

Spring 2008
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Office of Assisted Living Licensing

Office of Assisted Living Licensing

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Hello From The Program Manager

Alan Oppenheim, Program Manager
Office of Assisted Living Licensing

(602) 364-2639

All of us in the Office of Assisted Living Licensing hope that our providers and residents had a great holiday season. We wish everyone a very happy NEW YEAR!!! We hope that at the top of your resolution list is to continue to improve the care and service you provide to your residents!

The Office of Assisted Living Licensing had a very good 2007. Many of you have commented that timeliness has improved with renewal surveys and initial surveys. In fact, this is very true. Our backlog of surveys was once as high as 575. We began 2008 with backlog survey numbers in the low 100's. This is a fantastic effort by our surveyors! The additional 8 surveyor positions allocated last year have certainly helped with this effort. Our surveyor training program "Surveyor School" combined with seasoned surveyor preceptors has resulted in releasing well-trained staff into the field.

Thank you for returning your *Customer Satisfaction Surveys* to our office. We continue to receive a high volume of completed surveys. Results of these surveys have shown that our surveyors are timely, professional, and very customer service-oriented. Our overall satisfaction rate runs at 95%. We are very proud of these results! We hope that you will continue to complete these *Customer Satisfaction Surveys*. These surveys are a great tool for us to know how we are doing and where we may need to make adjustments.

As we have mentioned before, Joy Johnson, State Licensing Surveyor, is also our newsletter editor. Once again I am sure that you will agree, she has truly prepared another high-quality newsletter. THANKS JOY!!!

As we move into 2008, we are hoping to continue to improve our timeliness while maintaining the quality of the survey process. We would love to hear your comments concerning our newsletter. Is the newsletter helpful? Is the newsletter easy to read? Does the newsletter address your needs? Please call or write Joy or myself, as we would love your input. Again, we wish you and all the residents you serve a healthy and happy New Year!

Thank you!
-Alan

Assisted Living Facility Managers

The State of Arizona Board of Examiners of Nursing Care Administrators and Assisted Living Facility Managers (NCIA Board) mission is to “protect the health, welfare, and safety of Arizona citizens who seek and use the services of nursing care institution administrators and assisted living facility managers.”

“The Board licenses nursing care institution administrators and certifies assisted living managers. The licensing and certification process helps ensure that qualifications, competency and standards are met. The Board investigates complaints and enforces the practice standards of the Administrators and Managers. The Board also approves continuing education courses to make sure quality and useful education is being taught.”

Please visit the Board’s website to view the latest newsletter **August – December 2007**. There is important information regarding investigations under the topic “Investigations Desk.” The ADHS enforcement actions are separate from the Board’s investigation process. Please review the information. It is important to know that Board’s complaint actions require a separate response from the information provided to ADHS in regards to an enforcement action.

Board’s website: www.nciabd.state.az.us

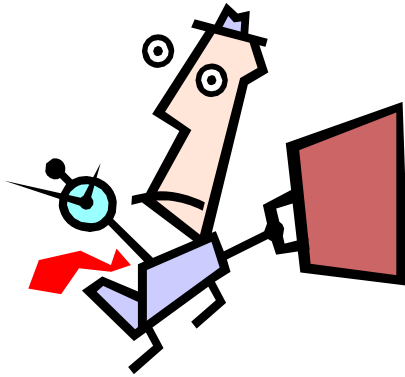
Specific questions should be directed to the Board by calling (602) 364-2273

R9-10-703. Administration

A. A licensee is responsible for the organization and management of an assisted living facility. A licensee shall:

9. Ensure that an official of the following agencies is allowed immediate access to an assisted living facility:
 - a. The Department,
 - B. a county health department,
 - c. Adult Protective Services
 - d. The D.E.S. Long-Term Care Ombudsman, or
 - e. A county or municipal fire department; and
10. Ensure that the following individuals have immediate access to a resident:
 - a. The representative,
 - b. The resident's case manager, or
 - c. An individual assigned by a court of law to provide services to the resident.

PROVIDERS please understand that you MUST allow immediate access to the Department, Adult Protective Services, Ombudsman, etc.!



Top Ten Most Cited Deficiencies 1/1/07 – 12/31/07

1. R9-10-723.E. A licensee shall ensure that medication requirements in R9-10-722(D) are met for a resident receiving personal care services or directed care services.
2. § 36-406.1(d). Powers and duties of the department In addition to its other powers and duties: The department shall: Require as a condition of licensure that nursing care institutions and assisted living facilities make vaccinations for influenza and pneumonia available to residents on site on a yearly basis. The department shall prescribe the manner by which the institutions and facilities shall document compliance with this subdivision, including documenting residents who refuse to be immunized. The department shall not impose a violation on a licensee for not making a vaccination available if there is a shortage of that vaccination in this state as determined by the director.
3. R9-10-717.A.3. A licensee shall ensure that: An employee fire drill is conducted at least once every 3 months on each shift. Residents are not required to participate in an employee fire drill. An employee fire drill includes making a general announcement throughout the facility that an employee fire drill is being conducted or sounding a fire alarm;
4. R9-10-703.B.3. A licensee shall ensure that a manager of an assisted living facility: Ensures that each resident and each individual living in the facility provides documentation of freedom from pulmonary tuberculosis at least once every 12 months as required in R9-10-706(A)(1);
5. R9-10-706.A. A licensee shall ensure that: R9-10-706.A.1. At the starting date of employment or service and every 12 months from the starting date of employment or service, each support staff and volunteer who interacts with a resident on a regular basis and each employee submits 1 of the following as evidence of being free from pulmonary tuberculosis:
 - a. A report of a negative Mantoux skin test administered within six months of submitting the report; or
 - b. A written physician's statement dated within six months of submitting the statement, indicating freedom from pulmonary tuberculosis, if the individual has had a positive skin test for tuberculosis;
6. R9-10-713.B.3.a. A licensee shall ensure that: Medication stored by the licensee is stored or controlled as follows: Medication is stored in a locked container, cabinet, or area that is inaccessible to residents;
7. R9-10-711.A.6.a. A licensee shall ensure that a resident has a written service plan that: Is signed and dated by: The resident or the representative;
8. R9-10-718.10. A licensee shall ensure that: Poisonous or toxic materials stored by the assisted living facility are maintained in labeled containers in a locked area separate from food preparation and storage, dining areas, and medications;
9. R9-10-703.B.9. A licensee shall ensure that a manager of an assisted living facility: Ensures compliance with fingerprinting requirements contained in A.R.S. § 36-411;
A.R.S. § 36-411. A. Subject to legislative appropriations, as a condition of licensure or continued licensure of a residential care institution, a nursing care institution or a home health agency and as a condition of employment in a residential care institution, a nursing care institution or a home health agency, employees and owners of residential care institutions, nursing care institutions or home health agencies or contracted persons who provide direct care, home health services or supportive services and who have not been subject to the fingerprinting requirements of a health professional's regulatory board pursuant to title 32 shall have valid fingerprint clearance cards that are issued pursuant to title 41, chapter 12, article 3.1 or shall apply for a fingerprint clearance card within twenty working days of employment or beginning volunteer work except as provided in subsections F, G and H of this section.
C. Owners shall make documented, good faith efforts to:
 2. Verify the current status of a person's fingerprint clearance card.
10. R9-10-718.1.d. A licensee shall ensure that: A facility and facility grounds are: Free of any object, material or condition that may be a hazard based on the physical, cognitive, and functional condition of the residents...

For more detailed information on specific rule requirements, please visit our website or call our office to request a hard copy be mailed to you.

Toxic Material(s) WARNING Information

Guidelines for storage:



R9-10-701. Definitions:

The following definitions apply in this Article unless otherwise specified:

51. "HAZARD" means a condition or situation where a resident may suffer physical injury.

R9-10-716. Physical Plant Requirements

A. A licensee shall ensure that an assisted living facility:
2. Is hazard-free:

R9-10-718. Environmental Services

A licensee shall ensure that:

1. A facility and facility grounds are:
 - d. Free of any object, material or condition that may be a hazard based on the physical, cognitive, and functional condition of the residents;

Signal words: DANGER-highest degree of hazard; WARNING-moderate degree of hazard; CAUTION-lowest degree of hazard.

Statement of principal hazard: Includes statements such as "FLAMMABLE", "COMBUSTIBLE", "VAPOR HARMFUL", "CAUSES BURNS", "HARMFUL OR FATAL IF SWALLOWED" or other similar statements that describe a hazard.

Common, usual or chemical name of substance

Name and place of business of manufacturer, packer, distributor or seller

Statement of precautionary measures to follow

Instructions for safe handling and storage: some products should not be stored with other products, near heat or flame, etc.

"Keep out of the reach of children": Products bearing this statement on their labels should be kept in a locked cabinet (**NOTE: unless the items are personal care products and the residents' cognition is good for them to use these items**)

First aid instructions

Always keep products in original containers

NATIONWIDE POISON CONTROL HOTLINE: 1-800-222-1222

For More Information, visit the American Association of Poison Control Centers' website at:

<http://www.aapcc.org/>

2007 A Very Good Year! ...thought that you might like to know...

ADHS has a Holiday Angel Program. This program has been going on for many years at ADHS and has helped many struggling families make the holidays great for their children.

The Holiday Angel Program is offered for employees who are trying to make ends meet and need a little extra help providing gifts for their children. Employees submit requests for gifts for their children (younger than 14 years old) and fellow employees become "Holiday Angels", who purchase gifts for the children involved.

This year, the surveyors in the Office of Assisted Living Licensing collectively contributed \$240 in gift cards for this special program.

More Good News!

The Office of Assisted Living Licensing management team "adopted" 5 children from the Scottsdale Unified School District. These 5 children would not be able to enjoy the holidays without support from the program. The "adopted" children are 1.5 months old, 6 years old, (2) 5 year olds, and an 8 year old. The gifts included sweatshirts, boots, toy cars, toy trucks, a bike, shirts, pants, and other toys!

POC Compliance

Responding to your (SOD) Statement of Deficiencies with a (POC) Plan of Correction

1. How the deficiency is to be corrected, on both a temporary and permanent basis
 2. The date the correction will be completed
3. The name, title, and/or position of the person responsible for implementing the corrective action
4. A description of the monitoring system you will use to prevent the deficiency from recurring
5. Your signature, and the date you approve the plan of correction, on the first page
6. Copies of any additions to, or revisions of, required documents.

When ADHS mails your statement of deficiencies, instructions on how to complete your plan of correction is also included. Please be aware that the instructions should be followed as close as possible to ensure that your POC will be accepted in a timely manner.

If you have questions on how to respond to your SOD or how to complete your POC, PLEASE contact your surveyor so that they can provide technical assistance to expedite this process. An unacceptable POC (plan of correction) may delay the process for your initial license, renewal license, or complaint investigation.

THANK YOU FOR YOUR UNDERSTANDING of this (required) process!!! Providers: please provide the required information and documentation for your plan of correction.



Ongoing Training Requirements for Assisted Living

R9-10-707. Employee Orientation and Ongoing Training

B. A licensee shall ensure that each manager and caregiver completes a minimum of six hours of ongoing training every 12 months from the starting date of employment, or for a manager or caregiver hired before the effective date of this Article, every 12 months from the effective date of this Article.

1. The training shall include:

- a. Promoting resident dignity, independence, self-determination, privacy, choice, and resident rights;
- b. Fire, safety, and emergency procedures;
- c. Infection control;
- d. Assistance in self-administration of medications; and
- e. Abuse, neglect, and exploitation prevention and reporting requirements;

2. Orientation for new employees, hours used in obtaining and maintaining current CPR and first aid, and hours used in obtaining initial training from a training program may count toward ongoing training for the first 12 months after the employee's starting date of employment.

R9-10-722. Supplemental Requirements for an Assisted Living Facility Licensed to Provide Personal Care Services

B. In addition to the ongoing training requirements in R9-10-707 (B), a licensee of an assisted living facility licensed to provide personal care services shall ensure that each manager and caregiver completes a minimum of two hours of ongoing training in providing personal care services every 12 months from the starting date of employment, or for a manager or caregiver hired before the effective date of this Article, every 12 months from the effective date of this Article.

R9-10-723. Supplemental Requirements for an Assisted Living Facility Licensed to Provide Directed Care Services

C. In addition to the ongoing training requirements in R9-10-707 (B) and R9-10-722(B), a licensee of an assisted living facility licensed to provide directed care services shall ensure each manager and caregiver completes a minimum of four hours of ongoing training in providing services to residents who are unable to direct self-care every 12 months from the starting date of employment, or for a manager or caregiver hired before the effective date of this Article, every 12 months from the effective date of this Article.

It is important to understand the different requirements from ADHS and the Board of Examiners, if applicable (certified managers). Please visit the Board of Examiners website or call with questions:

ADHS Surveyor of the Day: (602) 364-2639

Board of Examiners of Assisted Living Facility Managers: (602) 364-2273



MORE ABOUT...

Ongoing Training Requirements

Managers and Caregivers

6 Hours:

R9-10-707.B.1.a.-e. and 2.

*Promoting resident dignity, independence, self-determination, privacy, choice and resident rights

*Fire, safety, and emergency procedures

*Infection control

*Assistance in self administration of medications

*Abuse, neglect, and exploitation prevention and reporting requirements

In addition to the ongoing training requirements in R9-10-707 (B), managers and caregivers of an assisted living facility licensed to provide personal care services complete an additional

2 Hours:

*Providing personal care services

(personal care services is defined as assistance with activities of daily living that can be performed by persons without professional skills or professional training and includes the coordination or provision of intermittent nursing services and the administration of medications and treatments by a nurse who is licensed pursuant to Title 32, Chapter 15 or as otherwise provided by law)

In addition to the ongoing training requirements in R9-10-707 (B) and R9-10-722 (B), managers and caregivers of an assisted living facility licensed to provide directed care level of services complete an additional

4 Hours:

*Providing services to residents who are unable to direct self-care

(directed care services is defined as programs and services, including personal care services, provided to persons who are incapable of recognizing danger, summoning assistance, expressing need or making basic care decisions)



ARIZONA DEPARTMENT OF HEALTH SERVICES DIVISION OF ASSURANCE AND LICENSURE OFFICE OF THE ASSISTANT DIRECTOR SUBSTANTIVE POLICY STATEMENT # SP – 019 – ALS – OAD

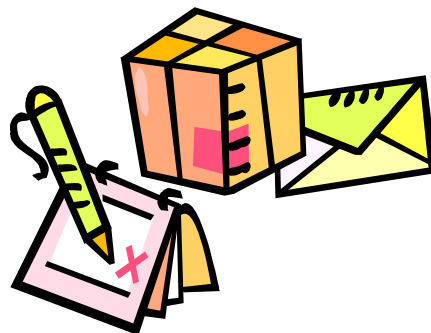
INTERPRETATION OF “HEALTH CARE INSTITUTION”

The purpose of this substantive policy statement is to notify the public of the Department’s interpretation of the definition of “health care institution,” contained in A.R.S. 36-401(22), as related to the renewal of a health care institution license under A.R.S. 36-425 and A.A.C. R9-10-107.

A.R.S.36-401(22) states: “Health care institution” means every place, institution, building or agency, whether organized for profit or not, which provides facilities with medical services, nursing services, health screening services, other health-related services, supervisory care services, personal care services or directed care services and includes health agencies defined in section 36-151 and hospice service agencies.

The Department interprets this definition to mean that in order to be a health care institution, a place, institution, building, or agency must be providing medical services, nursing services, health screening services, other health-related services, supervisory care services, personal care services, or directed care services. A place, institution, building, or agency that does not provide any of these services for an extended period of time ceases to be a health care institution, because it is not longer “provid[ing] facilities with medical services, nursing services, health screening services, other health-related services, supervisory care services, personal care services or directed care services” and thus no longer fits within the statutory definition of “health care institution.”

If the Department determines upon inspection for renewal of a health care institution’s license that a licensed “health care institution” has not provided medical services, nursing services, health screening services, other health-related services, supervisory care services, personal care services, or directed care services for 12 consecutive months preceding application for license renewal, the Department shall deny renewal of the health care institution license on the grounds that the place, institution, building, or agency is not a health care institution and thus is ineligible for licensure.



ARIZONA DEPARTMENT OF HEALTH SERVICES OFFICE OF THE ASSISTED DIRECTOR
SUBSTANTIVE POLICY STATEMENT # SP-018-ALS-OAD
DIRECT RISK TO THE LIFE, HEALTH OR SAFETY OF PATIENTS OR RESIDENTS IN A
RESIDENTIAL CARE INSTITUTION

The purpose of this substantive policy statement is to inform the public that the Department may consider a residential care institution's pattern of noncompliance with a rule to be a "direct risk to the life, health or safety of patients and residents," as used in A.R.S. 36-401 (A) (42), even if a single violation of the rule is not considered to be a direct risk:

"Pattern of noncompliance" means"

1. A violation of a statute or a rule cited on more than one subsequent inspection; or
2. A violation of a statute or a rule cited on an inspection that affects more than one resident or personnel member;

A residential care institution's pattern of noncompliance with any of the following may result in a "direct risk to the life, health or safety of patients or residents";

1. Administration requirements in A.A.C. R9-10-703;
2. Abuse, neglect, and exploitation prevention and reporting requirements in A.A.C. R9-10-704;
3. Limitations on level of services in A.A.C. R9-10-705;
4. Personnel qualifications and records requirements in A.A.C. R9-10-706;
5. Personnel requirements in A.A.C. R9-10-708;
6. Service plan and health-related service requirements in A.A.C. R9-10-711;
7. A requirement for medications in A.A.C. R9-10-713.;
8. Food services requirements in A.A.C. R9-10-715;
9. Physical plant requirements in A.A.C. R9-10-716;
10. Fire and safety requirements in A.A.C. R9-10-717;
11. Environmental standards in A.A.C. R9-10-718;
12. Supplemental requirements for assisted living homes in A.A.C. R9-10-719; or
13. Supplemental requirements for assisted living homes in A.A.C. R9-10-720.

In determining whether a pattern of noncompliance with any of the listed provisions results in a direct risk to the life, health or safety of patients or residents, the Department considers the following factors:

1. How many times each rule has been violated in the past,
2. The type of rule violations,
3. The severity of each violation,
4. The potential for any occurrence of actual harm,
5. The threat to health and safety,
6. The number of persons affected by the violations,
7. The number of violations, and
8. The length of time the violations have been occurring.

This substantive policy is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona administrative procedures act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under Arizona Revised Statutes section 41-1033 for a review of the statement.

Did you know?

...The Department continues to work on the internal draft of the revised Assisted Living Facilities rules. Once the internal draft is completed, the Department will post the draft on the Assisted Living Facilities website, schedule dates for rules committee meetings, and invite individuals to serve on the rules committee. When the rules committee participant list is finalized, it will also be posted on the website.

Please contact Mark Gula, Rules Analyst, at (602) 364-0989 if you have any questions regarding this rulemaking project.

...Our Surveyor of the Day, Our Support Staff, Our Management Team, and Your Surveyor may be able to provide technical assistance and sometimes guidelines for your questions...PLEASE feel free to call us with your questions and concerns...Surveyor of the Day (ADHS direct line) 602-364-2639 Monday through Friday from 8:00 a.m. to 5:00 p.m.

Tucson (520) 628-6965...



...Freedom from Pulmonary Tuberculosis documentation can be “enlightening”... R9-10-703.B. A licensee shall ensure that a manager of an assisted living facility: R9-10-703.B.3.Ensures that each resident and each individual living in the facility provides documentation of freedom from pulmonary tuberculosis at least once every 12 months as required in R9-10-706(A)(1);

A recent interpretation of this rule clarifies that EACH INDIVIDUAL LIVING IN THE FACILITY must comply with this rule. This would include any independent person, family members, boarders etc. (and of course resident(s)) that live in your licensed facility. These records MUST be made available to the Surveyor at the time of your survey. As of 8/1/07, any facility found non compliant with this rule will be cited. This requirement is in addition to the rules that apply to employees, support staff and volunteers for freedom from pulmonary tuberculosis.

A TRUE STORY...During a recent renewal survey, an independent resident did not have documentation of freedom from pulmonary tuberculosis. The facility was cited during their renewal survey, for not being in compliance. The resident obtained a TB test. The doctor found it abnormal. The resident did not have TB but had cancer. The “independent” resident has been going through chemotherapy and is reported to be doing fairly well with his/her condition.

...The Office of Assisted Living Licensing provides orientation (at no charge) to new and current providers on how the process works to open an assisted living facility. During this informative session, you will also receive an overview of statutes and rules for licensure compliance. Provider orientation is offered at 150 North 18th Avenue, 4th Floor every 2nd Wednesday of the month from 8:00 a.m. – 12:00 noon. No registration is required... For Tucson Provider Orientation: please call (520) 628-6965 for dates and location...

ADHS Office of Assisted Living Licensing

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Bill Gillman, Team Leader
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Program Specialist
Pam Grumeretz,
Examiner Tech II

We're on the Web!

See us at:

www.azdhs.gov/als/hcb

TOP TEN DEFICIENT AREAS ENFORCEMENT ACTIONS

1/1/07 through 12/31/07

#1

Medications and Medication Administration Records (MARs)

Not administering medications as prescribed by physician's orders

No Medication Administration Records (Mars)

Medication Administration Records not signed when administering medications

#2

Late Applications for Relicensure

Application for relicensure not received at least sixty days prior to expiration date

Application for relicensure received after expiration date of current license

#3

Fingerprint Clearance Requirements

Not submitting fingerprint clearance card applications within 20 days of employment

Caregivers, providing direct care to residents, denied fingerprint clearance

#4

No Manager's Designee

Manager does not designate a qualified caregiver responsible in his/her absence

A Qualified caregiver is not present and/or responsible for residents at ALL TIMES

#5

Restraints

Facility is not free from any object, material or condition that may be a hazard based on the physical, cognitive, and functional condition of the resident

Bed rails/side rails/bed attachments; Geri-chairs, and other "barriers" used as restraints

#6

Treatments/Service Plan(s)

No documentation of treatment(s) as prescribed by physician

Service plan(s) not initiated, completed, updated, and/or signed by all required individuals

#7

No Qualified Caregiver

No "Qualified" caregiver to provide care to residents

No "Qualified" caregiver designating in writing to provide care to residents, in absence of certified manager (when not physically present) in facility

#8

Fire Drills

No documentation of employee/resident fire drills

No documentation of conducting employee fire drills at least once every 3 months on EACH SHIFT

No documentation of resident fire drills conducted at least once every 6 months

#9

No Board Certified Manager

No Board Certified Manager designated responsibility for the facility

Board certified manager did not renew certification (not current with certification)

#10

Over Licensed Capacity

Facility caring for more residents that authorized by licensure (bed capacity)

Respite individuals count towards "licensed capacity" of facility