in a violent or threatening manner toward others. A facility may restrict the presence of a resident's designated support person to the extent necessary to ensure a designated support person who is not a facility resident is not living at the facility on a short-term or long-term basis. If the facility restricts or prohibits a resident's designated support person from being present, the resident may file a complaint or inquiry with the facility according to subdivision 20, the Office of Ombudsman for Long-Term Care, or the Office of Ombudsman for Mental Health and Developmental Disabilities.

4. Courteous treatment.

Residents have the right to be treated with courtesy and respect, and to have the resident's property treated with respect.

5. Freedom from maltreatment.

Residents have the right to be free from physical, sexual, and emotional abuse; neglect; financial exploitation; and all forms of maltreatment covered under the Vulnerable Adults Act.

6. Right to come and go freely.

Residents have the right to enter and leave the facility as they choose. This right may be restricted only as allowed by other law and consistent with a resident's service plan.

7. Individual autonomy.

Residents have the right to individual autonomy, initiative, and independence in making life choices, including establishing a daily schedule and choosing with whom to interact.

8. Right to control resources.

Residents have the right to control personal resources.

9. Visitors and social participation.

Residents have the right to meet with or receive visits at any time from the resident's family, guardian, conservator, health care agent, attorney, advocate, religious or social work counselor, or any person of the resident's choosing. This right may be restricted in certain circumstances if necessary for the resident's health and safety and if documented in the resident's service plan.

Residents have the right to engage in community life and in activities of their choice. This includes the right to participate in commercial, religious, social, community, and political activities without interference and at their discretion if the activities do not infringe on the rights of other residents.

10. Personal and treatment privacy.

Residents have the right to consideration of their privacy, individuality, and cultural identity as related to their social, religious, and psychological well-being. Staff must respect the privacy of a resident's space by knocking on the door and seeking consent before entering, except in an emergency or unless otherwise documented in the resident's service plan.

Residents have the right to have and use a lockable door to the resident's unit. The facility shall provide locks on the resident's unit. Only a staff member with a specific need to enter the unit shall have keys. This right may be restricted in certain circumstances if necessary for a resident's health and safety and documented in the resident's service plan.

Residents have the right to respect and privacy regarding the resident's service plan. Case discussion, consultation, examination, and treatment are confidential and must be conducted discreetly. Privacy must be respected during toileting, bathing, and other activities of personal hygiene, except as needed for resident safety or assistance.

11. Communication privacy.

Residents have the right to communicate privately with persons of their choice.

If an assisted living facility is sending or receiving mail on behalf of residents, the assisted living facility must do so without interference.

Residents must be provided access to a telephone to make and receive calls.

12. Confidentiality of records.

Residents have the right to have personal, financial, health, and medical information kept private, to approve or refuse release of information to any outside party, and to be advised of the assisted living facility's policies and procedures regarding disclosure of the information. Residents must be notified when personal records are requested by any outside party.

13. Right to furnish and decorate.

Residents have the right to furnish and decorate the resident's unit within the terms of the assisted living contract.

14. Right to choose roommate.

Residents have the right to choose a roommate if sharing a unit.

15. Right to access food.

Residents have the right to access food at any time. This right may be restricted in certain circumstances if necessary for the resident's health and safety and if documented in the resident's service plan.

16. Access to technology.

Residents have the right to access Internet service at their expense.

17. Grievances and inquiries.

Residents have the right to make and receive a timely response to a complaint or inquiry, without limitation. Residents have the right to know, and every facility must provide the name and contact information of the person representing the facility who is designated to handle and resolve complaints and inquiries.

18. Access to counsel and advocacy services.

Residents have the right to the immediate access of:

- the resident's legal counsel.
- any representative of the protection and advocacy system designated by the state under Code of Federal Regulations, title 45, section 1326.21; or
- any representative of the Office of Ombudsman for Long-Term Care and the Office of Ombudsman for Mental Health and Developmental Disabilities.

19. Information about charges.

Before services are initiated, residents have the right to be notified:

- of all charges for housing and assisted living services.
- of any limits on housing and assisted living services available.
- if known, whether and what amount of payment may be expected from health insurance, public programs, or other sources; and
- what charges the resident may be responsible for paying.

20. Information about individuals providing services.

Before receiving services identified in the service plan, residents have the right to be told the type and disciplines of staff who will be providing the services, the frequency of visits proposed to be furnished, and other choices that are available for addressing the resident's needs.

21. Information about other providers and services.

Residents have the right to be informed by the assisted living facility, prior to executing an assisted living contract, that other public and private services may be available, and that the resident has the right to purchase, contract for, or obtain services from a provider other than the assisted living facility.

22. Resident councils.

Residents have the right to organize and participate in resident councils as described in [Minnesota Statutes, section 144G.41, subdivision 5](https://www.revisor.mn.gov/statutes/cite/144G.41#stat.144G.41.5) (<https://www.revisor.mn.gov/statutes/cite/144G.41#stat.144G.41.5>).

23. Family councils.

Residents have the right to participate in family councils formed by families or residents as described in [Minnesota Statutes, section 144G.41, subdivision 6](https://www.revisor.mn.gov/statutes/cite/144G.41#stat.144G.41.6) (<https://www.revisor.mn.gov/statutes/cite/144G.41#stat.144G.41.6>).

Legislative intent

The rights established under this section for the benefit of residents do not limit any other rights available under the law. No facility may request or require that any resident waive any of these rights at any time for any reason, including as a condition of admission to the facility.

Resources

You may contact your licensed provider as indicated below.

Licensee Name: 1 on 1 Comprehensive Healthcare Solution

Phone: 612-237-8725

Email: Sekou8212@yahoo.com

Address: 14967 95th Place North, Maple Grove, MN 55369

Name and title of the person to whom problems or complaints may be directed: Dr. Karlu Dorleh, DNP/CNP/DIRECTOR

Report suspected abuse, neglect, or financial exploitation of a vulnerable adult:

If you want to report suspected abuse, neglect, or financial exploitation, you may contact the Minnesota Adult Abuse Reporting Center (MAARC).

If you have a complaint about the facility or person providing your services, you may contact the Office of Health Facility Complaints, Minnesota Department of Health. You may also contact the Office of Ombudsman for Long-Term Care or the Office of Ombudsman for Mental Health and Developmental Disabilities.

Minnesota Adult Abuse Reporting Center (MAARC)

Phone: 1-844-880-1574

For more information:

Web: [Minnesota vulnerable adult protection and elder abuse](https://mn.gov/dhs/adult-protection/) (<https://mn.gov/dhs/adult-protection/>)

For all other complaints that are not suspected abuse, neglect, or financial exploitation of a vulnerable adult, please contact the Office of Health Facility Complaints at the Minnesota Department of Health:

Minnesota Department of Health, Office of Health Facility Complaints

P.O. Box 64970
St. Paul, Minnesota 55164-0970
Phone: 651-201-4200; or 1-800-369-7994
Fax: 651-281-9796
Email: health.ohfc-complaints@state.mn.us
Web: [Office of Health Facility Complaints](https://www.health.state.mn.us/facilities/regulation/ohfc/index.html)
(<https://www.health.state.mn.us/facilities/regulation/ohfc/index.html>)

Resident Acknowledgement

By signing below, I acknowledge that I have received information from my assisted living provider explaining my rights as a resident. I have also been informed how to file a complaint or report suspected abuse and have received the name and contact information of the person to whom complaints should be directed.

Name of resident: _____

Signature of resident: _____

Name of resident's representative (if applicable): _____

To request advocacy services, please contact the Office of Ombudsman for Long-Term Care or the Office of Ombudsman for Mental Health and Developmental Disabilities:

Office Of Ombudsman for Long-Term Care

P.O. Box 64971
St. Paul, Minnesota 55164-0971
Phone: 1-800-657-3591; or 651-431-2555
Email: MBA.OOLTC@state.mn.us
Web: [Office Of Ombudsman for Long-Term Care](https://mn.gov/ooltc/) (<https://mn.gov/ooltc/>)

Office Of Ombudsman for Mental Health And Developmental Disabilities

332 Minnesota Street
Suite W1410, First National Bank Building
St. Paul, Minnesota 55101-2117
Phone: 1-800-657-3506; or 651-757-1800
Email: Ombudsman.mhdd@state.mn.us
Web: [Office Of Ombudsman for Mental Health And Developmental Disabilities](https://mn.gov/omhdd/) (<https://mn.gov/omhdd/>)

To request legal consultation, please contact Mid-Minnesota Legal or the Minnesota Disability Law Center:

Mid-Minnesota Legal Aid/Minnesota Disability Law Center

Protection and Advocacy Systems

430 North Fifth Street

Suite 100

Minneapolis, Minnesota 55403

Phone: 1-800-292-4150

Email: mndlc@mylegalaid.org

Web: [Mid-Minnesota Legal Aid/Minnesota Disability Law Center \(http://mylegalaid.org/\)](http://mylegalaid.org/)

To inquire about Medicaid fraud and abuse or billing or payment issues, please contact the Minnesota Department of Human Services:

Minnesota Department of Human Services

Surveillance and Integrity Review Services

P.O. Box 64982

St. Paul, Minnesota 55164-0982

Phone: 1-800-657-3750; or 651-431-2650

Web: DHS.SIRS@state.mn.us

To inquire about general aging-related concerns, please contact the Senior Linkage Line:

Minnesota Aging Pathways/Minnesota Board on Aging (formerly known as Senior Linkage Line)

540 Cedar St.

St. Paul, Minnesota 55155

Phone: 1-800-333-2433

Email: aging.pathways@state.mn.us

Web: [Minnesota Aging Pathways \(https://mn.gov/aging-pathways/\)](https://mn.gov/aging-pathways/)

For assisted living inquiries at the Minnesota Department of Health, please contact:

Minnesota Department of Health, Health Regulation Division

P.O. Box 64970

St. Paul, Minnesota 55164-0970

Phone: 651-201-4200

Email: health.assistedliving@state.mn.us

Web: [Assisted Living Licensure \(https://www.health.state.mn.us/facilities/regulation/assistedliving/\)](https://www.health.state.mn.us/facilities/regulation/assistedliving/)

MINNESOTA BILL OF RIGHTS FOR ASSISTED LIVING RESIDENTS

For general Minnesota Department of Health inquiries, please contact:

Minnesota Department of Health

Health Regulation Division

P.O Box 64970

St. Paul, Minnesota 55164-0970

Phone: 651-201-4200

Email: health.fpc-web@health.state.mn.us

Web: www.health.state.mn.us

01/01/2026

To obtain this information in a different format, call: 651-201-4200.