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ARTICLE 7. ASSISTED LIVING FACILITIES

R9-10-701. Definitions

The In addition to the definitions in A.R.S. § 36-401 and R9-10-101, the following definitions apply in this Article, unless the context otherwise specified requires:

- 1. "Abuse" means the intentional infliction of physical harm; injury caused by negligent acts or omissions; unreasonable confinement; sexual abuse or sexual assault; or a pattern of ridiculing or demeaning a resident, making derogatory remarks, verbally harassing, or threatening to inflict physical harm on a resident. [R9-10-101]
- 2. "Accept" or "acceptance" means:
 - a. An individual begins living in and receiving <u>assisted living</u> services at an assisted living facility; or
 - b. An individual begins receiving adult day health care services or respite care services from an assisted living facility.
- 3. "Accident" means an unexpected occurrence that causes harm to a resident.
- 4. "Activities of daily living" means bathing, dressing, grooming, eating, mobility, transfer, and toileting. [R9-10-101]
- 5. "Adult day health care services" means a program that provides planned care supervision and activities, personal care, personal living skills training, meals and health monitoring in a group setting during a portion of a continuous twenty four hour period. Adult day health services may also include preventive, therapeutic and restorative health related services that do not include behavioral health services. [ARS § 36-401]
- 6. "Adult foster care" means a residential setting which provides room and board and adult foster care services for at least one and no more than four adults who are participants in the Arizona long-term care system pursuant to Chapter 29, Article 2 of this title and in which the sponsor or the manager resides with the residents and integrates the residents who are receiving adult foster care into that person's family. [ARS § 36-401]
- "Applicant" means an individual, firm, partnership, association, or corporation that has submitted an application for: [R9-10-101]
 - a. An assisted living facility license;
 - b. Department approval of an exemption in R9-10-702; or
 - c. Department approval of an assisted living training program.
- 8. "Assessment" means a written analysis of a resident's abilities; preferences; and need for supervisory care services, personal care services, or directed care services.
- 9. "Assistance" means the help or aid necessary to complete a function or a task.

- "Assistant caregiver" means an individual an employee or volunteer who assists in providing helps a manager or caregiver provide supervisory care services, personal care services, or directed care services under the direct supervision of a manager or caregiver to a resident, and does not include a family member of the resident.
- 11."Assisted living center" or "center" means an assisted living facility that provides residentrooms or residential units to eleven or more residents.[ARS § 36-401]
- 12. "Assisted living facility" means a residential care institution, including adult foster care, that provides or contracts to provide supervisory care services, personal care services or directed care services on a continuing basis. [ARS § 36-401]
- 13. "Assisted living home" or "home" means an assisted living facility that provides resident rooms to ten or fewer residents. [ARS § 36-401]
- <u>"Assisted living services" means supervisory care services, personal care services,</u>
 <u>directed care services, behavioral health services, or ancillary services provided to a</u>
 <u>resident by or on behalf of an assisted living facility.</u>
- 14. "Bathing" means washing, rinsing, and drying all parts of an individual's body.
- 15. "Bedbound" means confined to a bed or chair because of an inability to ambulate even with assistance.
- 16. "Bedroom" or "room" means a portion of a facility that is wall-enclosed with a door where a resident sleeps and maintains personal items.
- 17. "Behavioral health residential services" means a therapeutic regimen of screening, evaluation, treatment, or rehabilitation provided on a 24-hour basis to individuals suffering from mental disorders, emotional conditions, or the effects of substance abuse.
- "Board of Examiners" means the Board of Examiners of Nursing Care Institution Administrators and Assisted Living Facility Managers.
- "Caregiver" means an individual an employee or volunteer who provides supervisory care services, personal care services, or directed care services to residents a resident, and does not include a family member of the resident.
- 20. "Charge" means a one-time payment or a payment that is not incurred in fixed, regular intervals.
- 21. "Chemical restraint" means any medication that is administered for purposes of discipline or convenience and is not required to treat a resident's medical symptoms.
- 22. "Clean" means free of dirt or debris by such methods as washing with soap and water, vacuuming, wiping, dusting, or sweeping.
- 23. "Common areas" means portions of a facility or facility grounds accessible to residents.

- 24. "Communicable disease" means the same as defined in A.A.C. R9-6-101. [R9-10-101]
- 25. "Conspicuously posted" means placed at a location within a facility that is accessible and visible to residents and the public. **[R9-10-101]**
- 26. "Continuous" means available at all times without cessation, break, or interruption.
- 27. "CPR" means cardiopulmonary resuscitation.
- 28. "Current" means up to date, extending to the present time. [R9-10-101]
- 29. "Day" means calendar day.
- 30. "Department" means the department of health services. [ARS § 36-401]
- 31. "Deposit" means monies or property given to a licensee to assure payment or performance.
- 32. "D.E.S." means the Arizona Department of Economic Security.
- 33. "Directed care services" means 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.[ARS § 36-401]
- 34. "Direction" means authoritative policy or procedural guidance for the accomplishment of a function or activity.[ARS § 36-401]
- 35. "Direct self-care" means a resident is able to recognize danger, summon assistance, express need, and make basic care decisions.
- 36. "Direct supervision" means the physical presence of a manager or caregiver providing direction to an assistant caregiver or volunteer in a facility or during an activity outside the facility.
- 37. "Documentation" means written supportive information. [R9-10-101]
- 38. "Door" means a movable hard-surfaced barrier for opening or closing an entranceway that swings on hinges or slides in groves and is capable of being closed for privacy and fire safety.
- 39. "Dressing" means choosing, putting on, securing fasteners, and removing clothing, footwear, artificial limbs, braces, and other appliances including those appropriate for current weather conditions.
- 40. "Eating" means putting food and fluids into the digestive system.
- 41. "Employee" means a licensee, manager, caregiver, or assistant caregiver who provides or assists in the provision of supervisory care services, personal care services, or directed care services to residents.

- 42. "Exploitation" means the illegal use of a resident's resources for another's profit or advantage according to A.R.S. Title 46, Chapter 4, or A.R.S. Title 13, Chapter 18, 19, 20, or 21. [R9-10-101]
- 43. "Facility" or "facilities" means buildings used by a health care institution for providing any types of services as defined in this chapter.[ARS § 36-401]
- 44. "Facility grounds" means the outdoor area, adjacent to the facility, designated by an applicant or licensee for use by residents.
- 45. "Fees" means payments in fixed, regular intervals.
- 46. "Food" means any raw, cooked or processed edible substance, ice, beverage or ingredient used or intended for use or for sale, in whole or in part, for human consumption.
- 47. "Food services" means the storage, preparation, serving, and cleaning up of food intended for consumption in an assisted living facility.
- 48. "General supervision" means guidance of a resident by an employee as required by the needs of the resident including the following: being aware of a resident's general whereabouts, monitoring the activities of the resident while on the premises to ensure the health, safety, and welfare of the resident; reminding the resident to carry out activities of daily living; and reminding the resident of activities or appointments.
- 49. "Grooming" means combing or brushing hair, washing face and hands, shaving, caring for nails, oral hygiene including denture care, and menstrual care.
- 50. "Guardian" means an individual appointed by a court according to A.R.S. Title 14, Chapter 5, Article 3.
- 51. "Hazard" means a condition or situation where a resident may suffer physical injury.[R9-10-101]
- 52. "Health care directive" means the same as defined in A.R.S. § 36-3201. [R9-10-101]
- 53. "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, directed care services and includes home health agencies as defined in section 36-151 and hospice service agencies. [ARS § 36-401]
- 54. "Health-related experience" means work in a health care institution, the professional fields of nursing, social work, gerontology, or other closely-related field, or providing health or health-related services to one or more adults.

- 55. "Health-related services" means services, other than medical, pertaining to general supervision, protective, preventive and personal care services, supervisory care services or directed care services. [ARS § 36-401]
- 56. "Home health agency" means an agency or organization, or a subdivision of such an agency or organization, which meets all of the following requirements. [ARS § 36-401]
 - a. Is primarily engaged in providing skilled nursing services and other therapeutic services.
 - Has policies, established by a group of professional personnel, associated with the agency or organization, including one or more physicians and one or more registered professional nurses, to govern the services referred to in subdivision (a), which it provides, and provides for supervision of such services by a physician or registered professional nurse.
 - c. Maintains clinical records on all patients.
- 57. "Hospice service agency" means an agency or organization, or a subdivision of that agency or organization, which is engaged in providing hospice services at the place of residence of its clients. [ARS § 36-401]
- 58. "Hour" means 60 minutes.
- 59. "Incident" means an occurrence or event that has the potential to cause harm to a resident. [R9-10-101]
- 60. "Independent" means able to complete a function or task without assistance.
- 61. "Intermittent" means periodically scheduled and predictable.
- 62. "Internal facility requirements" means guidelines and standards developed by a licensee that govern a resident's use and occupancy of an assisted living facility.
- 63. "Key" means a mechanical device used for holding or locking.
- 64. "Laundry service" means the process of cleaning linens and clothing.
- 65. "Learning objective" means the specific and measurable behavior, knowledge, or skill an individual demonstrates.
- 66. "Licensee" means the individual, firm or partnership, association, or corporation licensed
 by the Department to operate an assisted living facility. [R9-10-101]
- 67. "Manager" means an individual designated by the licensee <u>a governing authority</u> to act on the licensee's behalf <u>of the governing authority</u> in the onsite management of the assisted living facility.
- 68. "Medical practitioner" means any physician, dentist, podiatrist, or other individual licensed and authorized by law to use and prescribe drugs and devices for the treatment

of sick and injured human beings, or for the diagnosis or prevention of sickness in human beings in this state or any state, territory, or district of the United States. **[R9-10-101]**

- 69. "Medication" means a prescription medication as defined in A.R.S. § 32-1901 or a nonprescription drug as defined in A.R.S. § 32-1901 used to maintain health or to prevent or treat an illness, injury, or disease. [R9-10-101]
- 70. "Medication administration" or "administration of medication" means the application of a medication to its ultimate destination on the body of a resident. [R9-10-101]
- 71. "Medication organizer" means a container that is designed to hold doses of medication and is divided according to date or time increments.
- 72. "Mobility" means the ability to move within a residential environment.
- 73. "Neglect" means a pattern of conduct, without a resident's or the resident's informed consent as defined in A.R.S. § 46–451, resulting in deprivation of food, water, medication, medical services, shelter, cooling, heating, or other services necessary to maintain minimum physical or mental health. [R9-10-101]
- 74. "Nurse" means an individual licensed and in good standing as a registered nurse or a practical nurse as prescribed in A.R.S. Title 32, Chapter 15. [**R9-10-101**]
- 75. "Nurse practitioner" means an individual licensed as a registered nurse practitioner as prescribed in A.R.S. Title 32, Chapter 15. [**R9-10-101**]
- 76. "Nursing services" means those services pertaining to the curative, restorative and preventive aspects of nursing care that are performed at the direction of a physician by or under the supervision of a registered nurse licensed in this state. [ARS § 36-401]
- 77. "Personal care services" means 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. [ARS § 36-401]
- 78. "Personnel" means employees, support staff, and volunteers.
- 79. "Pharmacist" means an individual licensed as prescribed in A.R.S. Title 32, Chapter 18.[R9-10-101]
- 80. "Physical restraint" means the confinement of a resident or the use of any article, device, or garment that cannot be removed by a resident, used to restrict movement, and control the resident's behavior.
- 81. "Physician" means an individual licensed as prescribed in A.R.S. Title 32, Chapter 13 or Chapter 17.[ARS § 36-401]

- 82. "Physician assistant" means an individual licensed as prescribed in A.R.S. Title 32, Chapter 25. [**R9-10-101**]
- 83. "Poisonous or toxic materials" means chemicals such as insecticides, rodenticides, hazardous cleaning agents, and caustic acids.
- 84. "Potentially hazardous foods" means the same as defined in A.A.C. R9-8-112.
- 85. "Premises" means a facility, the facility's grounds and each building or grounds on contiguous property used for administering and operating an assisted living facility.
- 86. "Primary care provider" means a physician, a physician's assistant, or a <u>registered</u> nurse practitioner who directs a resident's medical care services.
- 87. "Private duty nurse" means a nurse who provides nursing services to a resident that are arranged, paid for, and overseen by the resident, the representative, or the resident's relatives.
- 88. "PRN" means pro re nata or medication given as needed. [R9-10-101]
- 89. "RN" means a registered nurse licensed as prescribed in A.R.S. Title 32, Chapter 15.
- 90. "Regular basis" means at recurring, fixed, or uniform intervals. [R9-10-101]
- 91. "Relative" means a child, parent, sibling, spouse, grandparent, grandchild, uncle, aunt, niece, nephew, or any individual of the same affiliation through marriage or adoption.
- 92. "Representative" means a resident's guardian or an individual designated in writing by a resident or by the resident's guardian to aid a resident or act on the resident's behalf. [R9-10-101 Patient's representative]
- 93. "Residency agreement" means a document signed by a resident or the representative and a licensee or the licensee's designee manager, detailing the terms of residency as agreed upon by the resident or the representative and the licensee manager.
- 94. "Resident" means an individual who is not a relative <u>family member</u> of the licensee and who:
 - a. Lives in an assisted living facility and receives supervisory care services, personal care services, or behavioral health services; or
 - b. Receives adult day health care services, or respite care services from an assisted living facility.
- 95. "Residential unit" or "unit" means a private an apartment, unless otherwise requested by a resident, that includes a living and sleeping space, kitchen area, private bathroom, and storage area.
- 96. "Respite care services" means services provided by a licensed health care institution to persons otherwise cared for in foster homes and in private homes to provide an interval of

rest or relief of not more than thirty days to operators of foster homes or to family members.

- 97. "Secure" means to control, or alert employees of, the egress of a resident from the facility or facility grounds through the use of a method, device, or structure that ensures resident safety. [Only used in this context in 715(G)(2) and described there.]
- 98. "Service plan" means a written description of a resident's need for supervisory care services, personal care services, or behavioral health services and the specific assisted living services to be provided to the resident.
- 99. "Short term" means 14 days or less.
- 100. "Significant change" means an observable deterioration or improvement in a resident's physical, cognitive, behavioral, or functional condition. [R9-10-101]
- 101. "Supervisory care services" means general supervision, including daily awareness of resident functioning and continuing needs, the ability to intervene in a crisis and assistance in the self administration of prescribed medications. [ARS § 36-401]
- 102. "Supervision" means direct overseeing and inspection of the act of accomplishing a function or activity. [ARS § 36-401]
- 103. "Support staff" means any individual who receives compensation from a licensee, but who does not provide supervisory care services, personal care services, or directed care services at an assisted living facility.
- 104. "Swimming pool" means a contained body of water that is 18 inches or more in depth at any point and wider than eight feet at any point and intended for swimming. [R9-10-101]
- 105. "Termination of residency" or "terminate residency" means a resident is no longer receiving assisted living services from an assisted living facility.
- 106. "Therapeutic diet" means foods prescribed by a physician or an individual authorized by law to prescribe foods. **[R9-10-101]**
- 107. "Toileting" means the discharge and disposal of body waste from bowel or bladder.
- 108. "Training program" means an individual or an organization that has received written approval from the Department to provide training to assisted living facility personnel and to verify that individuals demonstrate specific skills and knowledge in a level of training.
- 109. "Transfer" means the movement of an individual's body from a surface to another surface.
- 110. "Treatment" means a specific procedure used for the prevention, cure, or the improvement of a disease, injury, or illness. **[R9-10-101]**

111. "Volunteer" means an individual who provides supervisory care services, personal care services, or directed care services to a resident on a regular basis under the direct supervision of a manager or caregiver at all times but does not receive compensation.
 [R9-10-101]

R9-10-702. Licensing Classifications

- A. The Department shall sub-classify an assisted living facility according to facility size as follows:
 [Statutory definitions]
 - 1. An assisted living facility providing services to 10 or fewer residents is an assisted living home;
 - 2. An assisted living facility providing services to 11 or more residents is an assisted living center; or
 - An assisted living facility that meets the definition of adult foster care in A.R.S. § 36-401 is an adult foster care.
- **B.** An adult foster care shall comply with the requirements for an assisted living home except as provided by statute and this Article.
- C. The Department shall license an assisted living facility to provide one of the following levels of service: [Moved to 703]
 - 1. Supervisory care services,
 - 2. Personal care services, or
 - 3. Directed care services.
- **D.** To change an assisted living facility's sub-classification, a licensee shall submit an application for licensure as required by A.R.S. §§ 36-421 and 36-422. [Article 1]
- E. To change the level of service an assisted living facility is licensed to provide, a licensee shall submit to the Department a written request for a change in level of service and documentation of the assisted living facility's compliance with requirements in this Article for the requested level of service. [Article 1]
 - Within 60 days from the date of receipt of the request, the Department shall review the requested change and send written notice to the licensee. The Department may conduct an onsite review of the assisted living facility to determine compliance.
 - a. If an assisted living facility does not comply with this Article and the requirements for the requested level of service, the Department shall provide the licensee with written notice stating the requirements necessary for compliance with this Article and the requirements for the requested level of service.

- When the assisted living facility complies with the requirements of this Article and the requirements for the requested level of service, the Department shall send the licensee an amended license that incorporates the requested level of service but retains the expiration date of the current license.
- 2. A licensee shall not provide services at the requested level of service until an amended license is issued.
- F. The Department may grant an exception from the requirements in R9-10-716(C)(1)(a), R9-10-720(A)(1), R9-10-720(C)(1)(c), or R9-10-720(C)(2)(c) if a licensee or applicant can demonstrate that an alternate method is available to ensure the residents' health, safety, and welfare.
 - 1. The Department shall not grant an exception:
 - a. From local building codes, local ordinances, local fire codes, or local zoning requirements;
 - b. To a licensee operating on a provisional license; or
 - c. If the Department determines that an exception will not protect the health, safety, or welfare of a resident.
 - An applicant or licensee shall submit a written request for an exception on a Department provided form that includes:
 - a. The applicant's or licensee's name;
 - b. The name, address, and license number if applicable, of the assisted living facility;
 - c. The specific rule the applicant or licensee is requesting an exception from;
 - d. The reason or reasons an applicant is not able to comply with the rule; and
 - e. An alternative method that ensures that the health, safety, and welfare of residents is protected by the exception.
 - 3. The Department shall evaluate a request for an exception as follows:
 - a. Review the written request;
 - b. Verify submitted documentation;
 - e. If the requested exception involves a physical plant requirement, inspect the assisted living facility; and
 - d. If applicable, discuss the exception with the assisted living facility's manager or manager's designee, residents or representatives, or any individual the Department determines is necessary to evaluate the request.
- **G.** The Department shall approve or deny an exception as follows:
 - 1. The overall time-frame described in A.R.S. § 41–1072(2), is 90 days.

- The administrative completeness review described in A.R.S. § 41–1072(1) is 60 days and begins on the date the Department receives a request.
 - a. If any of the documents is missing or if information on the documents is deficient, the Department shall provide to the applicant a written notice of incompleteness that states each deficiency and the information or documents needed to complete the request. The 60 day time frame for the Department to finish the administrative completeness review is suspended from the date the Department provides the notice of incompleteness to the applicant until the date the Department receives the required information or missing document.
 - b. If all of the documents are submitted and the information on the documents is complete, the Department shall provide a written notice of administrative completeness to the applicant.
 - e. If the documents or information are not submitted within 120 days from the date of notice of incompleteness, the Department shall consider the request withdrawn.
 - d. If the Department grants an exception during the time provided to assess
 administrative completeness, the Department shall not provide a separate written
 notice of administrative completeness.
- 3. The substantive review time-frame described in A.R.S. § 41–1072(3) is 30 days and begins on the date the Department provides written notice of administrative completeness to the applicant.
 - a. If the applicant does not meet the requirements of this Article, the Department shall provide a written request for additional information to the applicant. The 30 day time-frame for the Department to finish the substantive review is suspended from the date the Department provides the written request to the applicant until the Department receives the additional information.
 - b. The applicant shall submit to the Department the information or documents identified in the written request for additional information within 30 days of the receipt of the written request.
 - c. The Department shall provide the applicant with a written notice of denial if:
 - The applicant does not submit the additional information within the timeframe in subsection (D)(3)(b); or

- Upon receipt of the additional information from the applicant, the
 Department determines that the applicant does not meet the requirements
 of this Article.
- d. An applicant may appeal the Department's determination according to A.R.S.
 Title 41, Chapter 6.
- 4. If an applicant meets the requirements of this Article, the Department shall provide a written notice of Department approval to the applicant.
- 5. The Department shall withdraw an exception if:
 - a. A licensee is operating on a provisional license;
 - b. A licensee does not comply with the conditions of the exception as approved by the Department; or
 - c. The Department determines that the health, safety, or welfare of residents is not protected by the exception.

<u>R9-10-702.</u> Supplemental Application Requirements

In addition to the requirements in R9-10-105, an applicant for a license as an assisted living facility shall:

- 1.Submit to the Department a copy of a valid fingerprint clearance card issued according toA.R.S. Title 41, Chapter 12, Article 3.1 for:[This is required under A.R.S. § 36-411.]
 - <u>a.</u> If the applicant is an individual, the applicant; or
 - b. If the applicant is a business organization, each individual with a 10% or greater ownership of the business organization;
- 2. Indicate on the application which of the following levels of assisted living services the applicant plans to provide:
 - <u>a.</u> <u>Supervisory care services</u>,
 - b. <u>Personal care services, or</u>
 - c. Directed care services; and
- 3. Indicate on the application whether the applicant plans to provide:
 - a. Adult day health care services, or
 - b. Behavioral health services.

R9-10-703. Administration

- A. A licensee is governing authority shall:
 - <u>Consist of one or more persons</u> responsible for the organization and management of an the assisted living facility. A licensee shall:;

- 1. Ensure compliance with federal and state laws, rules, and local ordinances;
- 2. Establish the scope of services for the assisted living facility;
- 3. <u>Approve or designate an individual to approve the policies and procedures for the</u> operation and administration of the assisted living facility;
- 2.4. Designate an onsite in writing a manager who: has the authority and responsibility to operate the assisted living facility. The manager and the licensee
 - <u>a.</u> <u>Is 21 years of age or older;</u>
 - b. Except for the manager of an adult foster care home, has either a:
 - <u>i.</u> Certificate as an assisted facility manager issued under A.R.S. § 36-446.04(C), or
 - <u>ii.</u> <u>A temporary certificate as an assisted facility manager issued under</u> A.R.S. § 36-446.06;
 - c. Has at least 12 months of health-related experience; and
 - <u>d.</u> may <u>May</u> be the same individual <u>as the governing authority;</u>
- 3. Permit an individual to manage no more than two health care institutions that may be located not more than 40 miles apart;
- 4.5. Designate another an acting manager who meets the requirements in subsection (A)(4) when the manager is expected to be absent from the premises for more than 30 consecutive days;
- 5. Notify the Department, in writing, of the following: [In Article 1]
 - a. A change of ownership no later than 30 days before the effective date of the change;
 - A change in the name of the assisted living facility no later than 30 days before the effective date of the change;
 - c. A termination of operation no later than 30 days before the termination; and
 - d. The location and arrangements for the maintenance of resident records no later than 30 days before the assisted living facility ceases operation;
- <u>6.</u> Except as provided in subsection (A)(5), notify the Department according to § A.R.S. 36 425(I) when there is a change in the manager and provide the name of the new manager;
- 6. Not act as a representative, agent, surrogate, health care power of attorney, power of attorney, guardian, or conservator of a resident who is not a relative and ensure that assisted living facility employees, support staff, or relatives of employees or support staff do not act as a representative, agent, surrogate, health care power of attorney, power of attorney, guardian, or conservator of a resident who is not a relative;

- Ensure that a manager and each manager's designee or caregiver who is able to read, write, understand, and communicate in English is on the premises;
- Except when a resident's service needs change as documented in the resident's service plan as required in R9-10-711(A)(7), ensure that a resident receives at least 30 days written notice before any increase in a fee or charge;
- 9. Ensure that an official of the following agencies is allowed immediate access to an assisted living facility: [each has its own authority for access so unneeded.]
 - 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: [in Resident

Rights]

- 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.
- 8. For an assisted living facility that is a business organization, ensure that a copy of a valid fingerprint clearance card, issued according to A.R.S. Title 41, Chapter 12, Article 3.1, is:
 - a. <u>Obtained for each individual with a 10% or greater ownership of the business</u> organization, and
 - b. Maintained by the assisted living facility; and
- 9. Adopt a quality management plan that complies with subsection (D).
- **B.** A licensee shall ensure that a manager of an assisted living facility: [below]
 - 1. Develops and implements written policies and procedures for the day-to-day operation of the assisted living facility including
 - a. Depositing and refunding deposits, fees, and charges;
 - b. Resolving resident grievances;
 - c. Terminating residency;
 - d. Obtaining information on resident preferences for:
 - i. Social, recreational, or rehabilitative activities; and
 - ii. Food;
 - e. Assisting residents with medication as required in R9-10-713, R9-10-722(D), and R9-10-723(E), as applicable;

- F. Protecting and releasing resident records and maintaining confidentiality of resident records;
- g. Ensuring the facility and facility grounds are safe and free from hazards based upon the physical, cognitive, and functional condition of the residents;
- h. Ensuring resident safety in an assisted living facility with a swimming pool, spa, or other contained body of water on the premises, if applicable; and
- i. Ensuring the safety of residents and other individuals and pet and animal sanitation, if pets or animals are maintained on the premises;
- 2. Conspicuously posts the following:
 - a. Resident rights;
 - b. Current phone numbers of the Arizona Department of Health Services' Office of Assisted Living Licensure, D.E.S. Adult Protective Services, 911 or other local emergency response number, the D.E.S. Long-Term Care Ombudsman, the Arizona Center for Disability Law, and the Governor's Office for Americans with Disabilities;
 - c. Internal facility requirements; and
 - d. Each document, schedule, or calendar required by state law and this Article;
- 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);
- 4. Designates, in writing, one or more individuals who are 21 years of age or older, who meet the qualifications for a caregiver in R9-10-706(C)(2) and (3) as the manager's designee. A manager's designee is physically present at the **facility** and in charge of the assisted living facility operations when the manager is not physically present at the facility; [above]
- 5. Hires and directs employees and support staff as necessary to ensure compliance with this
 Article; [Moved to new 708]
- Ensures each assistant caregiver is under the direct supervision of a manager or caregiver
 at all times; [Moved to new 708]
- 7. Ensures that an assistant caregiver, who is 16 or 17 years old, or a volunteer does not provide assistance to a resident for: [Moved to new 708]
 - a. Bathing,
 - b. Toileting,
 - c. Transfer,

- d. Self-administration of medication,
- e. Medication administration, or
- f. Nursing services;
- 8. Ensures that a manager or caregiver does not provide direct supervision to more than two assistant caregivers at any time; [Moved to new 708]
- 9. Ensures compliance with fingerprinting requirements contained in A.R.S. § 36-411;
- 10. Notifies a representative, or contacts a public fiduciary or a trust officer to take responsibility of a resident's financial affairs if the resident is incapable of handling financial affairs;
- 11. Notifies a resident's primary care provider or other medical practitioner if a resident or the representative refuses medical or nursing services, and maintains documentation of the notification in the resident's record for no less than 12 months from the date of notification;
- 12. When there is an accident, incident, or injury that effects the resident's health and safety:
 - a. Immediately notifies the representative, and if applicable:
 - i. The primary care provider;
 - ii. An emergency response team;
 - iii. The resident's case manager;
 - iv. The resident's emergency contact; and
 - b. Documents the following:
 - i. Date and time of the accident, incident, or injury;
 - ii. Description of the accident, incident, or injury;
 - iii. Names of individuals who observed the accident, incident, or injury;
 - iv. Action taken by employees, support staff, or volunteers;
 - v. Individuals notified by employees, support staff, or volunteers; and
 - vi. Action taken to prevent the accident, incident, or injury from occurring in the future;
- 13. Ensures each resident is assisted in exercising the resident's rights listed in R9-10-710;
- 14. Maintains documentation on the premises of licensing and vaccination of pets or animals, if applicable, as required by R9-10-718(12); and
- 15. Ensures the health and safety of a resident is maintained during relocation of a resident and that the resident's records are relocated with the resident;
- **C.** A manager may, upon written authorization by a resident or the representative, administer a personal funds account, not to exceed \$500 each month for the resident. The resident or the

representative may revoke, in writing, this authorization at any time. If a manager administers a resident's personal funds account, the manager shall:

- Maintain a separate record for each resident's personal funds account including all receipts and expenditures;
- Maintain the resident's personal funds account separate from any account of the assisted living facility; and
- 3. Provide a copy of a resident's personal funds account record to the resident or representative at least once every three months.

B. <u>A manager shall:</u>

- <u>Be directly accountable to the governing authority for all assisted living services or adult</u>
 <u>day health care services</u> provided by or through the assisted living facility;
- 2. <u>Have the authority and responsibility for operating the assisted living facility;</u>
- 3. Designate, in writing, a caregiver who is:
 - a. <u>21 years of age or older, and</u>
 - b. On the premises and responsible for assisted living services and adult day health care services provided by the assisted living facility when the manager is not available;
- <u>Not act as a representative and not allow an employee or a family member of an</u>
 <u>employee to act as a representative of a resident who is not a family member of the</u>
 <u>employee;</u>
- 5. If the assisted living facility administers personal funds accounts for residents and if authorized in writing by a resident or resident's representative to administer a personal funds account for the resident:
 - <u>a.</u> Ensure that the resident's personal funds account does not exceed <u>\$2,000;</u>
 - b. <u>Maintain a separate record for each resident's personal funds account, including</u> <u>all receipts and expenditures;</u>
 - <u>c.</u> <u>Maintain the resident's personal funds account separate from any account of the</u> <u>assisted living facility; and</u>
 - <u>d.</u> <u>Provide a copy of the record of the resident's personal funds account to the</u> resident or resident's representative at least once every three months;
- 6. Notify a resident's representative or family member if the resident is incapable of handling financial affairs; and

- <u>Except when a resident's need for assisted living services change</u>, as documented in the resident's service plan, ensure that a resident receives at least 30 days written notice before any increase in a fee or charge.
- <u>C.</u> <u>A manager shall ensure that policies and procedures are:</u>
 - <u>1.</u> Established, documented, and implemented that:
 - <u>a.</u> <u>Include personnel job descriptions, duties, and qualifications, including required</u> education, experience, skills, and knowledge for employees and volunteers;
 - b. Cover:
 - i. Orientation for employees and volunteers, and
 - ii. <u>In-service education for employees;</u>
 - <u>Cover cardiopulmonary resuscitation and first aid training for applicable</u>
 <u>employees and volunteers, including:</u>
 - <u>The method and content of cardiopulmonary resuscitation training</u>, which includes a demonstration of the employee's or volunteer's ability to perform cardiopulmonary resuscitation,
 - ii. <u>The qualifications for an individual to provide cardiopulmonary</u> resuscitation training,
 - iii. <u>The time-frame for renewal of cardiopulmonary resuscitation training</u>, and
 - iv. <u>The documentation that verifies that the employee or volunteer has</u> received cardiopulmonary resuscitation training;
 - <u>d.</u> <u>Cover staffing and recordkeeping;</u>
 - e. <u>Cover resident acceptance</u>, resident rights, and termination of residency;
 - <u>f.</u> <u>Cover the provision of assisted living services, including:</u>
 - i. <u>Coordinating the provision of assisted living services</u>,
 - ii. Making vaccination for influenza available to residents according to A.R.S. § 36-406(1)(d), and
 - <u>iii.</u> Obtaining resident preferences for food and the provision of assisted living services;
 - g. <u>Cover the provision of respite services or adult day health services, if applicable;</u>
 - <u>h.</u> <u>Cover resident records, including electronic records;</u>
 - i. <u>Cover personal funds accounts, if applicable;</u>
 - j. <u>Cover the receipt of and process for resolving complaints;</u>
 - <u>k.</u> <u>Cover health care directives;</u>

- <u>1.</u> <u>Cover medication procurement, if applicable, assistance in the self-administration</u> of medication, and medication administration;
- <u>m.</u> <u>Cover food services;</u>
- <u>n.</u> <u>Cover contract services;</u>
- o. <u>Cover equipment inspection and maintenance, if applicable;</u>
- p. Cover infection control; and
- <u>q.</u> <u>Cover quality management, including incident documentation;</u> [Took out informed consent]
- 2. <u>Available to all employees and volunteers</u> of the assisted living facility; and
- 3. <u>Reviewed at least once every 24 months and updated as needed.</u>
- **D.** <u>A manager shall ensure that:</u>
 - 1.
 A plan for a quality management program for the assisted living facility is established,

 documented, and implemented that includes:
 - a. <u>A method to identify, document, and evaluate incidents;</u>
 - b. <u>A method to collect data to evaluate the provision of services, including</u> oversight of employees and volunteers;
 - <u>c.</u> <u>A method to evaluate the data collected to identify a concern about the provision</u> of services;
 - <u>d.</u> <u>A method to make changes or take action as a result of the identification of a concern about the provision of services;</u>
 - e. <u>A method to determine whether actions taken improved the provision of services;</u> and
 - <u>f.</u> The frequency of submitting the documented report required in subsection (D)(2);
 - 2. A documented report is submitted to the governing authority that includes:
 - <u>a.</u> Each identified concern in subsection (D)(1)(c),
 - <u>b.</u> Changes made or actions taken on the basis of an identified concern in subsection
 (D)(1)(c), and
 - c. <u>Any requests for changes to be made or actions to be taken by the governing</u> authority on the basis of an identified concern in subsection (D)(1)(c);
 - 3. The report in subsection (D)(2) and the supporting documentation is maintained for 12 months after the date the report is submitted to the governing authority.
- E. <u>A manager shall ensure that:</u>
 - 1. Contracted services are provided according to the requirements in this Article;

- 2. <u>A contract includes the responsibilities of each contractor; and</u>
- 3. <u>A documented list of current contracted services is maintained that includes:</u>
 - a. <u>The name of each contractor, and</u>
 - b. <u>A description of the contracted services provided by the contractor.</u>
- **F.** <u>A manager shall ensure that the following are conspicuously posted:</u>
 - 1. <u>A list of resident rights;</u>
 - 2. <u>The current Department-issued license;</u>
 - 3. <u>Current phone numbers of:</u>
 - a. <u>The Arizona Department of Health Services' Office of Assisted Living Licensure;</u>
 - b. <u>Adult Protective Services in the Department of Economic Security;</u>
 - c. <u>The Department of Economic Security Long-Term Care Ombudsman;</u>
 - e. <u>The Arizona Center for Disability Law; and</u>
 - f. The Governor's Office for Americans with Disabilities; and
 - 4. The location at which the following are available for review:
 - a. <u>A copy of the most recent Department inspection report;</u>
 - b. Any plan of correction resulting from the Department inspection in subsection (F)(4)(a); and
 - c. A list of the services provided by the assisted living facility.
- **<u>G.</u>** <u>Unless otherwise stated, documentation required by this Article is provided to the Department</u> within two hours of the Department's request.

R9-10-704. <u>Suspected or Alleged</u> Abuse, Neglect, and <u>or</u> Exploitation Prevention and Reporting

- A. A manager, employee, or volunteer shall immediately report or cause a report to be made to Adult Protective Services or local law enforcement of suspected or alleged abuse, neglect, or exploitation as required by A.R.S. § 46-454.
- **B.** A licensee shall:
 - Notify the Department of suspected or alleged abuse, neglect, or exploitation within 24 hours of receiving the allegation;
 - Document the initial report and maintain documentation of the report on the premises for 12 months from the date of the report;
 - 3. Report suspected or alleged abuse, neglect, or exploitation to Adult Protective Services or to a local law enforcement agency as prescribed in A.R.S. § 46-454; and
 - Investigate suspected or alleged abuse, neglect, or exploitation and develop a written report within 14 days of the initial report of the suspected or alleged abuse, neglect, or

exploitation. The licensee shall send the written report to the Department, Adult Protective Services, and any local law enforcement agency previously notified and maintain a copy of the written report on the premises for 12 months from the date of the report. A written report shall contain the following:

- a. Dates, times, and description of the suspected or alleged abuse, neglect, or
 exploitation; description of any injury to the resident; change in the resident's
 physical, cognitive, functional, or emotional condition; actions taken by the
 licensee; individuals and agencies notified by the licensee; names of witnesses to
 the suspected or alleged abuse, neglect, or exploitation; and
- b. Action taken by the licensee to prevent the suspected or alleged abuse, neglect, or exploitation from occurring in the future.

If abuse, neglect, or exploitation of a resident is alleged or suspected, a manager shall:

- 1. Take immediate action to stop the alleged or suspected abuse, neglect, or exploitation;
- <u>Immediately report</u>, as required in A.R.S. § 46-454, the alleged or suspected abuse, neglect, or exploitation of the resident:
 - <u>a. To the local law enforcement agency; or</u>
 - b. <u>To Adult Protective Services in the Department of Economic Security;</u>
- 3. Document the action in subsection (1) and the report in subsection (2) and maintain the documentation for 12 months after the date of the report;
- 4. Investigate the alleged or suspected abuse, neglect, or exploitation and develop a written report of the investigation within 48 hours after the report required in subsection (2) that includes:
 - a. Dates, times, and description of the alleged or suspected abuse, neglect, or exploitation;
 - b. <u>A description of any injury to the resident and any change to the resident's</u> physical, cognitive, functional, or emotional condition;
 - <u>c.</u> <u>The names of witnesses to the alleged or suspected abuse, neglect, or</u> <u>exploitation; and</u>
 - <u>d.</u> <u>The actions taken by the manager to prevent the alleged or suspected abuse,</u> <u>neglect, or exploitation from occurring in the future;</u>
- 5. Submit a copy of the investigation report required in subsection (4) to the Department within 5 working days after submitting the report in subsection (2); and
- 6. Maintain a copy of the investigation report required in subsection (4) for 12 months after the date of the investigation report.

R9-10-705. Limitations on Level of Services [Moved into new 705]

A licensee shall ensure that an assisted living facility does not accept or retain a resident who requires:

- 1. Physical restraints,
- 2. Chemical restraints,
- 3. Behavioral health residential services,
- 4. Services that the assisted living facility is not licensed to provide; or
- 5. Services that the assisted living facility is not able to provide.

R9-10-706. <u>R9-10-705.</u> Personnel Qualifications and Records

- **A.** A licensee shall ensure that:
 - 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 one 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
 - 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;
 - 2. Each manager and caregiver:
 - a. Obtains first aid training specific to adults;
 - b. Obtains CPR training specific to adults which includes a demonstration of the individual's ability to perform CPR; and
 - c. Maintains current training in first aid and CPR.
- **B.** A licensee shall ensure that a manager, at the starting date of employment as a manager, meets all of the following:
 - 1. Is 21 years of age or older;
 - 2. Is certified by the Board of Examiners as an assisted living facility manager as required in A.R.S. Title 36, Chapter 4, Article 6 or meets one of the following: [36-446.01 doesn't allow grandfathering or alternatives]
 - a. Is certified by the Board of Examiners as an adult care home manager before the effective date of this Article and maintains current certification by the Board of Examiners; or

- b. Is exempt from certification under A.R.S. § 36-446.04;
- 3. Provides verification of completion of training from a training program as stated in R9-10-724(B) that states the individual has completed manager training or provides one of the following:
 - a. Documentation of adult care home manager training from a Board of Examiners approved training program before the effective date of this Article;
 - b. A license issued to the individual by the Board of Examiners as an administrator of a nursing care institution;
 - c. Documentation of sponsorship of an adult foster care on the effective date of this Article; or
 - d. Documentation of employment as a manager of an unclassified residential care institution, supportive residential living center, or supervisory care home on the effective date of this Article;
- 4. Provides verification of completion of training from a training program as stated in R9-10-724(B) that states the individual is trained in the level of service the assisted living facility is licensed to provide or documentation of one of the following:
 - a. For supervisory care services, employment of the individual as a manager or caregiver of a supervisory care home on the effective date of this Article;
 - For supervisory care services or personal care services, employment of the individual as a manager or caregiver of a supportive residential living center on the effective date of this Article;
 - For supervisory care services, personal care services, or directed care services, one of the following:
 - Documentation of training as a manager or caregiver from a Board of Examiners approved training program before the effective date of this Article;
 - ii. A nursing care institution license issued by the Board of Examiners;
 - iii. A nurse's license issued to the individual under A.R.S. Title 32, Chapter 15;
 - iv. Documentation of employment as a manager or caregiver of an unclassified residential care institution on the effective date of this Article;
 - Documentation of sponsorship of or employment as a caregiver in an adult foster care home on the effective date of this Article; or

- A certificate as a nursing assistant in good standing under A.R.S. Title
 32, Chapter 15 and employment as a caregiver in an adult care home on the effective date of this Article; and
- 5. Has a minimum of 12 months of health-related experience.
- **C.** A licensee shall ensure that a caregiver, at the starting date of employment as a caregiver, meets all of the following:
 - 1. Is 18 years of age or older;
 - 2. Meets the training requirements in subsection (B)(4); and
 - 3. Has a minimum of three months of health-related experience; and
- **D.** A licensee shall ensure that an assistant caregiver, at the starting date of employment as an assistant caregiver, is 16 years of age or older.
- **E.** A licensee shall ensure that a file is maintained on the premises for each employee containing the following:
 - 1. The employee's name, date of birth, home address, and telephone number;
 - 2. Documentation of:
 - a. Freedom from pulmonary tuberculosis as required in subsection (A)(1);
 - b. Compliance with fingerprinting requirements in R9-10-703(B)(9);
 - c. Current training in CPR and first aid as required in subsection (A)(2);
 - d. Employee qualifications required in subsections (B), (C), or (D);
 - e. Employee orientation required in R9-10-707(A); and
 - f. Ongoing training required in R9-10-707(B), R9-10-722(B), and R9-10-723(C), as applicable;
 - 3. An employee's starting date of employment and ending date, if applicable; and
 - 4. For each employee hired after the effective date of this Article, at least two personal and two professional or work-related references, if the employee has previous work experience, and documentation of the licensee's good faith effort to contact each reference.
- **F.** A licensee shall ensure a file is maintained on the premises for each volunteer and support staff who has contact on a regular basis with residents that contains:
 - 1. The individual's name, home address, and telephone number; and
 - 2. Documentation of freedom from pulmonary tuberculosis as required in subsection (A)(1).
- **G.** A licensee shall ensure that all records required by this Section are maintained throughout the individual's period of employment or service and for at least 12 months from the individual's last date of employment or service.

- A. <u>A manager shall ensure that:</u>
 - 1. Except as specified in A.R.S. § 36-411(H), an employee provides to the manager a copy of a:
 - a. Valid fingerprint clearance card issued according to A.R.S. Title 41, Chapter 12, Article 3.1; or
 - <u>b.</u> Fingerprint clearance card application showing that the employee submitted the application to the fingerprint division of the Department of Public Safety under A.R.S. § 41-1758.02 within 20 working days after becoming an employee;
 - 2. <u>A volunteer who is a caregiver or assistant caregiver</u>:
 - <u>a.</u> <u>Complies with subsection (A)(1)(a) or (b), or</u>
 - b.Provides assisted living services to residents under the supervision of an
individual who has a valid fingerprint clearance card;
 - 3. The assisted living facility complies with the requirements in A.R.S. § 36-411(C); and
 - <u>4.</u> An employee or a volunteer does not act as a caregiver or an assistant caregiver until the requirements in A.R.S. § 36-411 and subsections (A)(1), (2), and (3), as applicable, are <u>met.</u>
- **B.** A manager shall ensure that:
 - <u>1. A caregiver:</u>
 - a. <u>Is 18 years of age or older, and</u>
 - <u>b.</u> Has documentation of completion of a caregiver training program that complies with A.A.C. R4-33-702(A)(5);
 - 2. <u>An assistant caregiver:</u>
 - a. <u>Is 16 years of age or older, and</u>
 - b. <u>Interacts with residents under the supervision of a manager or caregiver;</u>
 - 3. <u>Caregivers are available to:</u>
 - <u>Meet the scheduled and unscheduled needs of residents for supervisory care</u>
 <u>services</u>, personal care services, and directed care services, that are within the
 <u>scope of services of the assisted living facility</u>; and
 - b. <u>Provide the assisted living services</u> in a resident's service plan;
 - <u>A manager, a caregiver, or an assistant caregiver, before being employed or beginning</u>
 <u>volunteer service</u> and every 12 months after the starting date of employment or volunteer
 <u>service</u>, provides evidence of freedom from infectious tuberculosis as required in R9-10-112;

- <u>Before providing assisted living services to a resident, a caregiver or an assistant</u>
 <u>caregiver receives orientation that:</u>
 - <u>a.</u> <u>Is specific to the duties to be performed by the caregiver or assistant caregiver;</u> <u>and</u>
 - b. Includes training on:
 - <u>i.</u> <u>Personnel policies;</u>
 - ii. Fire, safety, and emergency procedures;
 - iii. <u>Accident, emergency, and injury reporting;</u>
 - iv. Incident reporting;
 - <u>v.</u> <u>Resident rights:</u>
 - vi. Enhancing communication skills;
 - vii. Abuse, neglect, and exploitation prevention and reporting; and
 - <u>viii.</u> Basic infection control techniques, including hand washing and prevention of communicable diseases; and
- 6. Before providing personal care services or directed care services to a resident, a manager or caregiver:
 - 1. <u>Receives first aid training and cardiopulmonary resuscitation training specific to</u> adults, or
 - <u>Provides documentation of having received first aid training and</u>
 <u>cardiopulmonary resuscitation training specific to adults within the previous 12</u>
 <u>months.</u>
- <u>C.</u> <u>A manager of an assisted living home shall ensure that:</u>
 - 1.An individual residing in an assisted living home, who is not a resident, a manager, a
caregiver, or an assistant caregiver:
 - <u>a.</u> <u>Either:</u>
 - i. Complies with subsection (A)(1); or
 - ii. Interacts with residents only under the supervision of an individual who has a valid fingerprint clearance card; and
 - b. If the individual is 12 years of age or older, provides evidence of freedom from infectious tuberculosis as required in R9-10-112; and
 - <u>Documentation of compliance with the requirements in subsection (C)(1)(a) and evidence</u> of freedom from infectious tuberculosis, if required under subsection (C)(1)(b), is maintained for each individual residing in the assisted living home who is not a resident, a manager, a caregiver, or an assistant caregiver.

- **D.** A manager shall ensure that a personnel record for each employee or volunteer:
 - <u>1.</u> <u>Includes:</u>
 - <u>a.</u> <u>The employee's or volunteer's name, date of birth, home address, and contact</u> telephone number;
 - b. The name and telephone number of an individual to be notified in case of an emergency;
 - <u>c.</u> The starting date of employment or volunteer service and, if applicable, the ending date; and
 - d. <u>As applicable, documentation of:</u>
 - <u>Qualifications, including education, experience, skills, and knowledge</u>
 applicable to the employee's or volunteer's job duties;
 - ii. Work experience;
 - <u>iii.</u> Evidence of freedom from infectious tuberculosis, as required in subsection (B)(4);
 - iv. Orientation and in-service education;
 - v. Current training in first aid and cardiopulmonary resuscitation; and
 - vi. <u>Compliance with the requirements in A.R.S.</u> § 36-411(A) and (C); and
 - 2. Is maintained by the assisted living facility for at least two years after the last date the employee or volunteer provided services for the assisted living facility.

R9-10-707. Employee Orientation and Ongoing Training [Moved to new 705]

- **A.** A licensee shall ensure that a new employee completes orientation within 10 days from the starting date of employment that includes:
 - 1. Orientation to the characteristics and needs of the assisted living facility's residents;
 - 2. The assisted living facility's philosophy and goals;
 - Promotion of resident dignity, independence, self-determination, privacy, choice, and resident rights;
 - 4. The significance and location of resident service plans, and how to read and implement a service plan;
 - 5. Internal facility requirements and the assisted living facility's policies and procedures;
 - 6. Confidentiality of resident records and resident information;
 - 7. Infection control;
 - 8. Food preparation, service, and storage, if applicable;
 - 9. Abuse, neglect, and exploitation prevention and reporting requirements;

- 10. Accident, incident, and injury reporting; and
- 11. Fire, safety, and emergency procedures.
- 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.

R9-10-708. Personnel Requirements [Moved to new 705]

- A. A licensee shall ensure there are sufficient personnel to provide the following unless Arizona
 Long Term Care System contracts, as provided by A.R.S. Title 36, Chapter 29, Article 2, permit otherwise:
 - 1. Supervisory care services, personal care services, or directed care services, consistent with the level of service the assisted living facility is licensed to provide;
 - 2. Services established in each resident's service plan;
 - 3. Services to meet the needs of each resident including scheduled and unscheduled needs, general supervision, and the ability to intervene in a crisis 24 hours a day;
 - 4. Food services;
 - 5. Environmental services required in R9-10-718;
 - 6. Evacuations of residents during emergencies; and
 - 7. Ongoing social, recreational, or rehabilitative activities.
- **B.** A licensee shall ensure that a personnel schedule:
 - 1. Indicates the date, scheduled work hours, and name of each employee assigned;
 - 2. Reflects actual work hours; and

3. Is maintained on the premises for at least 12 months from the last date on the schedule.

R9-10-709. <u>R9-10-706.</u> Residency <u>and Residency</u> Agreements

- A. The following requirements apply to a resident accepted into an assisted living facility after the effective date of this Article and to a resident who is not an enrolled member of the Arizona Long Term Care System as provided by A.R.S. Title 36, Chapter 29, Article 2.
- **B.** A licensee shall ensure that there is a written agreement signed by the licensee and any individual submitting a deposit or other pre-payment of fees before the licensee receives a deposit or other pre-payment of fees.
- A. A manager shall ensure that each resident, before being accepted and every 12 months after the date of acceptance, provides evidence of freedom from infectious tuberculosis as required in R9-10-112.
- **B.** A manager shall ensure that:
 - 1. Within 90 days before an individual is accepted by an assisted living facility:
 - a. <u>The individual's needs are determined by a:</u>

<u>i. Physician,</u>

- ii. <u>Registered nurse practitioner,</u>
- iii. <u>Registered nurse, or</u>
- iv. Physician's assistant; and
- b. <u>The determination required in subsection (B)(1)(a) is reviewed by the manager to</u> ensure that:
 - i. <u>The individual does not need medical services;</u>
 - ii. <u>Except as provided in subsection (C), the individual does not need</u> nursing services:
 - iii.If the determination required in subsection (B)(1)(a) indicates the
individual needs behavioral health services, the individual's behavioral
health issue is secondary to a need for supervisory care services, personal
care services, or directed care services;
 - iv. The assisted living services needed by the individual are within the assisted living facility's scope of service; and
 - v. <u>The assisted living facility has the ability to provide the assisted living</u> services needed by the individual; and
- <u>2.</u> The assisted living facility does not accept or retain a resident who requires restraints, including the use of bedrails.

- <u>C.</u> <u>A manager may accept or retain a resident receiving nursing services from a home health agency</u> or hospice service agency. **[from 721 and modified]**
- **C.D.** A licensee Before or at the time of an individual's acceptance by an assisted living facility, a manager shall ensure that the individual or individual's representative signs a written residency agreement with the assisted living facility that includes:
 - 1. Each resident has a residency agreement that includes the:
 - a.<u>1.</u> Terms of occupancy, including:
 - a. resident Resident responsibilities and obligations, and
 - b. Obligations of the assisted living facility;
 - b.2. Services <u>A list of the services</u> to be provided <u>by the assisted living facility</u> to the resident <u>and the fees for these services;</u>
 - e. The amount and purpose of any fee, charge, and deposit, including any fee or charge for any days a resident is absent from the assisted living facility;
 - d.3. Services <u>A list of the services</u> that are available <u>from the assisted living facility</u> at an additional fee or charge;
 - e.4. Assisted living facility's The policy for refunding fees, charges, or deposits;
 - f. Assisted living facility's responsibility to provide at least 30 days written notice before the effective date of any change in a fee or charge. A licensee is not required to provide 30 day written notice of increase to a resident whose service needs change, as documented in the resident's service plan;
 - g.5. Assisted living facility's The policy and procedure for termination of residency; and
 - h.<u>6.</u> Assisted living facility's grievance procedure; <u>The process for resolving complaints.</u>
 - 2. A residency agreement is signed and dated by the manager or the manager's designee and the resident or the representative within five days after the resident's acceptance into the assisted living facility;
 - 3. A copy of the residency agreement is given to the resident or the representative; and
 - A residency agreement that has been signed, as stated in subsection (C)(2), is maintained on the premises throughout the resident's residency at the assisted living facility.
- **D.** If a licensee receives a deposit or pre-payment of fees from a resident or a representative, the licensee shall ensure that:
 - 1. Except for a Life Care Contract regulated under A.R.S. Title 20, Chapter 8, a deposit does not exceed the amount of one month's fees;
 - A deposit is maintained in a bank account separate from the assisted living facility's operating expenses;

- 3. A deposit or portion of a deposit is not used for any purpose other than as stated in the resident's residency agreement; and
- 4. Only the following are deducted from the deposit:
 - a. Damages to property caused by the resident, excluding normal wear and tear;
 - b. A fee or charge incurred by the resident; or
 - c. The resident's documented non-compliance with the residency agreement.
- **E.** A licensee or resident may terminate residency as follows:
 - 1. A licensee may terminate residency of a resident without notice if:
 - a. The resident exhibits behavior that is an immediate threat to the health and safety of the resident or other individuals in the assisted living facility;
 - b. The resident's urgent medical or health needs require immediate transfer to another health care institution; or
 - c. The resident's care and service needs exceed the services the assisted living facility is licensed to provide;
 - 2. A licensee may terminate residency of a resident after providing 14 days written notice to the resident or the representative for one of the following reasons:
 - a. Documentation of failure to pay fees or charges;
 - b. Documentation of the resident's non-compliance with the residency agreement or internal facility requirements;
 - 3. Except as provided by subsections (E)(1) and (2), a licensee shall not terminate residency of a resident without providing the resident or the representative 30 days written notice;
 - 4. A resident or the representative may terminate residency of a resident without notice due to the following, as substantiated by a governmental agency:
 - a. Neglect;
 - b. Abuse;
 - c. Exploitation; or
 - d. Conditions of imminent danger to life, health, or safety; and
 - 5. A resident or the representative may terminate residency of a resident after providing 14 days written notice to the licensee for documentation of the licensee's failure to comply with the resident's service plan or residency agreement.
- **F.** A licensee shall ensure that a written notice of termination of residency includes:
 - 1. The reason for the termination of residency;
 - 2. The effective date of the termination of residency;
 - 3. The resident's right to grieve the termination of residency;

- 4. The assisted living facility's grievance procedure; and
- 5. The assisted living facility's refund policy.
- **G.** A licensee shall provide the following to a resident or a representative upon issuing a written notice of termination of residency:
 - 1. A copy of the resident's service plan;
 - 2. Documentation that the resident is free from pulmonary tuberculosis; and
 - 3. The phone numbers and addresses of the local area agency on aging and Long Term Care Ombudsman.
- **H.** A licensee shall not request or retain fees as follows:
 - If a resident dies or if a resident or representative terminates residency as permitted in subsection (E)(4), a licensee shall not request or retain fees after the date of the resident's death or termination of residency;
 - 2. If termination of residency occurs as permitted in subsection (E)(1), (2), or (5), a licensee shall not request or retain fees for more than 14 days from the date the written notice was received by the assisted living facility; and
 - 3. For reasons other than identified in subsections (H)(1) and (2), the licensee shall not request or retain fees for more than 30 days after termination of residency.
- I. Within 30 days after the date of termination of residency, a licensee shall provide to the resident, the representative, or the individual to be contacted in the event of a significant change in the resident's condition:
 - 1. A written statement that includes:
 - a. The disposition of the resident's personal property;
 - b. An accounting of all fees, personal funds, or deposits owed to the resident; and
 - e. An accounting of any deduction from fees or deposits; and
 - 2. All fees or deposits required by this Section and personal funds.
- **E.** <u>A manager shall:</u>

1. <u>Before or at the time of an individual's acceptance by an assisted living facility, provide</u> to the resident or resident's representative a copy of:

- <u>a.</u> <u>The residency agreement in subsection (D),</u>
- b. Resident's rights, and
- c. The policy and procedure on health care directives; and
- 2. <u>Maintain the original of the residency agreement in subsection (D) in the resident's</u> record.

- **F.** If an assisted living facility issues a written notice of termination of residency to a resident or the resident's representative because the resident needs services the assisted living facility is either not licensed to provide or is licensed to provide but not able to provide, a manager shall ensure that the written notice of termination of residency includes a description of the:
 - 1. Specific services that the resident needs that the assisted living facility is either not licensed to provide or is licensed to provide but not able to provide, and
 - <u>2.</u> Level of care that may provide services to meet the resident's needs after termination of residency.

R9-10-710. <u>R9-10-707.</u> Resident Rights

- A. A licensee shall ensure that a resident or representative is provided the following at the time the resident is accepted into an assisted living facility: [See new 703(F)]
 - 1. A list of current resident rights;
 - 2. A copy of current internal facility requirements; and
 - 3. Current phone numbers of:
 - a. The Arizona Department of Health Services' Office of Assisted Living Licensure;
 - b. D.E.S. Adult Protective Services;
 - c. 911 or other local emergency response;
 - d. The D.E.S. Long-Term Care Ombudsman;
 - e. The Arizona Center for Disability Law;
 - f. The Governor's Office for Americans with Disabilities; and
 - g. An entity that provides information on health care directives.
- **B.** A licensee shall ensure that a resident or the representative acknowledges, in writing, receipt of the items in subsection (A).
- **C.** A licensee shall ensure that language barriers or physical disabilities do not prevent a resident or representative from becoming aware of internal facility requirements and the resident rights.
- **D.** A licensee shall ensure that a resident has the following rights:
 - 1. To live in an environment that promotes and supports each resident's dignity, individuality, independence, self-determination, privacy, and choice;
 - 2. To be treated with consideration and respect;
 - To be free from abuse, neglect, exploitation, and physical restraints and chemical restraints;
 - To privacy in correspondence, communications, visitation, financial and personal affairs, hygiene, and health-related services;

- 5. To receive visitors and make private phone calls;
- 6. To participate or allow the representative or other individual to participate in the development of a written service plan;
- 7. To receive the services specified in the service plan, and to review and re-negotiate the service plan at any time;
- 8. To refuse services, unless such services are court ordered or the health, safety, or welfare of other individuals is endangered by the refusal of services;
- 9. To maintain and use personal possessions, unless such use infringes upon the health, safety, or welfare of other individuals;
- 10. To have access to common areas in the facility;
- To request to relocate or refuse to relocate within the facility based upon the resident's needs, desires, and availability of such options;
- 12. To have financial and other records kept in confidence. The release of records shall be by written consent of the resident or the representative, except as otherwise provided by law;
- 13. To review the resident's own records during normal business hours or at a time agreed upon by the resident and the manager;
- 14. To review a copy of this Article during normal business hours or at a time agreed upon by the resident and the manager;
- 15. To review the assisted living facility's most recent survey conducted by the Arizona Department of Health Services, and any plan of correction in effect during normal business hours or at a time agreed upon by the resident and the manager;
- 16. To be informed, in writing, of any change to a fee or charge at least 30 days before the change, unless the resident's service needs change, as documented in the resident's service plan as required in R9-10-711(Λ)(7);
- 17. To submit grievances to employees, outside agencies, and other individuals without constraint or retaliation;
- 18. To exercise free choice in selecting activities, schedules, and daily routines;
- 19. To exercise free choice in selecting a primary care provider, pharmacy, or other service provider and assume responsibility for any additional costs incurred as a result of such choices;
- 20. To perform or refuse to perform work for the assisted living facility;
- 21. To participate or refuse to participate in social, recreational, rehabilitative, religious, political, or community activities; and

22. To be free from discrimination in regard to race, color, national origin, sex, sexual orientation, and religion and to be assured the same civil and human rights accorded to other individuals.

A manager shall ensure that: [Previous subsection (A) moved to 703]

- <u>1.</u> <u>A resident:</u>
 - <u>a.</u> <u>Has privacy in:</u>
 - <u>i.</u> <u>Care for personal needs;</u>
 - ii. Receiving medical services, nursing services, or health-related services;
 - iii. Correspondence, communications, and visitation; and
 - iv. Financial and personal affairs:
 - b. <u>Is free from the following:</u>
 - <u>i.</u> <u>The intentional infliction of physical, mental, or emotional pain unrelated</u> to the services the resident is receiving;
 - ii. Exploitation;
 - iii. Neglect:
 - iv. <u>Restraints;</u>
 - iv. Sexual abuse according to A.R.S. § 13-1404; and
 - v. Sexual assault according to A.R.S. § 13-1406;
 - <u>c.</u> <u>May maintain, use, and display personal items unless the personal items</u> constitute a hazard; and
 - <u>d.</u> <u>May choose to participate or refuse to participate in social, recreational,</u> <u>rehabilitative, religious, political, or community activities; and</u>
- <u>A resident or resident's representative:</u>
 - <u>a.</u> <u>Is given the opportunity to participate in the development and updating of the</u> resident's service plan;
 - <u>b. May:</u>
 - i. <u>Request or consent to relocation within the facility, and</u>
 - ii. Except when relocation is necessary based on a change in the resident's condition as documented in the resident's service plan, refuse relocation within the facility:
 - <u>c.</u> Has access to the resident's records during normal business hours or at a time agreed upon by the resident or resident's representative and the manager;
 - <u>d.</u> <u>Is informed of:</u>
 - i. The rates and charges for services before the services are initiated;

- <u>A change in rates or charges at least 30 days before the change is</u>
 <u>implemented, unless the change in rates or charges results from a change</u>
 <u>in services;</u>
- <u>A change in services at least 30 days before the change is implemented,</u>
 <u>unless the resident's service plan changes; and</u> [Removed reference to
 <u>health care directives</u>]
- iv. <u>The process for filing a complaint; and</u>
- e. May submit complaints without retaliation.
- **<u>B.</u>** <u>A manager shall ensure that:</u>
 - 1. <u>A resident's personal and private property are not subject to misappropriation; and</u>
 - 2. <u>A resident's financial records are kept confidential and not released without the written</u> consent of the resident or resident's representative, except as otherwise required or permitted by law.

R9-10-711. <u>R9-10-708.</u> Requirements for Service Plans and Health-Related Providing Services

- **A.** A licensee Except as required in subsection (B), a manager shall ensure that a resident has a written service plan that:
 - 1. Is initiated the day a resident is accepted into the assisted living facility;
 - 2.1. Is is completed no later than 14 days after the resident's date of acceptance;
 - 3.2. Is developed with assistance and review from:
 - a. The resident or <u>resident's</u> representative;
 - b. The manager or manager's designee;
 - c. <u>A registered nurse</u>, if the resident is receiving nursing services, medication administration, or is unable to direct self-care;
 - d. The resident's case manager, if applicable;
 - e.d. Any individual requested by the resident or the <u>resident's</u> representative; and
 - f.e. If applicable and necessary, any of the following: caregivers, assistant caregivers, the resident's primary care provider, or other medical practitioner, individuals who have provided medical services, nursing services, or health-related services to the resident;
 - 4. Is based on an assessment conducted with resident interaction and by the individuals in subsection (A)(3);
 - 5.<u>3.</u> Includes the following:

- a. <u>A summary of the resident's medical or health problems, including physical,</u> <u>mental, and emotional conditions or impairments;</u>
- <u>b.</u> The level of service the resident is receiving;
- b.c. The amount, type, and frequency of health-related assisted living services needed by being provided to the resident, including medication administration or assistance the resident requires with the self-administration of medications;
- d.For a resident who requires intermittent nursing services or medicationadministration, an assessment by a registered nurse;
- <u>e.</u> <u>If applicable, a determination by a medical practitioner that evacuation from the</u> <u>facility during a drill would cause harm to the resident:</u>
- <u>f.</u> For a resident who will be storing medication in the resident's bedroom or residential unit, how the medication will be stored and controlled; and
- e.g. Each individual responsible for the provisions of the service plan Any health care directives;
- 6. Is signed and dated by:
 - a. The resident or the representative;
 - b. The manager or the manager's designee;
 - c. The nurse, if a nurse assisted in the preparation or review of the plan; and
 - d. The case manager, if a case manager assisted in the preparation or review of the plan; and
- 7.4.Is reviewed and updated according to the requirements in subsection (A)(3) through (6)based on changes in the requirements in subsections (A)(3)(a) through (f):
 - a. No later than 14 days after a significant change in the resident's physical, cognitive, or functional condition; and
 - b. As follows:
 - i. At least once every 12 months for a resident receiving supervisory care services;
 - ii. At least once every six months for a resident receiving personal care services; and
 - iii. At least once every three months for a resident receiving directed care services..; and
- 5. When initially developed and when updated, is signed and dated by:
 - a. <u>The resident or resident's representative;</u>
 - b. <u>The manager; and</u>

- c. The registered nurse who assisted in the preparation or review of the service plan, if applicable.
- **B.** A licensee shall ensure that a resident is provided the following, consistent with the level of service the assisted living facility is licensed to provide:
 - 1. Supervisory care services, personal care services, or directed care services specified in the resident's service plan;
 - 2. Supervisory care services, personal care services, or directed care services to meet a resident's scheduled and unscheduled needs;
 - 3. General supervision to ensure crisis intervention during an emergency, accident, incident, illness, or significant change in the resident's physical, functional, or cognitive condition;
 - Supervisory care services, personal care services, or directed care services that promote a resident's independence, dignity, choice, self determination, and the resident's highest physical, cognitive, and functional capability;
 - 5. Assistance in utilizing community resources, as applicable;
 - 6. Encouragement and assistance to preserve outside support systems; and
 - 7. Social interaction to maintain identity and self-worth.
- **B.** For a resident receiving respite care services, a manager shall ensure that a written service plan is:
 - 1. Based on a determination of the resident's current needs and:
 - a. Is completed no later than three days after the resident's date of acceptance, or
 - <u>b.</u> If the resident has a service plan in the resident's record that was developed within the previous 12 months, is reviewed and updated based on changes in the requirements in subsections (A)(3)(a) through (f) within three days after the resident's date of acceptance; and
 - 2. If a significant change in the resident's physical, cognitive, or functional condition occurs while the resident is receiving respite care services, updated based on changes in the requirements in subsections (A)(3)(a) through (f) within three days after the significant change occurs.
- C. <u>A manager shall ensure that:</u>
 - <u>1.</u> <u>A caregiver or an assistant caregiver</u>:
 - <u>a.</u> <u>Provides a resident with the assisted living services in the resident's service plan;</u>
 - <u>b.</u> Is only assigned to provide the assisted living services the caregiver or assistant
 <u>caregiver</u> can competently perform;
 - <u>c.</u> <u>Provides assistance with activities of daily living according to the resident's</u> <u>service plan;</u>

- <u>d.</u> <u>If applicable, suggests techniques a resident may use to maintain or improve the</u> resident's independence in performing activities of daily living;
- <u>e.</u> <u>Provides assistance with, supervises, or directs a resident's personal hygiene</u> according to the resident's service plan;
- <u>f.</u> <u>Interacts with a resident to detect deficits in the resident's cognitive awareness</u> and reinforce remaining cognitive awareness;
- g. Encourages a resident to participate in activities planned according to subsection
 (E); and
- h. Documents the services provided in the resident's service plan;
- <u>A volunteer or an assistant caregiver who is 17 years of age or younger does not provide</u>
 <u>assistance to a resident for:</u>
 - <u>a.</u> <u>Bathing</u>,
 - <u>b.</u> <u>Toileting</u>,
 - c. Moving the resident's body from one surface to another surface,
 - d. <u>Self-administration of medication</u>,
 - e. <u>Medication administration, or</u>
 - <u>f.</u> <u>Nursing services;</u>
- 3. <u>A resident's primary care provider is notified if a resident or resident's representative</u> refuses medical services or nursing services; and
- <u>4.</u> Documentation of the notification in subsection (C)(3) is maintained in the resident's record.
- <u>A manager of an assisted living facility that provides adult day health services shall ensure that</u>
 <u>the adult day health care services are provided as specified in R9-10-509.</u>
- E. <u>A manager shall ensure that:</u> [From 712]
 - 1. Daily social, recreational, or rehabilitative activities are planned according to residents' preferences, needs, and abilities;
 - 2. <u>A calendar of planned activities is:</u>
 - <u>a.</u> <u>Prepared at least one week in advance of the date the activity is provided;</u>
 - b. Posted in a location that is easily seen by residents;
 - c. Updated as necessary to reflect substitutions in the activities provided; and
 - d. <u>Maintained for 12 months after the last scheduled activity;</u>
 - 3. Equipment and supplies are available and accessible to accommodate each resident who chooses to participate in a planned activity; and

<u>4.</u> <u>Daily newspapers, current magazines, and a variety of reading materials are available and accessible to a resident.</u>

R9-10-712. Activity Programs [Moved to new 708(C)]

- **A.** A licensee shall ensure that daily social, recreational, or rehabilitative activities are provided as follows:
 - 1. Activities are planned according to residents' preferences, needs, and abilities;
 - 2. A calendar of activities:
 - a. Is prepared at least one week in advance from the date the activity is provided;
 - b. Is conspicuously posted;
 - c. Reflects all substitutions in activities provided; and
 - d. Is maintained on the premises for 12 months after the last scheduled activity; and
 - 3. Equipment and supplies are available and accessible to accommodate each resident who chooses to participate in an activity.
- A licensee shall ensure that daily newspapers, current magazines, and a variety of reading materials are available and accessible to a resident at an assisted living facility.

R9-10-713. <u>R9-10-709.</u> <u>Medications Medication Services</u>

- A. A licensee shall ensure that a resident's service plan states whether the resident: [Moved to new
 708]
 - 1. Requires no assistance in the self-administration of medication or medication administration;
 - 2. Needs assistance in the self-administration of medication which includes one or more of the following:
 - a. Storing a resident's medication;
 - b. Reminding a resident that it is time to take a medication;
 - c. Reading the medication label to a resident to:
 - i. Confirm the medication is being taken by the individual it is prescribed for:
 - ii. Check the dosage against the label on the container and reassure the resident that the dosage is correct; and
 - iii. Confirm the resident is taking the medication as directed;
 - d. Opening the medication container for a resident;

- e. Pouring or placing a specified dosage into a container or into the resident's hand; or
- f. Observing the resident while the medication is taken; or
- 3. Needs medication administration.
- **B.** A licensee shall ensure that:
 - An assisted living facility's medication policies and procedures are approved by a physician, pharmacist, or RN and address:
 - a. Obtaining and refilling medication;
 - b. Storing and controlling of medication;
 - c. Disposing of medication;
 - d. Assisting in the self-administration of medication and medication administration, as applicable; and
 - e. Recording of medication assistance provided to residents and maintenance of medication records;
 - 2. A drug reference guide, no older than two years from the copyright date, is available and accessible for use by employees;
- A. <u>A manager shall ensure that:</u>
 - <u>1.</u> <u>Policies and procedures for medication services:</u>
 - <u>a.</u> <u>Are reviewed and approved by a registered nurse, pharmacist, or medical</u> practitioner;
 - b. Specify the individuals who may:
 - i. Obtain or request a refill of a medication,
 - ii. Store or dispose of medications,
 - iii. Administer a medication to a resident,
 - iv. Assist in the self-administration of medication,
 - v. <u>Prepare a medication organizer for a resident, or</u>
 - vi. Document the administration or assistance in the self-administration of medication in a resident's medical record;
 - <u>c.</u> <u>Include the training required for the individuals who provide the medication</u> services specified in subsection (A)(1)(b)(i) through (vi);
 - d. Include procedures for:
 - i. Preventing, responding to, and reporting a medication error, an adverse response to a medication, or a medication overdose;

- <u>Administering a medication to a resident</u>, including procedures for
 <u>ensuring a medication is administered to a resident only as directed and</u>
 <u>procedures for when a resident refuses a medication;</u>
- <u>iii.</u> Assisting a resident to obtain medication;
- <u>iv.</u> Assisting a resident with self-administration of medication; and
- v. <u>Providing medication services off the premises, if applicable; and</u>
- e. Specify a process for review through the quality management program of:
 - <u>a.</u> <u>A medication administration error, and</u>
 - b. An adverse reaction to a medication; and
- 2. <u>A current drug reference guide is available for use by caregivers and assistant caregivers:</u>

B. <u>A manager shall ensure that:</u>

- 3.1. Medication stored by the licensee an assisted living facility is stored or controlled as follows:
 - a. Medication <u>not requiring refrigeration</u> is stored in a locked container, cabinet, or area that is inaccessible to residents;
 - Medication is not left unattended by an employee requiring refrigeration is stored in a locked container in a refrigerator or in a locked refrigerator used only for medications;
 - c. Medication is stored in the original labeled container, except for medication organizers, and according to instructions on the medication label;
 - d. A bathroom or laundry room is not used for medication storage; and
 - All expired or discontinued medication, including those of deceased residents, are disposed of according to the assisted living facility's medication policies and procedures for medication services;
- 4.2. Medication stored by a resident in the resident's room <u>bedroom</u> or <u>residential</u> unit is stored and controlled as follows:
 - a. Medication is kept in a locked container or cabinet, or
 - <u>a</u> <u>A</u> resident locks the entrance to the <u>room resident's bedroom</u> or <u>residential</u> unit when the resident is not in the <u>room bedroom</u> or <u>residential</u> unit and an employee has a key and access to the resident's <u>room bedroom</u> or <u>residential</u> unit and medication storage container or cabinet;-or
 - b. As stated in the resident's service plan;

- 5.3. Except for medication organizers, resident medication is not pre-poured. Medication organizers <u>A medication organizer may be is prepared</u> up to no more than four weeks in advance by the following individuals:
 - a. <u>A The</u> resident or the <u>resident's</u> representative;
 - b. A resident's relatives family member of the resident;
 - c. A nurse; or
 - d. As otherwise provided by law; and
- 6. A separate medication record is maintained for each resident receiving assistance in selfadministration of medication or medication administration that includes:
 - a. Name of resident;
 - b. Name of medication, dosage, directions, and route of administration;
 - e. Date and time medication is scheduled to be administered;
 - d. Date and time of actual assistance in self-administration of medication or medication administration; and
 - e. Signature or initials of the employee providing assistance in self-administration of medication or medication administration.
- 4. If an assisted living facility provides assistance in the self-administration of medication:
 - a. A resident's medication is stored by the assisted living facility; and
 - b. Assistance in the self-administration of medication may include:

i. Opening a container for a resident,

- ii. <u>Reading the medication label to a resident</u>,
- iii.Checking the self-administration dosage against the label of the containerand reassuring a resident that the dosage is correct.
- iv. Pouring or placing a specified dosage into a container or into a resident's hand; and
- v. Observing the resident while the medication is taken.
- C. <u>A manager shall ensure that:</u>
 - <u>1.</u> If a resident requires medication administration, only the following individuals provide medication administration:
 - a. <u>A resident's representative or a resident's family member;</u>
 - <u>b.</u> <u>A nurse or medical practitioner</u>, or other individual authorized by law to provide medication administration; or
 - c. <u>A caregiver authorized in writing by the resident's physician; and</u>

- <u>A registered nurse</u>, pharmacist, or medical practitioner reviews the medication and medication record of each resident receiving medication administration services each time the resident's service plan is reviewed and updated.
- **D.** If medication is administered to a resident by a caregiver or if a caregiver or an assistant caregiver assists a resident with the self-administration of medication, a manager shall ensure that the caregiver or assistant caregiver documents:
 - 1. The name, dose, amount, and route of administration of each medication;
 - <u>2.</u> <u>The date and time of administration;</u>
 - 3. Whether:
 - a. The medication was administered to the resident, or
 - b. The resident was assisted with the self-administration of medication;
 - 3. The name of the caregiver or assisted caregiver; and
 - 4. If applicable, any medication error or adverse event.

R9-10-714. <u>R9-10-710.</u> Resident Records

- <u>A.</u> <u>A manager shall ensure that:</u>
 - 1. A record is established and maintained for each resident according to A.R.S. § 12-2297;
 - 2. If the record is maintained electronically:
 - a. There are safeguards to prevent unauthorized access, and
 - b. The date and time of an entry in a medical record is recorded by the computer's internal clock; and
 - <u>3.</u> <u>An entry into the record is:</u>
 - <u>a.</u> <u>Recorded only by a caregiver or an assistant caregiver authorized by policies and procedures to make the entry:</u>
 - b. Dated, legible, and authenticated; and
 - c. Not changed to make the initial entry illegible.
- **A.B.** A licensee manager shall maintain a resident's record that contains ensure that the record for each resident includes:
 - 1. The resident's name and Social Security number date of birth;
 - 2. The date of <u>the</u> resident's acceptance <u>into by</u> the assisted living facility, source of referral to the assisted living facility, and last address of <u>the</u> resident;
 - 3. The names, addresses, and telephone numbers of the following:
 - a. The <u>resident's</u> representative, if applicable;
 - b. The resident's primary care provider;

- c. The resident's case manager, if applicable <u>Other persons</u>, such as a home health agency or hospice service agency, involved in the care of the resident; and
- d. Each medical practitioner providing health-related services or medical services to the resident; and
- e.d. An individual or relative to be contacted in the event of emergency, significant change in the resident's condition, or termination of residency;
- 4. The residency agreement and any amendments;
- 5. The documentation of the receipt of internal facility requirements, resident rights, and community phone numbers as required in R9-10-710(B);
- 5. <u>The determination of the resident required in R9-10-706(B)(1)(a)</u>;
- Documentation of orientation to the evacuation plan as required in R9-10-717(B) If applicable, documentation that evacuation from the facility during a drill would cause harm to the resident;
- 7. The <u>resident's</u> service plan, its amendments and updates;
- 8. A <u>The resident's</u> health care directive, if applicable;
- Documentation Evidence of freedom from pulmonary infectious tuberculosis, as required in R9-10-703(B)(3) R9-10-706(A);
- 10. Any orders from a primary care provider or medical practitioner;
- 11. The medication records as required in R9-10-713(B)(6) R9-10-709(D);
- 12. Documentation of all services provided by the assisted living facility to the resident;
- 13. Documentation of the resident's refusal of medical services or nursing services, if applicable;
- <u>14.</u> Documentation of notification of the resident of the availability of vaccination for influenza, according to A.R.S. § 36-406(1)(d); [correct citation]
- 12.15 Accident, incident emergency, or injury reports as required in R9-10-703(B)(12) R9-10-713(D)(1);
- 16. Incident reports as required in R9-10-703(D)(1)(a);
- 13.17. Written authorizations for residency or continued residency as required by R9-10-722(A)(3) and (4) and R9-10-723(B)(1) and (3) For a resident who is unable to direct self-care, the information required in R9-10-715(F)(2), if applicable;
- 14.18. Documentation of any change in a resident's behavior, physical, cognitive, or functional condition and <u>the</u> action taken by <u>employees a manager or caregiver</u> to address the resident's changing needs;

- <u>19.</u> Documentation of the notification required in R9-10-703(B)(6) if the resident is incapable of handling financial affairs;
- 15.20. A written notice of termination of residency, if applicable; and
- 16.21. The address and phone number of the resident's new place of residence, if applicable;.
- 17. Documentation of relocation assistance provided to the resident, if applicable; and
- Documentation of the disposition of the resident's personal property and monies owed to the resident as required in R9-10-709(I)(1), if applicable.
- **B.** A licensee shall ensure that a resident's record is:
 - 1. Confidential and only released with written permission from the resident or the representative, or as otherwise provided by law;
 - 2. Maintained at the facility;
 - 3. Legibly recorded in ink or electronically recorded;
 - 4. Retained for three years from the date of termination of residency; and
 - 5. Available for review by the resident or the representative during normal business hours or at a time agreed upon by the resident and the manager.
- C. A licensee manager shall ensure that a resident's financial records are maintained separate from a resident's record and are only accessible to individuals designated by the licensee manager or the resident or resident's representative.

R9-10-715. <u>R9-10-711.</u> Food Services

- **A.** A licensee shall ensure that:
 - Three meals a day, served with not more than a 14 hour span between the evening meal and morning meal, and one snack a day is available to residents, unless otherwise prescribed by a therapeutic diet;
 - Meals and snacks meet each resident's nutritional needs based upon the resident's age and health needs;
 - 3. Menus are:
 - a. Based on:
 - Resident food preferences, eating habits, customs, health conditions, appetites, and religious, cultural, and ethnic backgrounds; and
 - The Food Guide Pyramid, USDA, Center for Nutrition Policy and Promotion, Home and Garden Bulletin Number 252, Revised October 1996, incorporated by reference and on file with the Department and the

Office of the Secretary of State. This incorporation by reference contains no future additions or amendments;

- b. Prepared at least one week before the date the food is served;
- c. Dated and conspicuously posted; and
- d. Maintained on the premises for at least 60 days from the date on the menu;
- 4. Meals and snacks provided by the assisted living facility are served according to preplanned menus. Substitutions to the pre-planned menu are stated on the menu;
- Meals and snacks on each posted menu contain a variety of foods from each food group in the Food Guide Pyramid;
- 6. A three day supply of perishable and a three day supply of non-perishable foods is maintained on the premises; and
- 7. Water is available and accessible to residents at all times.
- **B.** If the assisted living facility offers therapeutic diets, a licensee shall ensure that:
 - 1. A therapeutic diet manual, no older than five years from the copyright date, is available and accessible for use by employees; and
 - 2. The therapeutic diet is provided to a resident according to a written order from the resident's physician or as otherwise provided by law.
- **C.A.** A licensee manager shall ensure that food is obtained, prepared, served, and stored as follows:
 - 1. Food is free from spoilage, filth, or other contamination and is safe for human consumption;
 - 2. Food is protected from potential contamination;
 - 3. Except for food from a garden or orchard, food is obtained only from sources that comply with all laws relating to food and food labeling. A licensee shall ensure that any canned food is commercially canned;
 - 4.3. Potentially hazardous food is maintained as follows:
 - a. Foods requiring refrigeration are maintained at 41° F or below;
 - b. Foods requiring cooking are cooked to heat all parts of the food to a temperature of at least 140° F, except that:
 - Ground beef, poultry, poultry stuffing, stuffed meats and stuffing containing meat are cooked to heat all parts of the food to at least 165° F;
 - ii. Pork and any food containing pork are cooked to heat all parts of the food to at least $155^{\circ} \text{ F} 160^{\circ} \text{ F}$;
 - iii.Raw shell eggs and any food containing raw shell eggs are cooked to
heat all parts of the food to at least 145° F for 15 seconds;

- iii.iv.Rare roast beef is cooked to an internal temperature of at least 140° F 145° F and rare beef steak is cooked to a temperature of at least 130° F 145° F unless otherwise requested by a resident; and
- iv.v. Leftovers are reheated to a temperature of 165° F;
- 5.4. A refrigerator contains a thermometer, accurate to plus or minus 3° F, at the warmest part of the refrigerator;
- 6.5. Raw fruits and raw vegetables are rinsed with water before being cooked or served;
- Food is stored in covered containers, a minimum of six inches above the floor, and protected from splash and other contamination; [Covered under subsection (A)(2)]
- 8.7. Frozen foods are stored at a temperature of 0° F or below; and
- 9. Food service is not provided by an individual infected with a communicable disease that may be transmitted by food handling or in which there is a likelihood of the individual contaminating food or food-contact surfaces or transmitting disease to other individuals;
- 10. Before starting work, after smoking, using the toilet, and as often as necessary to remove soil and contamination, individuals providing food services wash their hands and exposed portions of their arms with soap and warm water; and
- 11.7. Tableware, utensils, equipment, and food-contact surfaces are clean and in good repair.
- **B.** <u>A manager of an assisted living center shall ensure that:</u>
 - <u>1.</u> <u>The assisted living center either:</u>
 - a. Is licensed as a food establishment under 9 A.A.C. 8, Article 1, or
 - b. Contracts for food service with a food establishment licensed under 9 A.A.C. 8, Article 1;
 - 2. Food service is provided in compliance with 9 A.A.C. 8, Article 1; and
 - 3. A copy of the applicable food establishment license is maintained.
- C. <u>A manager shall ensure that:</u>
 - <u>1.</u> <u>A food menu is:</u>
 - <u>a.</u> <u>Prepared at least one week in advance,</u>
 - b. Conspicuously posted, and
 - c. Maintained for at least 60 days after the last day included in the food menu;
 - <u>Meals for each day are planned using meal planning guides from [will insert most current</u>
 <u>document</u>] incorporated by reference, on file with the Department and the Office of the
 <u>Secretary of State</u>, and including no future editions or amendments, available from the
 <u>U.S. Department of Agriculture</u>, Food and Nutrition Service at [web address];

- 3. Meals and snacks provided by the assisted living facility are served according to posted menus;
- 4. If there is a change to a posted food menu, the change is noted on the posted menu no later than the morning of the day the change occurs;
- 5. Food is prepared:
 - a. Using methods that conserve nutritional value, flavor, and appearance; and
 - b. In a form to meet the needs of a resident, such as cut, chopped, ground, pureed, or thickened;
- 6. <u>A resident is provided a diet that meets the resident's nutritional needs as specified in the resident's service plan:</u>
- 7. Water is available and accessible to residents at all times, unless otherwise stated in a resident's service plan;
- <u>A resident has a self-help device, such as a plate guard, rocking fork, or assistive hand</u>
 <u>device, if the resident needs the self-help device; and</u>
- 9. <u>A three-day supply of perishable and non-perishable foods</u> is maintained on the premises.
- **D.** If the assisted living facility offers therapeutic diets, a manager shall ensure that:
 - 1. A current therapeutic diet manual is available for use by employees; and
 - 2. The therapeutic diet is provided to a resident according to a written order from the resident's primary care provider.

R9-10-716. <u>R9-10-712.</u> Physical Plant <u>and Environmental</u> Requirements [Added from 718]

- **A.** A licensee shall ensure that an assisted living facility:
 - Complies with all local building codes, ordinances, fire codes, and zoning requirements. If there are no local building codes, ordinances, fire codes, or zoning requirements, the assisted living facility complies with the applicable codes and standards incorporated by reference in A.A.C. R9-1-412;
 - 2. Is hazard-free;
 - 3. Has a common area and a dining area that:
 - a. Are not converted, partitioned, or otherwise used as a sleeping area; and
 - b. Contain furniture to accommodate the recreational and socialization needs of residents and other individuals in the assisted living facility;
 - 4. Provides at least one bathroom, containing at least a flushable toilet and a sink, that is accessed from a common area;

- 5. Provides a hazard-free outdoor area with shaded protection where residents may walk or sit; and
- 6. Provides wheelchair ramps or other access from exterior doors for residents using wheelchairs or other assistive devices.
- **B.** A licensee shall ensure that:
 - 1. No more than two individuals reside in a residential unit or bedroom. An assisted living facility that provides documentation of operating before the effective date of this Article with more than two individuals living in a unit or bedroom may continue to allow more than two individuals to reside in a unit or bedroom if there is 60 square feet or more for each individual living in the unit or bedroom;
 - 2. A bedroom or unit is not used to access a common room, common bathroom, or another bedroom or unit unless written consent is obtained from the resident or the representative;
 - 3. To provide natural light, a bedroom or unit has:
 - a. A window to the outside; or
 - b. A door made of glass to the outside; and
 - 4. To provide safe egress in an emergency, a bedroom or unit has:
 - a. A window that either:
 - i. Meets the requirements of the local jurisdiction; or
 - ii. Has no dimension less than 20 inches, is at least 720 square inches, and has a window sill that is no more than 44 inches off the floor; or
 - b. A door to the outside.
- **C.** A licensee shall ensure that a swimming pool on the premises of an assisted living facility:
 - 1. Complies with all applicable laws and rules for swimming pool construction and safety and:
 - a. Is enclosed by a five-foot solid wall, fence, or barrier with either vertical or horizontal open spaces that do not exceed four inches; or
 - b. Is inaccessible to residents and is granted an exception as prescribed in R9–10– 702(F) from the enclosure requirements in subsection (C)(1)(a); and
 - 2. Has self-closing, self-latching gates that are kept locked when the swimming pool is not in use; and
 - 3. Has pool safety requirements conspicuously posted in the swimming pool area.
- A. <u>A manager shall ensure that an assisted living center complies with the applicable physical plant</u> health and safety codes and standards, incorporated by reference in A.A.C. R9-1-412, that were in

effect on the date listed on the building permit or zoning clearance submitted with the architectural plans and specifications before initial licensing.

- **B.** A manager shall ensure that:
 - <u>1.</u> <u>The premises are:</u>
 - <u>a.</u> <u>Safe and free from hazards based upon the physical, cognitive, and functional</u> condition of the residents; and
 - b. Free of insects and vermin;
 - 2. A common area for use by residents is provided that has sufficient space and furniture to accommodate the recreational and socialization needs of residents;
 - 3. <u>A dining area has sufficient space and tables and chairs to accommodate the needs of the residents:</u>
 - 4. Common areas are lighted to ensure resident safety;
 - 5. The temperature in the facility is between 68° F and 85° F, unless individually controlled by the resident;
 - 6. The supply of hot and cold water is sufficient to meet the hygiene needs of the residents;
 - 7. Hot water is between 95° F and 120° F;
 - 8. <u>A resident has access to a laundry service or a washing machine and dryer in the assisted</u> <u>living facility;</u>
 - 9. <u>At least one bathroom is accessible from a common area and:</u>
 - a. May be used by residents and visitors; and
 - b. Contains the following:
 - i. <u>At least one flushable toilet,</u>
 - ii. Toilet paper for each toilet,
 - iii. At least one sink with running water,
 - iv. Soap in a dispenser accessible from each sink, and
 - v. Paper towels in a dispenser or an air hand dryer;
 - 10. An outside activity space is provided and available that:
 - <u>a.</u> Is on the premises,
 - b. Has a hard-surfaced section for wheelchairs,
 - c. Has an available shaded area, and
 - <u>d.</u> <u>Has a means of egress without entering the assisted living facility;</u>
 - 11. Exterior doors are equipped with ramps or other devices to allow use by residents using wheelchairs or other assistive devices;

- <u>12.</u> The key to the door of a lockable bathroom, bedroom, or residential unit is available to caregivers and assistant caregivers;
- <u>13.</u> Garbage and refuse are:
 - <u>a.</u> <u>Stored in plastic bags in covered containers; and</u>
 - b. <u>Removed from the premises at least once a week;</u>
- 14.Soiled linen and soiled clothing stored by the facility are stored in closed containers away
from food storage, kitchen, and dining areas;
- 15. Oxygen containers are secured in an upright position;
- <u>Poisonous or toxic materials stored by the assisted living facility are maintained in</u> labeled containers in a locked area separate from food preparation and storage, dining areas, and medications and inaccessible to residents; and
- 17. Combustible or flammable liquids and hazardous materials stored by the assisted living facility are stored in the original labeled containers or safety containers in a storage area that is locked and inaccessible to residents.
- <u>C.</u> <u>A manager shall ensure that:</u>
 - 1. For every eight residents, there is at least one flushable toilet and one sink with running water;
 - 2. For every eight residents, there is at least one working bathtub or shower; and
 - 3. <u>A resident bathroom provides privacy when in use and contains:</u>
 - <u>a. A mirror;</u>
 - b. <u>Toilet paper for each toilet;</u>
 - <u>c.</u> <u>Soap accessible from each sink;</u>
 - <u>d.</u> Paper towels in a dispenser or an air hand dryer for a bathroom that is not in a residential unit or used by only one resident;
 - e. <u>A window that opens or another means of ventilation;</u>
 - <u>f.</u> <u>Grab bars for the toilet and, if applicable, the bathtub or shower and other</u> assistive devices, if required to provide for resident safety; and
 - g. <u>Nonporous surfaces for shower enclosures, clean usable shower curtains, and</u> slip-resistant surfaces in tubs and showers;
 - <u>4.</u> If a non-municipal water source is used:
 - a. The water source is tested at least once every 12 months to ensure the water is safe to drink, and
 - b. Documentation of the test required in subsection (C)(4)(a) is maintained for at least two years after the date of the test; and

5. If a non-municipal sewage system is used, the sewage system is in working order.

D. <u>A manager shall ensure that:</u>

- 1. Each resident is provided with a sleeping area in a residential unit or a bedroom;
- 2. For an assisted living home, a resident's sleeping area is on the ground floor of the assisted living home unless:
 - <u>a.</u> <u>The resident is able to direct self-care;</u>
 - b. The resident is ambulatory without assistance; and
 - <u>c.</u> There are at least two unobstructed, usable exits to the outside from the sleeping area that the resident is capable of using;
- 3. Except as provided in subsection (E), no more than two individuals reside in a residential unit or bedroom;
- 4. <u>A resident's sleeping area:</u>
 - <u>a.</u> <u>Is not used as a common area;</u>
 - b. Is not used as a passageway to a common area, another sleeping area, or common bathroom:
 - c. Is constructed and furnished to provide unimpeded access to the door;
 - d. Has floor-to-ceiling walls;
 - e. <u>Has access to natural light through a window or a glass door to the outside; and</u>
 - <u>f.</u> <u>Has a means of direct egress to the outside through a window or door that the</u> resident is capable of using:
- 5. If a resident's sleeping area is in a bedroom, the bedroom has:
 - a. <u>At least 80 square feet of floor space, not including a closet or bathroom, for a private bedroom;</u>
 - b. <u>At least 60 square feet of floor space, not including a closet or bathroom, for each</u> individual occupying a shared bedroom; and
 - c. <u>A door that opens into a hallway, common area, or outdoors; and</u>
- 6. If a resident's sleeping area is in a residential unit, the residential unit has:
 - a. <u>At least 220 square feet of floor space, not including a closet or bathroom, for</u> <u>one individual residing in the residential unit and an additional 100 square feet of</u> <u>floor space, not including a closet or bathroom, for each additional individual</u> <u>residing in the residential unit ;</u>
 - b. <u>An individually keyed entry door;</u>
 - <u>c.</u> <u>A bathroom that provides privacy when in use and contains:</u>
 - i. <u>A working, flushable toilet;</u>

- ii. <u>A working sink with running water;</u>
- <u>iii.</u> <u>A working bathtub or shower and a clean usable shower curtain;</u>
- iv. <u>A mirror;</u>
- v. <u>A window that opens or another means of ventilation;</u>
- <u>vi.</u> <u>Grab bars for the toilet and, if applicable, the bathtub or shower and</u> <u>other assistive devices, if required to provide for resident safety; and</u>
- vii.Nonporous surfaces for shower enclosures and slip-resistant surfaces in
bathtubs and showers;
- <u>d.</u> <u>A resident-controlled thermostat for heating and cooling;</u>
- <u>e.</u> <u>A kitchen area equipped with:</u>
 - <u>i.</u> <u>A working sink and refrigerator,</u>
 - ii. A cooking appliance that can be removed or disconnected,
 - iii. Space for food preparation, and
 - iv. Storage for utensils and supplies; and
- <u>f.</u> <u>If not furnished by a resident:</u>
 - <u>i. An armchair, and</u>
 - ii. <u>A table where a resident may eat a meal; and</u>
- 7. If not furnished by a resident, each sleeping area has:
 - <u>a.</u> <u>A bed, at least 36 inches wide, consisting of at least a frame and mattress that is</u> <u>clean and in good repair;</u>
 - b. <u>Clean linen including a mattress pad, sheets large enough to tuck under the</u> mattress, pillows, pillow cases, a bedspread, waterproof mattress covers as needed, and blankets to ensure warmth and comfort for the resident;
 - <u>c.</u> <u>Sufficient light for reading;</u>
 - <u>d.</u> <u>Storage space for clothing;</u>
 - e. Individual storage space for personal effects; and
 - <u>f.</u> <u>Adjustable window covers that provide resident privacy.</u>
- **E.** <u>A manager may allow more than two individuals to reside in a residential unit or bedroom if:</u>
 - 1. There is at least 60 square feet for each individual living in the bedroom,
 - 2. There is at least 100 square feet for each individual living in the residential unit, and
 - 3. The manager has documentation that the assisted living facility has been operating since before October 2, 1998 with more than two individuals living in the residential unit or bedroom.

- **F.** If there is a swimming pool on the premises of the assisted living facility, a manager shall ensure that:
 - 1.Unless the assisted living facility has documentation of having received an exceptionfrom the Department before the effective date of these rules, the swimming pool isenclosed by a wall or fence that:
 - <u>a.</u> <u>Separates the swimming pool from other outdoor activity areas;</u>
 - b. Is not a chain-link fence;
 - c. <u>Is secured to the ground;</u>
 - d. Is at least 5 feet high;
 - e. <u>Has a self-closing, self-latching, lockable gate that is kept locked when the</u> <u>swimming pool is not in use; and</u>
 - <u>f.</u> Does not have any vertical or horizontal open space that exceeds 4 inches at any point, including any space on a gate; and
 - 2. Pool safety requirements are conspicuously posted in the swimming pool area.
- **G.** <u>A manager shall ensure that:</u>
 - 1. Pets or other animals are controlled to prevent endangering individuals at the facility and to maintain sanitation;
 - 2. Other than a service animal as defined in A.R.S. § 11-1024, pets or other animals are:
 - <u>a.</u> <u>Licensed according to local ordinances; and</u>
 - b. Vaccinated as follows:
 - <u>i.</u> <u>A dog is vaccinated against rabies, leptospirosis, distemper, hepatitis, and parvo; and</u>
 - ii. A cat is vaccinated against rabies and feline leukemia; and
 - 3. Documentation of licensing required in subsection (G)(2)(a) and vaccinations required in subsection (G)(2)(b) is maintained.

R9-10-717. R9-10-713. Fire and Safety Requirements

- A. A licensee manager shall ensure that:
 - 1. A written evacuation plan is developed and maintained on the premises in a location accessible to caregivers and assistant caregivers;
 - 2. An evacuation path is conspicuously posted on each hallway of each floor of the assisted living facility;

- 2.3. A written disaster <u>preparedness</u> plan, identifying a relocation plan for all residents from the facility, is developed and maintained on the premises; in a location accessible to caregivers and assistant caregivers that includes:
 - a. When, how, and where residents will be relocated;
 - <u>b.</u> <u>How each resident's record will be available to caregivers and assistant</u> caregivers providing services to the resident during a disaster;
 - <u>c.</u> <u>A plan to ensure each resident's medication will be available to administer to the resident during a disaster; and</u>
 - <u>d.</u> <u>A plan for obtaining food and water for individuals present in the facility or the facility's relocation site during a disaster;</u>
- 3. An employee fire drill is conducted at least once every three 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. A resident fire drill is conducted at least once every six months and includes residents, employees on duty, support staff on duty, and other individuals in the facility. A resident fire drill includes making a general announcement throughout the facility that a resident fire drill is being conducted or sounding a fire alarm;
- 5. Records of employee fire drills and resident fire drills are maintained on the premises for 12 months from the date of the drill and include the date and time of the drill, names of employees participating in the drill, and identification of residents needing assistance for evacuation
- <u>4.</u> <u>A fire drill for employees only is conducted at least once every three months on each shift;</u>
- 5. A fire drill for employees and residents:
 - a. Is conducted at least once every six months, and
 - b. Except for a resident whose service plan contains documentation that evacuation from the facility would cause harm to the resident, includes all individuals in the facility; and
- 6. Documentation of each fire drill is:
 - <u>a.</u> <u>Created and includes:</u>
 - i. The date and time of the fire drill;
 - ii. Whether the fire drill was for employees only or for both employees and residents;

- <u>iii.</u> <u>A list of the individuals who took part in the fire drill;</u>
- iv. For a fire drill in which residents participated, the names of residents who needed assistance for evacuation or were not evacuated;
- v.The amount of time taken for all employees and, if applicable, residentsto evacuate the facility;
- vi. Any problems encountered in conducting the fire drill; and
- vii. <u>Recommendations for improvement, if applicable; and</u>
- b. Maintained for at least 12 months after the date of the fire drill.
- **B.** A licensee <u>manager</u> shall ensure that:
 - <u>a A</u> resident receives orientation to the evacuation plan within 24 hours of <u>after</u> the resident's acceptance <u>into by</u> the assisted living facility. Documentation of the orientation shall be signed and dated by the resident or the representative., and
 - 2. Documentation of the orientation is maintained in the resident's record.
- <u>C.</u> <u>A manager shall ensure that a first-aid kit is maintained in the assisted living facility in a location</u> accessible to caregivers and assistant caregivers.
- <u>D.</u> When a resident has an accident, emergency, or injury that results in the resident needing medical services, a manager shall ensure that:
 - <u>1.</u> <u>A caregiver or an assistant caregiver</u>:
 - <u>a.</u> <u>Immediately notifies the resident's emergency contact and primary care provider;</u>
 - b. Documents the following:
 - i. The date and time of the accident, emergency, or injury;
 - ii. <u>A description of the accident, emergency, or injury;</u>
 - <u>iii.</u> <u>The names of individuals who observed the accident, emergency, or</u> <u>injury;</u>
 - iv. The actions taken by the caregiver or assistant caregiver;
 - v. <u>The individuals notified by the caregiver or assistant caregiver; and</u>
 - vi. <u>Any action taken to prevent the accident, emergency, or injury from</u> occurring in the future; and
 - 2. The documentation in subsection (D)(1)(b) is maintained in the resident's record.
- **E.** <u>A manager of an assisted living home shall ensure that:</u>
 - <u>A fire extinguisher that is labeled as rated at least 2A-10-BC by the Underwriters</u> Laboratories is mounted and maintained in home;
 - 2. <u>A disposable fire extinguisher is replaced when its indicator reaches the red zone;</u>
 - <u>3.</u> <u>A rechargeable fire extinguisher:</u>

- a. Is serviced at least once every 12 months; and
- <u>b.</u> <u>Has a tag attached to the fire extinguisher that specifies the date of the last</u>
 <u>servicing and the identification of the person who serviced the fire extinguisher;</u>
- 4. A smoke detector is:
 - <u>Installed in each bedroom, hallway that adjoins a bedroom, storage room, laundry</u> room, attached garage, and room or hallway adjacent to the kitchen, and other places recommended by the manufacturer;
 - b. Either battery operated or, if hard-wired into the electrical system of the home, has a back-up battery;
 - c. In working order; and
 - <u>d.</u> <u>Tested at least once each month;</u>
- 5. Documentation of the test required in subsection (E)(4)(d) is maintained for at least 12 months after the date of the test;
- <u>An appliance, light, or other device with a frayed or spliced electrical cord is not used at</u> the assisted living home; and
- 7. <u>An electrical cord, including an extension cord, is not run under a rug or carpeting, over a</u> nail, or from one room to another at the assisted living home.
- **F.** <u>A manager of an assisted living center shall ensure that:</u>
 - 1. Unless the assisted living facility has documentation of having received an exception from the Department before the effective date of these rules, a fire alarm system and a sprinkler system are installed and in working order in the areas of the assisted living center providing personal care services or directed care services;
 - 2. For the areas of the assisted living center providing only supervisory care services:
 - a. A fire alarm system and a sprinkler system are installed and in working order, or
 - b. The assisted living center complies with the requirements in subsection (E);
 - 3. <u>A fire inspection is conducted by a local fire department or the State Fire Marshal before</u> initial licensure; and
 - <u>4.</u> <u>Documentation of a current fire inspection by a local fire department or the State Fire</u> <u>Marshal is maintained.</u>

R9-10-718. Environmental Services <u>Repealed</u> [Moved to new 712]

A licensee shall ensure that:

- 1. A facility and facility grounds are:
 - a. In good repair;

- b. Clean;
- c. Free of odors;
- d. Free of any object, material or condition that may be a hazard based on the physical, cognitive, and functional condition of the residents; and
- e. Free of insects and rodents;
- 2. Garbage and refuse are:
 - a. Stored in covered containers lined with plastic bags; and
 - b. Removed from the premises at least once a week;
- Heating and cooling systems maintain the facility at a temperature between 68° F to 85°
 F at all times. A resident with an individual temperature controlled residential unit or
 room may heat and cool to provide for individual comfort;
- 4. Common areas are lighted to assure safety of residents;
- 5. Hot water temperatures are maintained between 95° F and 120° F in the areas of a facility used by residents;
- 6. The supply of hot and cold water is sufficient to meet the personal hygiene needs of residents;
- A common bathroom has toilet paper; soap; and cloth towels, paper towels, or a mechanical air hand dryer accessible to residents;
- 8. Soiled linen and soiled clothing stored by the assisted living facility are stored in closed containers away from food storage, kitchen, and dining areas;
- 9. Oxygen containers are maintained in an upright position;
- 10. 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;
- 11. Combustible or flammable liquids and hazardous materials stored by an assisted living facility are stored in the original labeled containers or safety containers outside the facility or in an attached garage locked and inaccessible to residents;
- 12. Pets or animals are:
 - a. Controlled to prevent endangering the residents and to maintain sanitation;
 - b. Licensed consistent with local ordinances;
 - c. Vaccinated as follows:
 - A dog is vaccinated against rabies, leptospirosis, distemper, hepatitis, and parvo; and
 - ii. A cat is vaccinated against rabies and feline leukemia;

- 13. A container with first aid supplies, in a quantity sufficient to meet the needs of all residents, is accessible to employees. First aid supplies include at least band aids, sterile bandages or gauze pads, antiseptic solution, tweezers, scissors, tape, and disposable latex gloves;
- 14. If a non-municipal water source is used, the water source is tested at least once every 12 months for total coliform bacteria and fecal coliform or E. Coli bacteria and corrective action is taken to ensure the water is safe to drink. Documentation of testing is retained on the premises for 24 months from the date of the test; and
- 15. If a non-municipal sewage system is used, the sewage system is in working order and is maintained according to all applicable state laws and rules.

R9-10-719. Supplemental Requirements for an Assisted Living Home Repealed [Moved to new 712]

- **A.** In addition to the requirements in R9-10-716, a licensee shall ensure that an assisted living home meets the following:
 - Each bedroom is of standard construction with walls from floor to ceiling with at least one door. If a bedroom door is capable of being locked from the inside, an employee shall have a key and access to the bedroom at all times;
 - 2. There is at least 80 square feet of floor space, excluding closets, bathrooms, alcoves, or vestibules, for a resident in a private bedroom and at least 60 square feet of floor space excluding closets, bathrooms, alcoves, or vestibules, for each resident sharing a bedroom with another individual;
 - 3. A bedroom used by a resident who is receiving personal care services or directed care services is equipped with a bell, intercom, or other mechanical means to alert employees to a resident's needs or emergencies;
 - 4. Unless the resident provides the resident's own furnishings, a licensee provides the following furnishings for a resident:
 - a. A bed, 36 inches wide or larger, consisting of at least a frame and mattress that is clean and in good repair;
 - b. Clean linen including mattress pad, sheets large enough to tuck under the mattress, pillows, pillow cases, bedspread, waterproof mattress covers as needed, and blankets to ensure warmth and comfort for each resident;
 - c. A bedside lamp that provides light for reading;
 - d. Storage space for clothing;

- e. Individual storage space for personal effects; and
- f. Adjustable window covers that provide resident privacy;
- 5. A bathroom meets the following requirements:
 - a. There is at least one working flushable toilet and one working sink for each eight individuals living in the home;
 - b. There is one working tub or shower for each eight individuals living in the home;
 - e. The sink is in the same bathroom as the toilet or in a room adjacent to the toilet, and is not used for food preparation;
 - d. Each bathroom provides privacy when in use and contains:
 - i. <u>A mirror, unless the resident's service plan requires otherwise;</u>
 - ii. A means of ventilation or an operable window;
 - iii. Nonporous surfaces for shower enclosures, clean usable shower curtains, and slip-resistant surfaces in tubs and showers; and
 - iv. Grab bars for the toilet and tub or shower and other assistive devices, if required in a resident's service plan, to provide for resident safety; and
 - e. If a bathroom has a door locking from the inside, an employee has key and access to the bathroom at all times;
- 6. A resident is not housed on a floor that does not open onto the ground level unless:
 - a. There is a secondary means of emergency exit that the resident is capable of using; and
 - b. The resident is ambulatory without assistance and is able to direct self-care;
 - A resident has access to laundry service or a washing machine and dryer in the home.
- **B.** In addition to the fire and safety requirements contained in R9-10-717, a licensee shall ensure the following:
 - **1.** A written evacuation plan, identifying interior exits, is conspicuously posted in the home;
 - 2. A portable, all purpose fire extinguisher that meets at a minimum, a 2A-10-BC rating of the Underwriter's Laboratories as described in Publication 10 of the National Fire Code, incorporated by reference in A.A.C. R9-1-412 is installed and maintained in the home as prescribed by the fire authority having jurisdiction;
 - 3. A fire extinguisher is:

7.

- a. Serviced every 12 months or as recommended by the manufacturer;
- b. Tagged specifying the date of recharging and the name of the organization performing the work; and

- e. Placed on wall brackets so that the top handle of the fire extinguisher is not over five feet from the floor and the bottom of the fire extinguisher is at least four inches off the floor;
- 4. Smoke detectors are installed according to the manufacturer's instructions in at least the following areas:
 - a. Bedrooms;
 - b. Hallways that adjoin bedrooms;
 - c. Storage rooms and laundry rooms;
 - d. Attached garages;
 - e. Rooms or hallways adjacent to the kitchen; and
 - f. Other places recommended by the manufacturer;
- 5. Smoke detectors that are battery operated are equipped with a device that warns of a low battery. If more than two violations of an inoperative battery operated smoke detector are cited in a 24 month period, the licensee shall ensure the smoke detector is hard wired into the electrical system; and
- 6. Smoke detectors are inspected as often as recommended by the manufacturer and kept in working order.

R9-10-720. Supplemental Requirements for an Assisted Living Center Repealed Moved to new 7121

- **A.** In addition to the requirements in R9–10–716, a licensee shall ensure that a center or a portion of a center providing personal care services or directed care services:
 - Has a fire alarm system installed according to the National Fire Protection Association
 72: National Fire Alarm Code, Chapter 3, Section 3-4.1.1(a), incorporated by reference in
 A.A.C. R9-1-412, and a sprinkler system installed according to the National Fire
 Protection Association 13 standards incorporated by reference in A.A.C. R9-1-412; or
 - Has an alternative method to ensure the resident's safety approved by the local jurisdiction and granted an exception as prescribed in R9-10-702(F).
- **B.** A licensee shall ensure that a resident has access to a laundry service or a washing machine and dryer in the center.
- **C.** A licensee shall ensure that a resident's sleeping area is contained in a residential unit or a bedroom.
 - 1. A residential unit shall meet the following:

- a. Have at least 220 square feet of floor space, excluding the bathroom and closet,
 for one individual and an additional 100 square feet of floor space, excluding the
 bathroom and closet, for a second individual;
- Have an individually keyed entry door. A key shall be provided to the resident or the representative, and an employee shall have a key and access to the unit at all times;
- A unit used by a resident receiving personal care services or directed care services shall be equipped with a bell, intercom, or other mechanical means to alert employees to a resident's needs or emergencies. A licensee may request an exception from this requirement as prescribed in R9-10-702(F) for a resident who is unable to direct self-care if there is an alternative method of communication;
- d. Have a bathroom that provides privacy when in use and contains:
 - i. A working flushable toilet;
 - ii. A working sink;
 - iii. A working tub or shower;
 - iv. A mirror, unless the resident's service plan requires otherwise;
 - v. <u>A means of ventilation or an operable window;</u>
 - vi. Nonporous surfaces for shower enclosures, clean usable shower curtains, and slip-resistant surfaces in tubs and showers; and
 - vii. Grab bars for the toilet and tub or shower and other assistive devices, if identified in a resident's service plan, to provide for resident safety;
- e. If a bathroom has a door locking from the inside, an employee has a key and access to the bathroom at all times;
- f. Contains a resident controlled thermostat for heating and cooling;
- g. Contains a kitchen area equipped with:
 - i. <u>A working sink;</u>
 - ii. A working refrigerator;
 - iii. A cooking appliance that can be removed or disconnected;
 - iv. Space for food preparation; and
 - v. Storage for utensils and supplies;
- h. Unless the resident provides the resident's own furnishings, the licensee provides the following furnishings for a resident:
 - A bed, 36 inches wide or larger, consisting of at least a frame and mattress that is clean and in good repair;

- ii. Clean linen including mattress pad, sheets large enough to tuck under the mattress, pillows, pillow cases, bedspread, waterproof mattress covers as needed, and blankets to ensure warmth and comfort for each resident;
- iii. A bedside lamp that provides light for reading;
- iv. Storage space for clothing;
- v. Individual storage space for personal effects;
- vi. Adjustable window covers that provide resident privacy;
- vii. One armchair or side chair; and
- viii. One table where a resident may eat a meal.
- 2. A bedroom shall meet the following:
 - a. Is of standard construction with walls from floor to ceiling with at least one door.
 If a bedroom door is capable of being locked from the inside, an employee has a key and access to the bedroom at all times;
 - There is at least 80 square feet of floor space, excluding closets, bathrooms, alcoves, or vestibules, for a resident in a private bedroom and at least 60 square feet of floor space, excluding closets, bathrooms, alcoves, or vestibules for each resident sharing a bedroom with another individual;
 - A bedroom used by a resident receiving personal care services or directed care services is equipped with a bell, intercom, or other mechanical means to alert employees to the resident's needs or emergencies. A licensee may request an exception from this requirement as prescribed in R9-10-702(F) for a resident who is unable to direct self-care if there is an alternative method of communication;
 - d. Unless the resident provides the resident's own furnishings, the licensee provides the following furnishings for a resident:
 - A bed, 36 inches wide or larger, consisting of at least a frame and mattress that is clean and in good repair;
 - ii. Clean linen including mattress pad, sheets large enough to tuck under the mattress, pillows, pillow cases, bedspread, waterproof mattress covers as needed, and blankets to ensure warmth and comfort for each resident;
 - iii. A bedside lamp that provides light for reading;
 - iv. Storage space for clothing;
 - v. Individual storage space for personal effects; and
 - vi. Adjustable window covers that provide resident privacy;
 - e. Bathroom requirements:

- At least one working flushable toilet and one working sink for each eight individuals living in the center;
- ii. One working tub or shower for each eight individuals in the center; and
- iii. The sink may be in the same bathroom as the toilet or in a room adjacent to the toilet but is not used for food preparation;
- f. Each bathroom provides privacy when in use and contains:
 - i. <u>A mirror, unless the resident's service plan requires otherwise;</u>
 - ii. A means of ventilation or an operable window;
 - iii. Nonporous surfaces for shower enclosures, clean usable shower curtains, and slip resistant surfaces in tubs and showers; and
 - iv. Grab bars for the toilet and tub or shower and other assistive devices,
 identified in the resident's service plan, to provide for resident safety; and
- g. For a bathroom door locking from the inside, an employee has a key and access to the bathroom at all times.
- **D.** A licensee shall obtain the following inspections of a facility, according to the following schedules, and make any repairs or corrections stated on an inspection report:
 - 1. Sanitation inspections, conducted a minimum of every 12 months by a local health department; and
 - Fire inspections, conducted no less than every 36 months by a local fire department or the State Fire Marshal.
- E. A licensee shall maintain current reports of sanitation and fire inspections on the facility premises.

R9-10-721.Supplemental Requirements for an Assisted Living Facility Licensed to ProvideSupervisory Care ServicesRepealed [Moved to new 706(C)]

A resident in an assisted living facility that is licensed to provide supervisory care services may receive nursing services or health related services from a licensed home health agency, licensed hospice service agency, or private duty nurse.

R9-10-722. R9-10-714. Supplemental Requirements for an Assisted Living Facility Licensed to Provide Personal Care Services

- **A.** A licensee of an assisted living facility licensed to provide personal care services shall not:
 - 1. Accept or retain a resident unable to direct self-care;
 - 2. Accept or retain an individual who requires continuous nursing services unless:

- a. The resident is under the care of a licensed hospice service agency;
- b. The continuous nursing services are provided by a private duty nurse; or
- c. The assisted living facility meets the requirements of A.R.S. § 36-401(C);
- 3. Accept or retain a resident who is bedbound unless:
 - a. The condition is a result of a short-term illness or injury; or
 - b. The following requirements are met at the onset of the condition or when the resident is accepted into the assisted living facility:
 - i. Written authorization of residency or continued residency is signed and dated by the resident or the representative;
 - ii. The resident's primary care provider, who has examined the resident within 30 days from the onset of the condition or upon acceptance into the assisted living facility, signs and dates a statement authorizing residency at the assisted living facility. The resident's primary care provider shall examine the resident at least once every six months throughout the duration of the resident's condition and signs and dates a statement authorizing continued residency;
 - The resident does not require continuous nursing services except as provided by subsection (A)(2);
 - iv. The resident's service plan is revised to include the resident's increased need for services;
 - The resident is under the care of a nurse, licensed home health agency, or licensed hospice service agency;
 - vi. The assisted living facility is meeting the resident's needs; and
 - vii. The assisted living facility documents the services provided to the resident to meet the resident's needs; and
- 4. Accept or retain a resident who has a stage 3 or stage 4 pressure sore, as determined by a nurse or medical practitioner, unless the assisted living facility meets the requirements in subsection (A)(3)(b).
- 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.
- **C.** A licensee shall provide to each resident receiving personal care services:

- 1. Skin maintenance to prevent and treat bruises, injuries, pressure sores, and infections;
- 2. Sufficient fluids to maintain hydration;
- 3. Incontinence care that ensures that a resident maintains the highest practicable level of independence and dignity when toileting;
- 4. An assessment conducted by a primary care provider of each resident who needs medication administration or nursing services within 30 days of being accepted into the assisted living facility or within 30 days of developing the need for nursing services or medication administration; and
- 5. Documentation of a resident's weight for each resident receiving medication administration or nursing services. A resident's weight shall be recorded in the resident's service plan when a resident's service plan is developed or updated.
- **D.** In addition to the medication requirements in R9-10-713, a licensee shall ensure that:
 - Assistance in the self-administration of medication or medication administration for a resident receiving personal care services is provided based upon a written medication order from the resident's primary care provider, medical practitioner, or as otherwise provided by law. A medication order includes:
 - a. The name of resident;
 - b. The name, strength, quantity, route of administration, and directions for the medication ordered;
 - c. Precautionary statements, if applicable; and
 - d. The signature of primary care provider or medical practitioner and date signed;
 - 2. A verbal medication order from a primary care provider or medical practitioner is noted in a resident's medication record within 24 hours of receipt of the verbal order and a supporting written order is obtained from the primary care provider or medical practitioner within 14 days of receipt of the verbal order. Only a manager or caregiver may receive a verbal medication order;
 - 3. Only the following individuals provide medication administration:
 - a. A representative or a resident's relatives;
 - b. A nurse or other medical practitioner, or other individual authorized by law to provide medication administration; or
 - c. An employee authorized in writing by a resident's physician;
 - 4. A nurse, pharmacist, or primary care provider reviews the medication and medication record of each resident receiving medication administration or nursing services at least every 90 days and after a significant change in the resident's condition;

- 5. Employees and support staff do not provide non-prescription medication to a resident unless the resident has an order from the resident's primary care provider or medical practitioner for the medication; and
- 6. When a PRN medication is administered to a resident on a regular basis, the resident's primary care provider or medical practitioner is notified and a written order is obtained from the resident's primary care provider within 14 days.
- E. A licensee of an assisted living facility licensed to provide personal care services shall ensure a treatment for a resident receiving personal care services is administered as follows:
 - 1. A treatment that cannot be self-administered is administered by a nurse or as otherwise provided by law;
 - 2. A treatment is administered according to a written order from the resident's primary care provider or medical practitioner. A treatment order shall include the:
 - a. Name of resident;
 - b. Name, route of administration, and directions for use of treatment ordered;
 - c. Precautionary statements related to the administration of treatment, if applicable; and
 - d. Signature of primary care provider or medical practitioner and date signed;
 - 3. A verbal treatment order from a primary care provider or medical practitioner is noted in a resident's record within 24 hours of receipt of the verbal order and a supporting written order is obtained from the primary care provider or medical practitioner within 14 days of receipt of the verbal order. Only a manager or caregiver may receive a verbal treatment order; and
 - 4. A written record of treatment administered to a resident is completed by an employee and includes the:
 - a. Name of treatment, frequency, and route of administration;
 - b. Date and time treatment is scheduled to be administered; and
 - c. Date and time of actual treatment administration and signature or initials of the individual administering treatment.
- <u>A.</u> <u>A manager of an assisted living facility licensed to provide personal care services shall not accept</u> or retain a resident who:
 - <u>1.</u> <u>Is unable to direct self-care;</u>
 - 2. <u>Requires continuous nursing services unless:</u>
 - <u>a.</u> <u>The resident is under the care of a hospice service agency, or</u>
 - b. The assisted living facility meets the requirements of A.R.S. § 36-401(C);

- 3. Except as specified in subsection (B), is confined to a bed or chair because of an inability to ambulate even with assistance; or
- <u>Except as specified in subsection (C), has a stage 3 or stage 4 pressure sore, as</u>
 <u>determined by a registered nurse or medical practitioner.</u>
- **B.** A manager of an assisted living facility licensed to provide personal care services may accept or retain a resident who is confined to a bed or chair because of an inability to ambulate even with assistance if:
 - 1. The condition is a result of a short-term illness or injury; or
 - 2. The following requirements are met at the onset of the condition or when the resident is accepted by the assisted living facility:
 - a. The resident or resident's representative requests that the resident be accepted by or remain in the assisted living facility;
 - b. The resident's primary care provider or other medical practitioner:
 - <u>Examines the resident at the onset of the condition or within 30 days</u>
 <u>before acceptance and at least once every six months throughout the</u>
 <u>duration of the resident's condition;</u>
 - ii. <u>Reviews the assisted living facility's scope of services; and</u>
 - <u>Signs and dates a determination stating that the resident's needs can be</u>
 <u>met by the assisted living facility within the assisted living facility's</u>
 <u>scope of services and, for retention of a resident, are being met by the</u>
 <u>assisted living facility;</u>
 - <u>c.</u> The resident's service plan is revised to include the resident's increased need for personal care services; and
 - <u>d.</u> <u>The resident is under the care of home health agency or hospice service agency.</u>
- **C.** A manager of an assisted living facility licensed to provide personal care services may accept or retain a resident who has a stage 3 or stage 4 pressure sore, as determined by a registered nurse or medical practitioner, if the requirements in subsection (B)(2) are met.
- <u>D.</u> Unless the assisted living facility has documentation of having received an exception from the
 <u>Department before the effective date of these rules, a manager shall ensure that a bell, intercom,</u>
 <u>or other mechanical means to alert employees to a resident's needs or emergencies is installed in</u>
 <u>the bedroom or residential unit being used by a resident receiving personal care services.</u>
- <u>E.</u> In addition to the requirements in <u>R9-10-708(A)(3)</u>, a manager shall ensure that the service plan for a resident receiving personal care services includes:
 - 1. Skin maintenance to prevent and treat bruises, injuries, pressure sores, and infections;

- 2. Offering sufficient fluids to maintain hydration;
- 3. Incontinence care that ensures that a resident maintains the highest practicable level of independence when toileting;
- <u>If the resident is receiving assistance in the self-administration of medication or</u> medication administration, a written medication order from the resident's primary care provider or other medical practitioner; and
- <u>If applicable, the determination in subsection (B)(2)(b).</u> [Took out documentation of resident's weight]
- **F.** <u>A manager shall ensure that an employee does not provide non-prescription medication to a</u> resident receiving personal care services unless the resident has an order from the resident's primary care provider or medical practitioner for the medication.

[Removed references and requirements related to treatment]

R9-10-723. <u>R9-10-715.</u> Supplemental Requirements for an Assisted Living Facility Licensed toProvide Directed Care Services

- **A.** A <u>licensee manager</u> shall ensure that a representative is designated for a resident who is unable to direct self-care.
- **B.** A licensee of an assisted living facility licensed to provide directed care services shall not accept or retain a resident who:
 - 1. Is bedbound, unless the requirements in R9-10-722(A)(3) are met;
 - 2. Needs continuous nursing services, unless the requirements of R9-10-722(A)(2) are met; or
 - 3. Has a stage 3 or stage 4 pressure sore as determined by a nurse or other medical practitioner unless the requirements in R9-10-722(A)(4) are met.
- 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.
- **D.** In addition to the supplemental service requirements in R9-10-722(C) a licensee of an assisted living facility providing services to a resident who is unable to direct self-care shall provide the following:
 - 1. Direct supervision to ensure personal safety;

- 2. Coordination of communications with each representative, relatives, case manager, if applicable, and other individuals identified in the resident's service plan;
- 3. Cognitive stimulation and activities to maximize functioning;
- 4. Encouragement to eat meals and snacks;
- 5. An assessment of a resident who is unable to direct self-care by a primary care provider within 30 days of being accepted into the assisted living facility or within 30 days of becoming unable to direct self-care; and
- 6. Documentation of a resident's weight. A resident shall be weighed and the resident's weight recorded in the resident's service plan when a resident's service plan is developed or reviewed.
- **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.
- **F.** A licensee shall ensure that treatments for a resident receiving personal care services or directed care services are administered as required in R9-10-722(E).
- G. In addition to the requirements for a resident's record in R9-10-714, a licensee shall ensure that:
 - 1. The resident record for a resident who is unable to direct self-care contains a record of services provided by a licensed home health agency or licensed hospice service agency including:
 - A description of the home health service or hospice service provided to the resident and date and time provided;
 - b. The name, address, and phone number of the home health agency or hospice agency; and
 - c. Documentation of any instructions for the resident's care in the resident's service plan; and
 - 2. Instructions for the resident's care are communicated to employees.
- **H.** A licensee who provides services in a facility or portion of a facility to a resident who is unable to direct self care shall:
 - Develop and implement policies and procedures that ensure the continued safety of a resident who may wander;
 - 2. Ensure a means of exiting the facility that meets one of the following:
 - a. The assisted living facility provides a resident who does not have a key, special knowledge for egress, or special physical effort, access at all times to an outside area that is secure and allows the resident to be at least 30 feet away from the facility. If the outside area does not allow a resident to be at least 30 feet away

from the facility, the assisted living facility shall provide a means of egress from the outside area that allows the resident to be at least 30 feet from the facility; or

- b. The facility meets the Special Egress-Control Devices provisions in the Uniform Building Code incorporated by reference in A.A.C. R9-1-412.
- **I.** A licensee shall follow notification requirements in R9-10-703(B)(12) each time a resident who is unable to direct self-care wanders off facility grounds.
- <u>A manager of an assisted living facility licensed to provide directed care services shall not accept</u>
 <u>or retain a resident who:</u>
 - 1. <u>Requires continuous nursing services unless:</u>
 - <u>a.</u> <u>The resident is under the care of a hospice service agency, or</u>
 - b. The assisted living facility meets the requirements of A.R.S. § 36-401(C);
 - 2. Except as provided in R9-10-714(B)(2):
 - a. <u>Is confined to a bed or chair because of an inability to ambulate even with</u> assistance; or
 - b. Has a stage 3 or stage 4 pressure sore, as determined by a registered nurse or medical practitioner.
- <u>C.</u> In addition to the requirements in R9-10-708(A)(3), a manager shall ensure that the service plan for a resident receiving directed care services includes:
 - 1. The requirements in R9-10-714(E)(1) through (4);
 - <u>2.</u> If applicable, the determination in R9-10-714(B)(2)(b); [removed requirement for resident's weight]
 - 3. <u>A determination of deficits in the resident's cognitive awareness and reinforcement of</u> remaining cognitive awareness;
 - 4. <u>Cognitive stimulation and activities to maximize functioning;</u>
 - 5. Supervision of the resident to ensure personal safety;
 - 6. Encouragement to eat meals and snacks; and
 - 7.Coordination of communications with the resident's representative, family members, and,
if applicable, other individuals identified in the resident's service plan.
- D. <u>A manager shall ensure that an employee does not provide non-prescription medication to a resident receiving directed care services unless the resident has an order from the resident's primary care provider or medical practitioner for the medication.</u>

[Removed references and requirements related to treatment]

<u>E.</u> <u>A manager shall ensure that:</u>

- <u>A bell, intercom, or other mechanical means to alert employees to a resident's needs or</u> emergencies is installed in the bedroom being used by a resident receiving directed care services; or
- <u>The assisted living facility has implemented another means to alert a caregiver or</u> assistant caregiver to a resident's needs or emergencies.
- **F.** If a resident who is unable to direct self-care is receiving services from a home health agency or hospice service agency, a manager shall ensure that:
 - 1. The agency providing the services is licensed under this Chapter;
 - 2. The resident record contains documentation of services provided to the resident by the home health agency or hospice service agency, including:
 - a. <u>The name, address, and phone number of the home health agency or hospice</u> service agency; and
 - <u>A description of the services provided to the resident by the home health agency</u>
 <u>or hospice service agency and the date and time provided; and</u>
 - 3. <u>Any instructions for the resident's care are:</u>

i. <u>Communicated to a caregiver, and</u>

ii. Documented in the resident's service plan.

[Removed references to private duty nurse]

- **<u>G.</u>** <u>A manager of an assisted living facility licensed to provide directed care services shall ensure that:</u>
 - 1. Policies and procedures are established, documented, and implemented that ensure the continued safety of a resident who may wander;
 - <u>2.</u> There is a means of exiting the facility for a resident who does not have a key, special knowledge for egress, or special physical effort that meets one of the following:
 - a. <u>Provides access to an outside area that:</u>
 - i. <u>Allows the resident to be at least 30 feet away from the facility, and</u>
 - ii. <u>Controls or alerts employees of the egress of a resident from the</u> premises;
 - b. <u>Provides access to an outside area:</u>
 - i. From which a resident may exit to a location at least 30 feet away from the facility, and
 - ii. Controls or alerts employees of the egress of a resident from the premises; or

- <u>Uses of a mechanism that meets the Special Egress-Control Devices provisions</u>
 <u>in the Uniform Building Code incorporated by reference in A.A.C. R9-1-412;</u>
 <u>and</u>
- <u>A caregiver or an assistant caregiver complies with the requirements in R9-10-703(D)</u>
 <u>each time a resident who is unable to direct self-care wanders into an area not designated</u>
 <u>by the governing authority for use by residents.</u>

R9-10-724. R9-10-716.Supplemental Requirements for Training Programs an Assisted LivingFacility Providing Behavioral Health Services

- **A.** A training program shall meet the following requirements:
 - 1. Except as provided in subsection (A)(2), an instructor for the training program shall be any of following:
 - a. A nurse, physician, physician assistant, or related medical professional with at least two years of health related experience;
 - b. An individual with at least a bachelors degree in social work, gerontology, or closely related field and at least two years of health related experience;
 - e. An instructor employed by an accredited junior college, college, university or health care institution to teach health-related courses; or
 - d. An assisted living facility manager with at least two years experience serving as a manager in a residential care institution;
 - 2. If an instructor does not met the requirements in subsection (A)(1), the instructor may provide specific training in a level of training as designated in subsection (C)(3) or a training component as stated in subsection (B)(3) if the instructor has:
 - a. Education that qualifies the instructor to provide the training;
 - b. Experience that qualifies the instructor to provide the training; or
 - c. Taught a class that includes the specific training;
 - 3. An instructor for the training program shall not provide training if the instructor:
 - a. Is serving as a manager of a health care institution operating under a provisional license; or
 - b. Has had a license to operate a health care institution revoked or suspended;
 - 4. Instructional methods for personal care services shall include opportunities for an individual receiving the training to practice skills on a mannequin or individual; and

5. Training shall be provided using the instructors, manuals, student handouts, learning objectives, and verification tools and methods approved by the Department as prescribed in subsection (D).

B. A training program shall:

- 1. Be constructed to allow an individual to demonstrate the specific skills and knowledge of a level of training or training component;
- 2. Issue a verification of completion of training:
 - a. That states:
 - i. The name of individual;
 - ii. Each level of training completed by the individual;
 - iii. The date of completion; and
 - iv. The name of training program;
 - b. To an individual who:
 - i. Completes training in subsection (B)(3) and demonstrates specific skills and knowledge in the level of training; or
 - Does not complete the training in subsection (B)(3) but demonstrates the specific skills and knowledge in the learning objectives of the level of training;
- 3. Provide training as follows:
 - a. For an individual who will be providing supervisory care services: 20 hours or the amount of time needed to verify that an individual demonstrates the specific skills and knowledge in the learning objectives in each of the following training components:
 - Promoting resident dignity, independence, self-determination, privacy, choice, resident rights, and ethics;
 - ii. Communicating effectively with a resident, a representative and relatives, individuals who appear angry, depressed, or unresponsive;
 - iii. Managing personal stress;
 - iv. Preventing abuse, neglect, and exploitation and reporting requirements;
 - v. Controlling the spread of disease and infection;
 - vi. Recordkeeping and documentation;
 - vii. Following and implementing resident service plans;
 - viii. Nutrition, hydration, and food services;
 - ix. Assisting in the self-administration of medications;

- x. Developing and providing social, recreational, and rehabilitative activities; and
- xi. Fire, safety, and emergency procedures;
- b. For an individual who will be providing personal care services: In addition to verification of the training components in subsection (B)(3)(a), 30 hours or the amount of time needed to verify that an individual demonstrates specific skills and knowledge in the learning objectives of each of the following training components:
 - The aging process and medical conditions associated with aging or physical disabilities;
 - ii. Assisting residents in activities of daily living and taking vital signs; and
 - iii. Medications;
- For an individual who will be providing directed care services: In addition to verification of the training components in subsection (B)(3)(a) and (b), 12 hours or the amount of time needed to verify that an individual demonstrates specific skills and knowledge in the learning objectives of each of the following training components:
 - i. Overview of Alzheimer's disease and related dementias;
 - ii. Communicating with a resident who is unable to direct self-care;
 - iii. Providing services, including problem solving, maximizing functioning, and life skills training for a resident who is unable to direct self care;
 - iv. Managing difficult behaviors in a resident who is unable to direct selfcare; and
 - Developing and providing social, recreational, and rehabilitative activities for residents who are unable to direct self-care;

d. For an individual who will be acting as a manager of an assisted living facility:
 eight hours or the amount of time needed to verify that an individual
 demonstrates the specific skills and knowledge in the learning objectives in each
 of the following training components:

- i. Developing resident service plans,
- ii. Business practices,
- iii. Personnel management,
- iv. Delegation of authority,
- v. Developing policies and procedures, and

- vi. Overview of the laws and rules governing assisted living facilities;
- Accept documentation that an individual is certified as a nursing assistant under A.R.S. Title 32, Chapter 15 as verification of the skills and knowledge required in subsection (B)(3)(b)(i) and (ii);
- 5. Use only instructors who meet the qualifications in subsection (A)(1) and (2);
- 6. Maintain the following records at the location designated on the application for five years from the date the instructor provided training:
 - a. The name and documentation of qualifications of each instructor;
 - b. A copy of each certificate of training issued by the training program;
 - c. The written instrument verifying that the individual demonstrated the specific skills and knowledge in each learning objective for a level of training; and
 - d. Evaluations required by subsection (B)(7); and
- Ensure that an individual who receives a certificate of training submits an evaluation of the training program to the training program that includes:
 - a. The name of each instructor,
 - b. An evaluation of each instructor,
 - c. An evaluation of training, and
 - d. Suggestions or recommendations.
- **C.** An applicant for Department approval of an assisted living training program shall submit an application to the Department that includes:
 - 1. A completed application form, provided by the Department, that includes:
 - a. The name of the training program;
 - b. The mailing address for the training program;
 - c. The phone number for the training program;
 - d. The location or locations where training will be provided;
 - e. The location where training records will be maintained;
 - f. The name of a contact person; and
 - g. The signature of the following:
 - h. If an individual, the signature of the individual;
 - i. If a partnership, the signatures of two of the partners;
 - j. If a corporation, the signatures of two officers of the corporation;
 - k. If a limited liability company, the designated manager, or if no manager is
 designated, the signatures of any two members of the limited liability company;
 or

- If a governmental agency, the signature of the director of the governmental agency or the individual designated in writing by the director.
- 2. The names and qualifications of each instructor providing training;
- 3. The designation of one or more of the following levels of training provided by the training program:
 - a. Supervisory care services;
 - b. Personal care services;
 - c. Directed care services; or
 - d. Manager training; and
- 4. The following information for each level of training provided:
 - a. The instructional method or methods;
 - b. A detailed training outline;
 - c. The learning objectives;
 - d. The instructor's manuals and student handouts; and
 - e. The tool and method or methods of verification that an individual has achieved the learning objective.
- **D.** For Department approval of a training program:
 - 1. The overall time-frame described in A.R.S. § 41-1072(2), is 90 days.
 - 2. The administrative completeness review described in A.R.S. § 41–1072(1) is 60 days and begins on the date the Department receives an application.
 - a. If any of the documents is missing or if information on the documents is deficient, the Department shall provide to the applicant a written notice of incompleteness that states each deficiency and the information or documents needed to complete the application. The 60 day time frame for the Department to finish the administrative completeness review is suspended from the date the Department provides the notice of incompleteness to the applicant until the date the Department receives the required information or missing document.
 - b. If all of the documents are submitted and the information on the documents is complete, the Department shall provide a written notice of administrative completeness to the applicant.
 - e. If the documents or information are not submitted within 120 days from the date of notice of incompleteness, the Department shall consider the application withdrawn.

- d. If the Department grants approval to the training program during the time
 provided to assess administrative completeness, the Department shall not provide
 a separate written notice of administrative completeness.
- The substantive review time-frame described in A.R.S. § 41–1072(3) is 30 days and begins on the date the Department provides written notice of administrative completeness to the applicant.
 - a. If the applicant does not meet the requirements of this Section the Department shall provide a written request for additional information to the applicant. The 30 day time-frame for the Department to finish the substantive review is suspended from the date the Department provides the written request to the applicant until the Department receives the additional information.
 - b. The applicant shall submit to the Department the information or documents identified in the written request for additional information within 30 days of the receipt of the written request.
 - c. The Department shall provide the applicant with a written notice of denial if:
 - i. The applicant does not submit the additional information within the timeframe in subsection (D)(3)(b); or
 - Upon receipt of the additional information from the applicant, the Department determines that the applicant does not meet the requirements of this Section.
 - An applicant may appeal the Department's determination according to A.R.S.
 Title 41, Chapter 6.
- If an applicant meets the requirements of this Section, the Department shall provide a written notice of Department approval to the applicant.
- **E.** To change the level of training that a training program is approved to provide, the training program shall submit to the Department the information for the requested level of training in subsection (C)(2),(3), and (4). The Department shall comply with the requirements for approval of a training program in subsection (D).
- **F.** A training program shall not provide training or a level of training until the training program receives written Department approval.
- **G.** A training program shall submit to the Department:
 - Any changes to the information required in subsection (C)(1) no later than 30 days from the date of the change, and

- 2. The information required in subsection (C)(2) for an instructor before the instructor provides training for the training program.
- H. To renew a training program's approval, a training program shall submit to the Department every 24 months from the date of approval, the information in subsection (C). The Department shall comply with the requirements for approval of a training program in subsection (D).
- **I.** The Department may withdraw a training program's approval if:
 - 1. The training program does not comply with the requirements in subsection (A), (B), or (C);
 - 2. The Department determines that the training program issued a certificate of training to an individual who did not demonstrate the specific knowledge and skills of a learning objective in a training component in the level of training stated on the certificate; or
 - 3. The training program fails to meet the requirements in subsection (E), (F), (G), or (H).
- J. The Department may observe a training program's instructional or verification methods; review the training programs records; and interview instructors, individuals trained, and other individuals to determine a training program's compliance with this Section.

If an assisted living facility provides behavioral health services, a manager shall ensure that:

- Policies and procedures are established, documented, and implemented that cover when informed consent is required and by whom informed consent may be given; and
- 2. <u>The behavioral health services:</u>
 - a. <u>Are provided under the direction of a behavioral health professional; and</u>
 - b. <u>Comply with the requirements:</u>
 - For behavioral health paraprofessionals and behavioral health technicians, in R9-10-114, and
 - <u>ii. In R9-10-1013 (B) and (C).</u>