



**Bureau of Residential Facilities Licensing
Assisted Living Home Initial Checklist**

**Title 9, Chapter 10, Article 1 (General)
Title 9, Chapter 10, Article 8 (Assisted Living Facilities - Assisted Living Homes)**

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| A.R.S. § 36-401. | Definitions; |
| A. | In this chapter, unless the context otherwise requires: |
| 9. | "Assisted living facility" means a residential care institution, including an adult foster care home, that provides or contracts to provide supervisory care services, personal care services or directed care services on a continuous basis. |
| 10. | "Assisted living home" means an assisted living facility that provides resident rooms to ten or fewer residents. |
| 16. | "Directed care services" means programs and services, including supervisory and personal care services, that are provided to persons who are incapable of recognizing danger, summoning assistance, expressing need or making basic care decisions. |
| 38. | "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. |
| 47. | "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. |

This checklist is a tool for use in preparing for an initial inspection and does NOT contain all applicable regulations (rules and statutes) that govern the licensure of Assisted Living Facilities.

The Department conducts an on-site initial inspection of each facility as part of the substantive review for issuing a license. To avoid delays in obtaining a license, please ensure the facility is in compliance with ALL regulations that govern Assisted Living Homes before scheduling an inspection. It is the applicant's responsibility to review, comprehend, and demonstrate substantial compliance with all regulations that govern the facility. The Department and the Department's surveyors are NOT permitted to provide consultation services.

Please note the following when preparing for an on-site initial inspection:

- Policies and procedures must be applicable to the health care institution's class/subclass.
- A policy must be the intentions of the facility and the procedure must be how the facility will implement their intentions.
- Writing the page number of each policy and procedure next to the applicable rule may accelerate the on-site substantive review process.
- The facility must have a sample form for all documents required by rule.
- The facility must have complete personnel records for all required staff along with a tentative work schedule.
- The facility's premises must not have environmental safety issues and must be sufficient to accommodate the services in the scope of services.

Please see the Bureau's "Providers" home page for additional licensing resources.
<http://www.azdhs.gov/licensing/residential-facilities/index.php#providers-home>

| Rule Reference | Rule Text | Licensee Preparation |
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| A.R.S. § 36-411. | Residential care institutions; nursing care institutions; home health agencies; fingerprinting requirements; exemptions; definitions; | Check box when compliant |
| C. | Owners shall make documented, good faith efforts to: | Personnel |
| 1. | Contact previous employers to obtain information or recommendations that may be relevant to a person's fitness to work in a residential care institution, nursing care institution or home health agency. | <input type="checkbox"/> |
| 2. | Verify the current status of a person's fingerprint clearance card. | <input type="checkbox"/> |
| A.R.S. § 36-420. | Health care institutions; cardiopulmonary resuscitation; first aid; immunity; falls; definition | Check box when compliant |
| B. | Each health care institution: | Policies and Procedures |
| 3. | May not have, establish or implement policies that prevent employees from providing appropriate cardiopulmonary resuscitation and first aid. | <input type="checkbox"/> |
| A.R.S. § 36-420.01. | Health care institutions; fall prevention and fall recovery; training programs; definition | Check box when compliant |
| A. | Each health care institution shall develop and administer a training program for all staff regarding fall prevention and fall recovery. The training program shall include initial training and continued competency training in fall prevention and fall recovery. A health care institution may use information and training materials from the department's Arizona falls prevention coalition in developing the training program. | Personnel <input type="checkbox"/> |
| R9-10-113. | Tuberculosis Screening | Check box when compliant |

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| A. | If a health care institution is subject to the requirements of this Section, as specified in an Article in this Chapter, the health care institution's chief administrative officer shall ensure that the health care institution establishes, documents, and implements tuberculosis infection control activities that: | Personnel |
| 2. | Include: | --- |
| a. | For each individual who is employed by the health care institution, provides volunteer services for the health care institution, or is admitted to the health care institution and who is subject to the requirements of this Section, baseline screening, on or before the date specified in the applicable Article of this Chapter, that consists of: | --- |
| i. | Assessing risks of prior exposure to infectious tuberculosis, | <input type="checkbox"/> |
| ii. | Determining if the individual has signs or symptoms of tuberculosis, and | <input type="checkbox"/> |
| iii. | Obtaining documentation of the individual's freedom from infectious tuberculosis according to subsection (B)(1); | <input type="checkbox"/> |
| R9-10-120. Opioid Prescribing and Treatment | | Check box when compliant |
| F. | For a health care institution where opioids are administered as part of treatment or where a patient is provided assistance in the self-administration of medication for a prescribed opioid, including a health care institution in which an opioid may be prescribed or ordered as part of treatment, an administrator, a manager as defined in R9-10-801, or a provider, as applicable to the health care institution, shall: | Policies and Procedures |
| 1. | Establish, document, and implement policies and procedures for administering an opioid as part of treatment or providing assistance in the self-administration of medication for a prescribed opioid, to protect the health and safety of a patient, that: | --- |
| a. | Cover which personnel members may administer an opioid in treating a patient and the required knowledge and qualifications of these personnel members; | <input type="checkbox"/> |
| b. | Cover which personnel members may provide assistance in the self-administration of medication for a prescribed opioid and the required knowledge and qualifications of these personnel members; | <input type="checkbox"/> |
| c. | Include how, when, and by whom a patient's need for opioid administration is assessed; | <input type="checkbox"/> |
| d. | Include how, when, and by whom a patient receiving an opioid is monitored; and | <input type="checkbox"/> |
| e. | Cover how, when, and by whom the actions taken according to subsections (F)(1)(c) and (d) are documented; | <input type="checkbox"/> |
| 2. | Include in the plan for the health care institution's quality management program a process for: | Quality Management |
| a. | Review of incidents of opioid-related adverse reactions or other negative outcomes a patient experiences or opioid-related deaths, and | <input type="checkbox"/> |
| b. | Surveillance and monitoring of adherence to the policies and procedures in subsection (F)(1); | <input type="checkbox"/> |
| R9-10-803. Administration | | Check box when compliant |
| A. | A governing authority shall: | Documentation |
| 2. | Establish, in writing, an assisted living facility's scope of services; | <input type="checkbox"/> |
| 3. | Designate, in writing, a manager who: | --- |
| a. | Is 21 years of age or older; and | <input type="checkbox"/> |
| b. | Except for the manager of an adult foster care home, has either a: | --- |
| i. | Certificate as an assisted living facility manager issued under A.R.S. § 36-446.04(C), or | <input type="checkbox"/> |
| ii. | A temporary certificate as an assisted living facility manager issued under A.R.S. § 36-446.06; | <input type="checkbox"/> |
| B. | A manager: | --- |
| 3. | Except as provided in subsection (A)(6), designates, in writing, a caregiver who is: | --- |
| a. | At least 21 years of age, and | <input type="checkbox"/> |
| b. | Present on the assisted living facility's premises and accountable for the assisted living facility when the manager is not present on the assisted living facility premises. | <input type="checkbox"/> |
| C. | A manager shall ensure that policies and procedures are: | Policies and Procedures |
| 1. | Established, documented, and implemented to protect the health and safety of a resident that: | --- |
| a. | Cover job descriptions, duties, and qualifications, including required skills and knowledge, education, and experience for employees and volunteers; | <input type="checkbox"/> |
| b. | Cover orientation and in-service education for employees and volunteers; | <input type="checkbox"/> |
| c. | Include how an employee may submit a complaint related to resident care; | <input type="checkbox"/> |
| d. | Cover the requirements in A.R.S. Title 36, Chapter 4, Article 11; | <input type="checkbox"/> |
| e. | Except as provided in subsection (M), cover cardiopulmonary resuscitation training for applicable employees and volunteers, including: | --- |
| i. | The method and content of cardiopulmonary resuscitation training, which includes a demonstration of the employee's or volunteer's ability to perform cardiopulmonary resuscitation; | <input type="checkbox"/> |
| ii. | The qualifications for an individual to provide cardiopulmonary resuscitation training; | <input type="checkbox"/> |
| iii. | The time-frame for renewal of cardiopulmonary resuscitation training; and | <input type="checkbox"/> |
| iv. | The documentation that verifies that the employee or volunteer has received cardiopulmonary resuscitation training; | <input type="checkbox"/> |
| f. | Cover first aid training; | <input type="checkbox"/> |
| g. | Cover how a caregiver will respond to a resident's sudden, intense, or out-of-control behavior to prevent harm to the resident or another individual; | <input type="checkbox"/> |
| h. | Cover staffing and recordkeeping; | <input type="checkbox"/> |
| i. | Cover resident acceptance and resident rights; | <input type="checkbox"/> |

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| j. | Cover termination of residency, including: | --- |
| i. | Termination initiated by the manager of an assisted living facility, and | <input type="checkbox"/> |
| ii. | Termination initiated by a resident or the resident's representative; | <input type="checkbox"/> |
| k. | Cover the provision of assisted living services, including: | --- |
| i. | Coordinating the provision of assisted living services, | <input type="checkbox"/> |
| ii. | Making vaccination for influenza and pneumonia available to residents according to A.R.S. § 36-406(1)(d), and | <input type="checkbox"/> |
| iii. | Obtaining resident preferences for food and the provision of assisted living services; | <input type="checkbox"/> |
| l. | Cover the provision of respite services or adult day health services, if applicable; | <input type="checkbox"/> |
| m. | Cover methods by which the assisted living facility is aware of the general or specific whereabouts of a resident, based on the level of assisted living services provided to the resident and the assisted living services the assisted living facility is authorized to provide; | <input type="checkbox"/> |
| n. | Cover resident medical records, including electronic medical records; | <input type="checkbox"/> |
| o. | Cover personal funds accounts, if applicable; | <input type="checkbox"/> |
| p. | Cover specific steps for: | --- |
| i. | A resident to file a complaint, and | <input type="checkbox"/> |
| ii. | The assisted living facility to respond to a resident's complaint; | <input type="checkbox"/> |
| q. | Cover health care directives; | <input type="checkbox"/> |
| r. | Cover assistance in the self-administration of medication, and medication administration; | <input type="checkbox"/> |
| s. | Cover food services; | <input type="checkbox"/> |
| t. | Cover contracted services; | <input type="checkbox"/> |
| u. | Cover equipment inspection and maintenance, if applicable; | <input type="checkbox"/> |
| v. | Cover infection control; and | <input type="checkbox"/> |
| w. | Cover a quality management program, including incident report and supporting documentation; | <input type="checkbox"/> |
| | | Documentation |
| 2. | Available to employees and volunteers of the assisted living facility; and | <input type="checkbox"/> |
| 3. | Reviewed at least once every three years and updated as needed. | <input type="checkbox"/> |
| | | Postings |
| D. | A manager shall ensure that the following are conspicuously posted: | <input type="checkbox"/> |
| 1. | A list of resident rights; | <input type="checkbox"/> |
| 2. | The assisted living facility's license; | <input type="checkbox"/> |
| 3. | Current phone numbers of: | --- |
| a. | The unit in the Department responsible for licensing and monitoring the assisted living facility, | <input type="checkbox"/> |
| b. | Adult Protective Services in the Department of Economic Security, | <input type="checkbox"/> |
| c. | The State Long-Term Care Ombudsman, and | <input type="checkbox"/> |
| d. | The Arizona Center for Disability Law; and | <input type="checkbox"/> |
| 4. | The location at which a copy of the most recent Department inspection report and any plan of correction resulting from the Department inspection may be viewed. | <input type="checkbox"/> |
| | | Documentation |
| F. | If a requirement in this Article states that a manager shall ensure an action or condition or sign a document: | <input type="checkbox"/> |
| 3. | If the manager delegates ensuring an action or condition or signing a document, the delegation is documented and the documentation includes the name of the individual to whom the action, condition, or signing is delegated and the effective date of the delegation. | <input type="checkbox"/> |
| | | Policies and Procedures |
| M. | A manager of an assisted living home may establish, in policies and procedures, requirements that a caregiver obtains and provides documentation of cardiopulmonary resuscitation training specific to adults, which includes a demonstration of the caregiver's ability to perform cardiopulmonary resuscitation, from one of the following organizations: | <input type="checkbox"/> |
| 1. | American Red Cross, | <input type="checkbox"/> |
| 2. | American Heart Association, or | <input type="checkbox"/> |
| 3. | National Safety Council. | <input type="checkbox"/> |
| R9-10-804. | Quality Management | Check box when compliant |
| 804. | A manager shall ensure that: | Quality Management |
| 1. | A plan is established, documented, and implemented for an ongoing quality management program that, at a minimum, includes: | --- |
| a. | A method to identify, document, and evaluate incidents; | <input type="checkbox"/> |
| b. | A method to collect data to evaluate services provided to residents; | <input type="checkbox"/> |
| c. | A method to evaluate the data collected to identify a concern about the delivery of services related to resident care; | <input type="checkbox"/> |
| d. | A method to make changes or take action as a result of the identification of a concern about the delivery of services related to resident care; and | <input type="checkbox"/> |
| e. | The frequency of submitting a documented report required in subsection (2) to the governing authority; | <input type="checkbox"/> |
| R9-10-805. | Contracted Services | Check box when compliant |
| 805. | A manager shall ensure that: | Documentation |

2. Documentation of current contracted services is maintained that includes a description of the contracted services provided.

| R9-10-806. Personnel | Check box when compliant |
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| A. A manager shall ensure that: | Personnel |
| 1. A caregiver: | --- |
| a. Is 18 years of age or older; and | <input type="checkbox"/> |
| b. Provides documentation of: | --- |
| i. Completion of a caregiver training program approved by the Department or the Board of Examiners for Nursing Care Institution Administrators and Assisted Living Facility Managers; | <input type="checkbox"/> |
| ii. For supervisory care services, employment as a manager or caregiver of a supervisory care home before November 1, 1998; | <input type="checkbox"/> |
| iii. For supervisory care services or personal care services, employment as a manager or caregiver of a supportive residential living center before November 1, 1998; or | <input type="checkbox"/> |
| iv. For supervisory care services, personal care services, or directed services, one of the following: | --- |
| (1) A nursing care institution administrator's license issued by the Board of Examiners; | <input type="checkbox"/> |
| (2) A nurse's license issued to the individual under A.R.S. Title 32, Chapter 15; | <input type="checkbox"/> |
| (3) Documentation of employment as a manager or caregiver of an unclassified residential care institution before November 1, 1998; or | <input type="checkbox"/> |
| (4) Documentation of sponsorship of or employment as a caregiver in an adult foster care home before November 1, 1998; | <input type="checkbox"/> |
| 2. An assistant caregiver: | --- |
| a. Is 16 years of age or older, and | <input type="checkbox"/> |
| 3. The qualifications, skills, and knowledge required for a caregiver or assistant caregiver: | --- |
| a. Are based on: | --- |
| i. The type of assisted living services, behavioral health services, or behavioral care expected to be provided by the caregiver or assistant caregiver according to the established job description; and | <input type="checkbox"/> |
| ii. The acuity of the residents receiving assisted living services, behavioral health services, or behavioral care from the caregiver or assistant caregiver according to the established job description; and | <input type="checkbox"/> |
| b. Include: | --- |
| i. The specific skills and knowledge necessary for the caregiver or assistant caregiver to provide the expected assisted living services, behavioral health services, or behavioral care listed in the established job description; | <input type="checkbox"/> |
| ii. The type and duration of education that may allow the caregiver or assistant caregiver to have acquired the specific skills and knowledge for the caregiver or assistant caregiver to provide the expected assisted living services, behavioral health services, or behavioral care listed in the established job description; and | <input type="checkbox"/> |
| iii. The type and duration of experience that may allow the caregiver or assistant caregiver to have acquired the specific skills and knowledge for the caregiver or assistant caregiver to provide the expected assisted living services, behavioral health services or behavioral care listed in the established job description; | <input type="checkbox"/> |
| 4. A caregiver's or assistant caregiver's skills and knowledge are verified and documented: | Policies and Procedures/ Documentation |
| b. According to policies and procedures; | <input type="checkbox"/> |
| 5. An assisted living facility has a manager, caregivers, and assistant caregivers with the qualifications, experience, skills, and knowledge necessary to: | Personnel |
| a. Provide the assisted living services, behavioral health services, behavioral care, and ancillary services in the assisted living facility's scope of services; | <input type="checkbox"/> |
| B. A manager of an assisted living home shall ensure that: | Documentation |
| 1. An individual residing in an assisted living home, who is not a resident, a manager, a caregiver, or an assistant caregiver: | --- |
| a. Either: | --- |
| i. Complies with the fingerprinting requirements in A.R.S. § 36-411, or | <input type="checkbox"/> |
| ii. Interacts with residents only under the supervision of an individual who has a valid fingerprint clearance card; and | <input type="checkbox"/> |
| b. If the individual is 12 years of age or older, provides evidence of freedom from infectious tuberculosis as specified in R9-10-113; | <input type="checkbox"/> |
| 3. As part of the policies and procedures required in R9-10-803(C)(1)(h), a plan is established, documented, and implemented to ensure that the manager or a caregiver is available as back-up to provide assisted living services to a resident if the manager or a caregiver assigned to work is not available or not able to provide the required assisted living services; and | Policies and Procedures <input type="checkbox"/> |
| 4. At least the manager or a caregiver is present at an assisted living home when a resident is present in the assisted living home and: | --- |
| b. If the manager or caregiver is not awake during nighttime hours: | --- |
| ii. If the assisted living home is authorized to provide directed care services, policies and procedures are developed, documented, and implemented to establish a process for checking on a resident receiving directed care services during nighttime hours to ensure the resident's health and safety. | <input type="checkbox"/> |
| C. A manager shall ensure that a personnel record for each employee or volunteer: | Documentation |

- 1. Includes:
 - a. The individual's name, date of birth, and contact telephone number;
 - b. The individual's starting date of employment or volunteer service and, if applicable, the ending date; and
 - c. Documentation of:
 - i. The individual's qualifications, including skills and knowledge applicable to the individual's job duties;
 - ii. The individual's education and experience applicable to the individual's job duties;
 - iii. The individual's completed orientation and in-service education required by policies and procedures;
 - iv. The individual's license or certification, if the individual is required to be licensed or certified in this Article or in policies and procedures;
 - v. If the individual is a behavioral health technician, clinical oversight required in R9-10-115;
 - vi. Evidence of freedom from infectious tuberculosis, if required for the individual according to subsection (A)(8);
 - vii. Cardiopulmonary resuscitation training, if required for the individual in this Article or policies and procedures;
 - viii. First aid training, if required for the individual in this Article or policies and procedures; and
 - ix. Documentation of compliance with the requirements in A.R.S. § 36-411(A) and (C);

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| R9-10-807. Residency and Residency Agreements | Check box when compliant |
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- B.** A manager shall ensure that before or at the time of acceptance of an individual, the individual submits documentation that is dated within 90 calendar days before the individual is accepted by an assisted living facility and:
 - 1. If an individual is requesting or is expected to receive supervisory care services, personal care services, or directed care services:
 - a. Includes whether the individual requires:
 - i. Continuous medical services,
 - ii. Continuous or intermittent nursing services, or
 - iii. Restraints; and
- D.** Before or at the time of an individual's acceptance by an assisted living facility, a manager shall ensure that there is a documented residency agreement with the assisted living facility that includes:
 - 1. The individual's name;
 - 2. Terms of occupancy, including:
 - a. Date of occupancy or expected date of occupancy,
 - b. Resident responsibilities, and
 - c. Responsibilities of the assisted living facility;
 - 3. A list of the services to be provided by the assisted living facility to the resident;
 - 4. A list of the services available from the assisted living facility at an additional fee or charge;
 - 5. For an assisted living home, whether the manager or a caregiver is awake during nighttime hours;
 - 6. The policy for refunding fees, charges, or deposits;
 - 7. The policy and procedure for a resident to terminate residency, including terminating residency because services were not provided to the resident according to the resident's service plan;
 - 8. The policy and procedure for an assisted living facility to terminate residency;
 - 9. The complaint process; and

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| R9-10-808. Service Plan | Check box when compliant |
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- A.** Except as required in subsection (B), a manager shall ensure that a resident has a written service plan that:
 - 3. Includes the following:
 - a. A description of the resident's medical or health problems, including physical, behavioral, cognitive, or functional conditions or impairments;
 - b. The level of service the resident is expected to receive;
 - c. The amount, type, and frequency of assisted living services being provided to the resident, including medication administration or assistance in the self-administration of medication;
 - d. For a resident who requires intermittent nursing services or medication administration, review by a nurse or medical practitioner;
- D.** A manager of an assisted living facility that is authorized to provide adult day health services shall ensure that the adult day health care services are provided as specified in R9-10-1113. Adult Day Health Services
- F.** A manager shall ensure that:
 - 1. Daily social, recreational, or rehabilitative activities are planned according to residents' preferences, needs, and abilities;
 - 2. A calendar of planned activities is:
 - a. Prepared at least one week in advance of the date the activity is provided,
 - b. Posted in a location that is easily seen by residents,
- 2. Equipment and supplies are available and accessible to accommodate a resident who chooses to participate in a Environmental

3. planned activity; and
4. Multiple media sources, such as daily newspapers, current magazines, internet sources, and a variety of reading materials, are available and accessible to a resident to maintain the resident's continued awareness of current news, social events, and other noteworthy information.

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| R9-10-809. Transport; Transfer | Check box when compliant |
| A. Except as provided in subsection (B), a manager shall ensure that: | Policies and Procedures |
| 2. According to policies and procedures: | --- |
| a. An evaluation of the resident is conducted before and after the transport, and | <input type="checkbox"/> |
| b. Information from the resident's medical record is provided to a receiving health care institution; and | <input type="checkbox"/> |
| C. Except for a transfer of a resident due to an emergency, a manager shall ensure that: | --- |
| 2. According to policies and procedures: | --- |
| a. An evaluation of the resident is conducted before the transfer; | <input type="checkbox"/> |
| b. Information from the resident's medical record, including orders that are in effect at the time of the transfer, is provided to a receiving health care institution; and | <input type="checkbox"/> |
| c. A caregiver explains risks and benefits of the transfer to the resident or the resident's representative; and | <input type="checkbox"/> |
| R9-10-810. Resident Rights | Check box when compliant |
| B. A manager shall ensure that: | Documentation |
| 3. A resident or the resident's representative: | --- |
| b. Consents to photographs of the resident before the resident is photographed, except that a resident may be photographed when accepted as a resident by an assisted living facility for identification and administrative purposes; | <input type="checkbox"/> |
| C. A resident has the following rights: | Environmental |
| 3. To receive privacy in: | --- |
| a. Care for personal needs; | <input type="checkbox"/> |
| R9-10-811. Medical Records | Check box when compliant |
| A. A manager shall ensure that: | Policies and Procedures |
| 2. An entry in a resident's medical record is: | --- |
| a. Only recorded by an individual authorized by policies and procedures to make the entry; | <input type="checkbox"/> |
| 4. A resident's medical record is available to an individual: | --- |
| a. Authorized according to policies and procedures to access the resident's medical record; | <input type="checkbox"/> |
| 5. A resident's medical record is protected from loss, damage, or unauthorized use. | Documentation |
| | <input type="checkbox"/> |
| B. If an assisted living facility maintains residents' medical records electronically, a manager shall ensure that: | --- |
| 1. Safeguards exist to prevent unauthorized access, and | <input type="checkbox"/> |
| R9-10-812. Behavioral Care | Check box when compliant |
| 812. A manager shall ensure that for a resident who requests or receives behavioral care from the assisted living facility, a behavioral health professional or medical practitioner: | Documentation |
| 3. Signs and dates a determination stating that the resident's need for behavioral care can be met by the assisted living facility within the assisted living facility's scope of services and, for retention of a resident, are being met by the assisted living facility. | <input type="checkbox"/> |
| R9-10-813. Behavioral Health Services | Check box when compliant |
| 813. If an assisted living facility is authorized to provide behavioral health services other than behavioral care, a manager shall ensure that: | Policies and Procedures |
| 1. Policies and procedures are established, documented, and implemented that cover when general consent and informed consent are required and by whom general consent and informed consent may be given; | <input type="checkbox"/> |
| 3. For a resident who requests or receives behavioral health services from the assisted living facility, a behavioral health professional: | Documentation |
| c. Signs and dates a determination stating that the resident's needs can be met by the assisted living facility within the assisted living facility's scope of services and, for retention of a resident, are being met by the assisted living facility. | <input type="checkbox"/> |
| R9-10-814. Personal Care Services | Check box when compliant |
| B. A manager of an assisted living facility authorized 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: | Documentation |
| 2. The following requirements are met at the onset of the condition or when the resident is accepted by the assisted living facility: | --- |
| b. The resident's primary care provider or other medical practitioner: | --- |
| iii. Signs and dates a determination stating that the resident's needs can be met by the assisted living facility within the assisted living facility's scope of services and, for retention of a resident, are being met by the assisted living facility; and | <input type="checkbox"/> |

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| E. | A manager shall ensure that a bell, intercom, or other mechanical means to alert employees to a resident's needs or emergencies is available and accessible in a bedroom or residential unit being used by a resident receiving personal care services. | Environmental <input type="checkbox"/> |
| F. | In addition to the requirements in R9-10-808(A)(3), a manager shall ensure that the service plan for a resident receiving personal care services includes: | Documentation |
| 1. | Skin maintenance to prevent and treat bruises, injuries, pressure sores, and infections; | <input type="checkbox"/> |
| 2. | Offering sufficient fluids to maintain hydration; | <input type="checkbox"/> |
| 3. | Incontinence care that ensures that a resident maintains the highest practicable level of independence when toileting; and | <input type="checkbox"/> |
| R9-10-815. Directed Care Services | | Check box when compliant |
| C. | In addition to the requirements in R9-10-808(A)(3), a manager shall ensure that the service plan for a resident receiving directed care services includes: | Documentation |
| 1. | The requirements in R9-10-814(F)(1) through (3); | <input type="checkbox"/> |
| 3. | Cognitive stimulation and activities to maximize functioning; | <input type="checkbox"/> |
| 4. | Strategies to ensure a resident's personal safety; | <input type="checkbox"/> |
| 5. | Encouragement to eat meals and snacks; | <input type="checkbox"/> |
| 6. | Documentation: | --- |
| a. | Of the resident's weight, or | <input type="checkbox"/> |
| b. | From a medical practitioner stating that weighing the resident is contraindicated; and | <input type="checkbox"/> |
| 7. | Coordination of communications with the resident's representative, family members, and, if applicable, other individuals identified in the resident's service plan. | <input type="checkbox"/> |
| E. | A manager shall ensure that: | Environmental |
| 1. | A bell, intercom, or other mechanical means to alert employees to a resident's needs or emergencies is available in a bedroom being used by a resident receiving directed care services; or | <input type="checkbox"/> |
| 2. | An assisted living facility has implemented another means to alert a caregiver or assistant caregiver to a resident's needs or emergencies. | <input type="checkbox"/> |
| F. | A manager of an assisted living facility authorized to provide directed care services shall ensure that: | Policies and Procedures |
| 1. | Policies and procedures are established, documented, and implemented that ensure the safety of a resident who may wander; | <input type="checkbox"/> |
| 2. | There is a means of exiting the facility for a resident who does not have a key, special knowledge for egress, or the ability to expend increased physical effort that meets one of the following: | Environmental |
| a. | Provides access to an outside area that: | --- |
| i. | Allows the resident to be at least 30 feet away from the facility, and | <input type="checkbox"/> |
| ii. | Controls or alerts employees of the egress of a resident from the facility; | <input type="checkbox"/> |
| b. | Provides access to an outside area: | --- |
| i. | From which a resident may exit to a location at least 30 feet away from the facility, and | <input type="checkbox"/> |
| ii. | Controls or alerts employees of the egress of a resident from the facility; or | <input type="checkbox"/> |
| c. | Uses a mechanism that meets the Special Egress-Control Devices provisions in the International Building Code incorporated by reference in R9-10-104.01; and | <input type="checkbox"/> |
| R9-10-816. Medication Services | | Check box when compliant |
| A. | A manager shall ensure that: | Policies and Procedures |
| 1. | Policies and procedures for medication services include: | --- |
| a. | Procedures for preventing, responding to, and reporting a medication error; | <input type="checkbox"/> |
| b. | Procedures for responding to and reporting an unexpected reaction to a medication; | <input type="checkbox"/> |
| c. | Procedures to ensure that a resident's medication regimen and method of administration is reviewed by a medical practitioner to ensure the medication regimen meets the resident's needs; | <input type="checkbox"/> |
| d. | Procedures for: | --- |
| i. | Documenting, as applicable, medication administration and assistance in the self-administration of medication; and | <input type="checkbox"/> |
| ii. | Monitoring a resident who self-administers medication; | <input type="checkbox"/> |
| e. | Procedures for assisting a resident in procuring medication; and | <input type="checkbox"/> |
| f. | If applicable, procedures for providing medication administration or assistance in the self-administration of medication off the premises; and | <input type="checkbox"/> |
| B. | If an assisted living facility provides medication administration, a manager shall ensure that: | Environmental |
| 1. | Medication is stored by the assisted living facility; | <input type="checkbox"/> |
| 2. | Policies and procedures for medication administration: | Policies and Procedures |
| a. | Are reviewed and approved by a medical practitioner, registered nurse, or pharmacist; | <input type="checkbox"/> |
| b. | Include a process for documenting an individual, authorized, according to the definition of "administer" in A.R.S. § 32-1901, by a medical practitioner to administer medication under the direction of the medical practitioner; | <input type="checkbox"/> |
| c. | Ensure that medication is administered to a resident only as prescribed; and | <input type="checkbox"/> |
| d. | Cover the documentation of a resident's refusal to take prescribed medication in the resident's medical record; and | <input type="checkbox"/> |

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| C. | If an assisted living facility provides assistance in the self-administration of medication, a manager shall ensure that: | Environmental |
| 1. | A resident's medication is stored by the assisted living facility; | <input type="checkbox"/> |
| 3. | Policies and procedures for assistance in the self-administration of medication are reviewed and approved by a medical practitioner or nurse; and | Policies and Procedures <input type="checkbox"/> |
| D. | A manager shall ensure that: | Environmental |
| 1. | A current drug reference guide is available for use by personnel members, and | <input type="checkbox"/> |
| 2. | A current toxicology reference guide is available for use by personnel members. | <input type="checkbox"/> |
| F. | When medication is stored by an assisted living facility, a manager shall ensure that: | --- |
| 1. | Medication is stored in a separate locked room, closet, cabinet, or self-contained unit used only for medication storage; | <input type="checkbox"/> |
| 2. | Medication is stored according to the instructions on the medication container; and | <input type="checkbox"/> |
| 3. | Policies and procedures are established, documented, and implemented for: | Policies and Procedures |
| a. | Receiving, storing, inventorying, tracking, dispensing, and discarding medication including expired medication; | <input type="checkbox"/> |
| b. | Discarding or returning prepackaged and sample medication to the manufacturer if the manufacturer requests the discard or return of the medication; | <input type="checkbox"/> |
| c. | A medication recall and notification of residents who received recalled medication; and | <input type="checkbox"/> |
| d. | Storing, inventorying, and dispensing controlled substances. | <input type="checkbox"/> |
| R9-10-817. Food Services | | Check box when compliant |
| A. | A manager shall ensure that: | Environmental |
| 1. | A food menu: | <input type="checkbox"/> |
| a. | Is prepared at least one week in advance, | <input type="checkbox"/> |
| b. | Includes the foods to be served each day, | <input type="checkbox"/> |
| c. | Is conspicuously posted at least one calendar day before the first meal on the food menu is served, | Postings <input type="checkbox"/> |
| 3. | If the assisted living facility contracts with a food establishment, as established in 9 A.A.C. 8, Article 1, to prepare and deliver food to the assisted living facility, a copy of the food establishment's license or permit under 9 A.A.C. 8, Article 1 is maintained by the assisted living facility; | Documentation <input type="checkbox"/> |
| 7. | Water is available and accessible to residents at all times, unless otherwise stated in a medical practitioner's order; and | Environmental <input type="checkbox"/> |
| C. | A 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; | <input type="checkbox"/> |
| 2. | Food is protected from potential contamination; | <input type="checkbox"/> |
| 4. | Potentially hazardous food is maintained as follows: | --- |
| a. | Foods requiring refrigeration are maintained at 41° F or below; and | <input type="checkbox"/> |
| 5. | A refrigerator used by an assisted living facility to store food or medication contains a thermometer, accurate to plus or minus 3° F, placed at the warmest part of the refrigerator; | <input type="checkbox"/> |
| 6. | Frozen foods are stored at a temperature of 0° F or below; and | <input type="checkbox"/> |
| 7. | Tableware, utensils, equipment, and food-contact surfaces are clean and in good repair. | <input type="checkbox"/> |
| R9-10-818. Emergency and Safety Standards | | Check box when compliant |
| A. | A manager shall ensure that: | Policies and Procedures |
| 1. | A disaster plan is developed, documented, maintained in a location accessible to caregivers and assistant caregivers, and, if necessary, implemented that includes: | --- |
| a. | When, how, and where residents will be relocated; | <input type="checkbox"/> |
| b. | How a resident's medical record will be available to individuals providing services to the resident during a disaster; | <input type="checkbox"/> |
| c. | A plan to ensure each resident's medication will be available to administer to the resident during a disaster; and | <input type="checkbox"/> |
| d. | A plan for obtaining food and water for individuals present in the assisted living facility or the assisted living facility's relocation site during a disaster; | <input type="checkbox"/> |
| 3. | Documentation of the disaster plan review required in subsection (A)(2) includes: | Documentation |
| a. | The date and time of the disaster plan review; | <input type="checkbox"/> |
| b. | The name of each employee or volunteer participating in the disaster plan review; | <input type="checkbox"/> |
| c. | A critique of the disaster plan review; and | <input type="checkbox"/> |
| d. | If applicable, recommendations for improvement; | <input type="checkbox"/> |
| 6. | Documentation of each evacuation drill is created, is maintained for at least 12 months after the date of the evacuation drill, and includes: | --- |
| a. | The date and time of the evacuation drill; | <input type="checkbox"/> |
| b. | The amount of time taken for employees and residents to evacuate the assisted living facility; | <input type="checkbox"/> |
| c. | If applicable: | --- |
| i. | An identification of residents needing assistance for evacuation, and | <input type="checkbox"/> |

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| ii. | An identification of residents who were not evacuated; | <input type="checkbox"/> |
| d. | Any problems encountered in conducting the evacuation drill; and | <input type="checkbox"/> |
| e. | Recommendations for improvement, if applicable; and | <input type="checkbox"/> |
| 7. | An evacuation path is conspicuously posted in each hallway of each floor of the assisted living facility. | Postings <input type="checkbox"/> |
| B. | A manager shall ensure that: | Documentation |
| 1. | A resident receives orientation to the exits from the assisted living facility and the route to be used when evacuating the assisted living facility within 24 hours after the resident's acceptance by the assisted living facility, and | <input type="checkbox"/> |
| 2. | The resident's orientation is documented. | <input type="checkbox"/> |
| C. | A manager shall ensure that a first-aid kit is maintained in the assisted living facility in a location accessible to caregivers and assistant caregivers. | Environmental <input type="checkbox"/> |
| F. | A manager of an assisted living home shall ensure that: | --- |
| 1. | A fire extinguisher that is labeled as rated at least 2A-10-BC by the Underwriters Laboratories is mounted and maintained in the assisted living home; | <input type="checkbox"/> |
| 4. | Except as provided in subsection (G): | --- |
| a. | A smoke detector is: | --- |
| i. | Installed in each bedroom, hallway that adjoins a bedroom, storage room, laundry room, attached garage, and room or hallway adjacent to the kitchen, and other places recommended by the manufacturer; | <input type="checkbox"/> |
| ii. | Either battery operated or, if hard-wired into the electrical system of the assisted living home, has a back-up battery; | <input type="checkbox"/> |
| iii. | In working order; and | <input type="checkbox"/> |
| 5. | An appliance, light, or other device with a frayed or spliced electrical cord is not used at the assisted living home; and | <input type="checkbox"/> |
| 6. | An electrical cord, including an extension cord, is not run under a rug or carpeting, over a nail, or from one room to another at the assisted living home. | <input type="checkbox"/> |
| G. | A manager of an assisted living home may use a fire alarm system and a sprinkler system to ensure the safety of residents if the fire alarm system and sprinkler system: | --- |
| 1. | Are installed and in working order, and | <input type="checkbox"/> |
| 2. | Meet the requirements in subsection (E)(1). | <input type="checkbox"/> |
| R9-10-819. Environmental Standards | | Check box when compliant |
| A. | A manager shall ensure that: | Policies and Procedures/ Environmental |
| 1. | The premises and equipment used at the assisted living facility are: | --- |
| a. | Cleaned and, if applicable, disinfected according to policies and procedures designed to prevent, minimize, and control illness or infection; and | <input type="checkbox"/> |
| b. | Free from a condition or situation that may cause a resident or other individual to suffer physical injury; | Environmental <input type="checkbox"/> |
| 2. | A pest control program that complies with A.A.C. R3-8-201(C)(4) is implemented and documented; | Documentation <input type="checkbox"/> |
| 3. | Garbage and refuse are: | Environmental |
| a. | Stored in covered containers lined with plastic bags, and | <input type="checkbox"/> |
| b. | Removed from the premises at least once a week; | <input type="checkbox"/> |
| 4. | Heating and cooling systems maintain the assisted living facility at a temperature between 70° F and 84° F at all times, unless individually controlled by a resident; | <input type="checkbox"/> |
| 5. | Common areas: | --- |
| a. | Are lighted to ensure the safety of residents, and | <input type="checkbox"/> |
| b. | Have lighting sufficient to allow caregivers and assistant caregivers to monitor resident activity; | <input type="checkbox"/> |
| 6. | Hot water temperatures are maintained between 95° F and 120° F in areas of an assisted living facility used by residents; | <input type="checkbox"/> |
| 7. | The supply of hot and cold water is sufficient to meet the personal hygiene needs of residents and the cleaning and sanitation requirements in this Article; | <input type="checkbox"/> |
| 8. | A resident has access to a laundry service or a washing machine and dryer in the assisted living facility; | <input type="checkbox"/> |
| 9. | Soiled linen and soiled clothing stored by the assisted living facility are maintained separate from clean linen and clothing and stored in closed containers away from food storage, kitchen, and dining areas; | <input type="checkbox"/> |
| 10. | Oxygen containers are secured in an upright position; | <input type="checkbox"/> |
| 11. | 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 and are inaccessible to residents; | <input type="checkbox"/> |
| 12. | 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 locked area inaccessible to residents; | <input type="checkbox"/> |
| 13. | Equipment used at the assisted living facility is: | --- |
| a. | Maintained in working order; | <input type="checkbox"/> |
| 16. | If a non-municipal sewage system is used, the sewage system is in working order and is maintained according to applicable state laws and rules. | <input type="checkbox"/> |

| R9-10-820. Physical Plant Standards | Check box when compliant |
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| B. A manager shall ensure that: | Environmental |
| 1. The premises and equipment are sufficient to accommodate: | --- |
| a. The services stated in the assisted living facility's scope of services, and | <input type="checkbox"/> |
| 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; | <input type="checkbox"/> |
| 3. A dining area has sufficient space and tables and chairs to accommodate the needs of the residents; | <input type="checkbox"/> |
| 4. At least one bathroom is accessible from a common area and: | --- |
| a. May be used by residents and visitors; | <input type="checkbox"/> |
| b. Provides privacy when in use; and | <input type="checkbox"/> |
| c. Contains the following: | --- |
| i. At least one working sink with running water, | <input type="checkbox"/> |
| ii. At least one working toilet that flushes and has a seat, | <input type="checkbox"/> |
| iii. Toilet tissue for each toilet, | <input type="checkbox"/> |
| iv. Soap in a dispenser accessible from each sink, | <input type="checkbox"/> |
| v. Paper towels in a dispenser or a mechanical air hand dryer, | <input type="checkbox"/> |
| vi. Lighting, and | <input type="checkbox"/> |
| vii. window that opens or another means of ventilation; | <input type="checkbox"/> |
| 5. An outside activity space is provided and available that: | --- |
| a. Is on the premises, | <input type="checkbox"/> |
| b. Has a hard-surfaced section for wheelchairs, and | <input type="checkbox"/> |
| c. Has an available shaded area; | <input type="checkbox"/> |
| 6. Exterior doors are equipped with ramps or other devices to allow use by a resident using a wheelchair or other assistive device; and | <input type="checkbox"/> |
| 7. The key to the door of a lockable bathroom, bedroom, or residential unit is available to a manager, caregiver, and assistant caregiver. | <input type="checkbox"/> |
| C. A manager shall ensure that: | --- |
| 1. For every eight residents there is at least one working toilet that flushes and has a seat and one sink with running water; | <input type="checkbox"/> |
| 2. For every eight residents there is at least one working bathtub or shower; and | <input type="checkbox"/> |
| 3. A resident bathroom provides privacy when in use and contains: | --- |
| a. A mirror; | <input type="checkbox"/> |
| b. Toilet tissue for each toilet; | <input type="checkbox"/> |
| c. Soap accessible from each sink; | <input type="checkbox"/> |
| d. Paper towels in a dispenser or a mechanical air hand dryer for a bathroom that is not in a residential unit and used by more than one resident; | <input type="checkbox"/> |
| e. A window that opens or another means of ventilation; | <input type="checkbox"/> |
| f. Grab bars for the toilet and, if applicable, the bathtub or shower and other assistive devices, if required to provide for resident safety; and | <input type="checkbox"/> |
| g. Nonporous surfaces for shower enclosures and slip-resistant surfaces in tubs and showers. | <input type="checkbox"/> |
| D. A manager shall ensure that: | --- |
| 1. Each resident is provided with a sleeping area in a residential unit or a bedroom; | <input type="checkbox"/> |
| 2. For an assisted living home, a resident's sleeping area is on the ground floor of the assisted living home unless: | --- |
| a. The resident is able to direct self-care; | <input type="checkbox"/> |
| b. The resident is ambulatory without assistance; and | <input type="checkbox"/> |
| c. There are at least two unobstructed, usable exits to the outside from the sleeping area that the resident is capable of using; | <input type="checkbox"/> |
| 3. Except as provided in subsection (E), no more than two individuals reside in a residential unit or bedroom; | <input type="checkbox"/> |
| 4. A resident's sleeping area: | --- |
| a. Is not used as a common area; | <input type="checkbox"/> |
| b. Is not used as a passageway to a common area, another sleeping area, or common bathroom unless the resident's sleeping area: | --- |
| i. Was used as a passageway to a common area, another sleeping area, or common bathroom before October 1, 2013; and | <input type="checkbox"/> |
| c. Is constructed and furnished to provide unimpeded access to the door; | <input type="checkbox"/> |
| d. Has floor-to-ceiling walls with at least one door; | <input type="checkbox"/> |
| e. Has access to natural light through a window or a glass door to the outside; and | <input type="checkbox"/> |
| f. Has a window or door that can be used for direct egress to outside the building; | <input type="checkbox"/> |
| 5. If a resident's sleeping area is in a bedroom, the bedroom has: | --- |

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| a. | For a private bedroom, at least 80 square feet of floor space, not including a closet or bathroom; | <input type="checkbox"/> |
| b. | For a shared bedroom, at least 60 square feet of floor space for each individual occupying the shared bedroom, not including a closet or bathroom; and | <input type="checkbox"/> |
| c. | A door that opens into a hallway, common area, or outdoors; | <input type="checkbox"/> |
| 6. | If a resident's sleeping area is in a residential unit, the residential unit has: | Environmental (Residential Unit) |
| a. | Except as provided in subsection (E)(2), at least 220 square feet of floor space, not including a closet or bathroom, for one individual residing in the residential unit and an additional 100 square feet of floor space, not including a closet or bathroom, for each additional individual residing in the residential unit; | <input type="checkbox"/> |
| b. | An individually keyed entry door; | <input type="checkbox"/> |
| c. | A bathroom that provides privacy when in use and contains: | --- |
| i. | A working toilet that flushes and has a seat; | <input type="checkbox"/> |
| ii. | A working sink with running water; | <input type="checkbox"/> |
| iii. | A working bathtub or shower; | <input type="checkbox"/> |
| iv. | Lighting; | <input type="checkbox"/> |
| v. | A mirror; | <input type="checkbox"/> |
| vi. | A window that opens or another means of ventilation; | <input type="checkbox"/> |
| vii. | Grab bars for the toilet and, if applicable, the bathtub or shower and other assistive devices, if required to provide for resident safety; and | <input type="checkbox"/> |
| viii. | Nonporous surfaces for shower enclosures and slip-resistant surfaces in bathtubs and showers; | <input type="checkbox"/> |
| d. | A resident-controlled thermostat for heating and cooling; | <input type="checkbox"/> |
| e. | A kitchen area equipped with: | --- |
| i. | A working sink and refrigerator, | <input type="checkbox"/> |
| ii. | A cooking appliance that can be removed or disconnected, | <input type="checkbox"/> |
| iii. | Space for food preparation, and | <input type="checkbox"/> |
| iv. | Storage for utensils and supplies; and | <input type="checkbox"/> |
| f. | If not furnished by a resident: | --- |
| i. | An armchair, and | <input type="checkbox"/> |
| ii. | A table where a resident may eat a meal; and | <input type="checkbox"/> |
| 7. | If not furnished by a resident, each sleeping area has: | Environmental |
| a. | A bed, at least 36 inches in width and 72 inches in length, consisting of at least a frame and mattress that is clean and in good repair; | <input type="checkbox"/> |
| b. | Clean linen, including a mattress pad, sheets large enough to tuck under the mattress, pillows, pillow cases, a bedspread, waterproof mattress covers as needed, and blankets to ensure warmth and comfort for the resident; | <input type="checkbox"/> |
| c. | Sufficient light for reading; | <input type="checkbox"/> |
| d. | Storage space for clothing; | <input type="checkbox"/> |
| e. | Individual storage space for personal effects; and | <input type="checkbox"/> |
| f. | Adjustable window covers that provide resident privacy. | <input type="checkbox"/> |
| 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 exception from the Department before October 1, 2013, the swimming pool is enclosed by a wall or fence that: | --- |
| a. | Is at least five feet in height as measured on the exterior of the wall or fence; | <input type="checkbox"/> |
| b. | Has no vertical openings greater than four inches across; | <input type="checkbox"/> |
| c. | Has no horizontal openings, except as described in subsection (F)(1)(e); | <input type="checkbox"/> |
| d. | Is not chain-link; | <input type="checkbox"/> |
| e. | Does not have a space between the ground and the bottom fence rail that exceeds four inches in height; and | <input type="checkbox"/> |
| f. | Has a self-closing, self-latching gate that: | --- |
| i. | Opens away from the swimming pool, | <input type="checkbox"/> |
| ii. | Has a latch located at least 54 inches from the ground, and | <input type="checkbox"/> |
| iii. | Is locked when the swimming pool is not in use; | <input type="checkbox"/> |
| 2. | A life preserver or shepherd's crook is available and accessible in the swimming pool area; and | <input type="checkbox"/> |
| 3. | Pool safety requirements are conspicuously posted in the swimming pool area. | <input type="checkbox"/> |
| G. | A manager shall ensure that a spa that is not enclosed by a wall or fence as described in subsection (F)(1) is covered and locked when not in use. | <input type="checkbox"/> |

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| Provider Notes |
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