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#### STATE OF RHODE ISLAND

### IN GENERAL ASSEMBLY

#### **JANUARY SESSION, A.D. 2002**

# AN ACT

#### RELATING TO ASSISTED LIVING

Introduced By: Representatives Ginaitt, Anguilla, D Cicilline, and Long

Date Introduced: February 05, 2002

Referred To: House Health, Education & Welfare

It is enacted by the General Assembly as follows:

1 SECTION 1. Sections 23-17.4-2, 23-17.4-3, 23-17.4-4, 23-17.4-5, 23-17.4-6, 23-17.4-10, 2 23-17.4-11, 23-17.4-15.2, 23-17.4-15.3, 23-17.4-16, 23-17.4-16.1, 23-17.4-16.2, 23-17.4-16.3 3 and 23-17.4-27 of the General Laws in Chapter 23-17.4 entitled "Assisted Living Residence 4 Licensing Act" are hereby amended to read as follows: 23-17.4-2. **Definitions.** - As used in this chapter: 5 6 (1) "Activities of daily living (ADLs)" means bathing, dressing, eating, toileting, 7 mobility and transfer. 8 (1) (2) "Administrator" means any person who has responsibility for day to day 9 administration or operation of an assisted living residence. 10 (2) (3) "Alzheimer's dementia special care unit or program" means a distinct living 11 environment within an assisted living residence that has been physically adapted to accommodate 12 the particular needs and behaviors of those with dementia. The unit provides increased staffing, 13 therapeutic activities designed specifically for those with dementia and trains its staff on an 14 ongoing basis on the effective management of the physical and behavioral problems of those with 15 dementia. The residents of the unit or program have had a standard medical diagnostic evaluation

(3) (4) "Assisted living residence" means a publicly or privately operated residence that provides directly or indirectly by means of contracts or arrangements personal assistance to meet the resident's changing needs and preferences, lodging, and meals to two (2) or more adults who

and have been determined to have a diagnosis of Alzheimer's dementia or another dementia.

- are unrelated to the licensee or administrator, excluding however, any privately operated establishment or facility licensed pursuant to chapter 17 of this title, and those facilities licensed by or under the jurisdiction of the department of mental health, retardation, and hospitals, the department of children, youth, and families, or any other state agency. The department shall develop levels of licensure for assisted living residences within this definition as provided in section 23-17.4-6. Assisted living residences include sheltered care homes, and board and care residences or any other entity by any other name providing the services listed in this subdivision which meet the definition of assisted living residences.
  - (4) (5) "Capable of self-preservation" means the physical mobility and judgmental ability of the individual to take appropriate action in emergency situations. Residents not capable of self-preservation are limited to facilities that meet more stringent life safety code requirements as provided under section 23-17.4-6(b)(3).
- 13 (5) (6) "Director" means the director of the Rhode Island department of health.
- 14 (6) (7) "Licensing agency" means the Rhode Island department of health.

- (7) (8) "Personal assistance" means the provision of twenty four (24) hour adult staffing of the home, and of one or more of the following services, as required by the resident or as reasonably requested by the resident, on a scheduled or unscheduled basis, including:
  - (i) Assisting the resident with personal needs; including activities of daily living;
- (ii) Assisting the resident with self-administration of medication or administration of medications by appropriately licensed staff;
- (iii) Providing or assisting the resident in arranging for health and supportive services as may be reasonable required; (iv) Monitoring the activities of the resident while on the premises of the residence to ensure his or her health, safety, and well-being; and
  - (v) Reasonable recreational, social and personal services.
- (9) "Resident" means an individual who is an adult, not requiring medical or nursing care as provided in a health care facility but may require the administration of medication and who as a result of choice and/or age, and/or physical or mental limitation requires personal assistance, lodging and meals and may require the administration of medication. A resident must be capable of self-preservation in emergency situations, unless the facility meets a more stringent life safety code as required under section 23-17.4-6(b)(3). Persons needing medical or skilled nursing care, including daily professional observation and evaluation, as provided in a health care facility, and/or persons who are bedbound or in need of the assistance of more than one (1) person for ambulation are not appropriate to reside in assisted living residences. However, an established resident may receive daily skilled nursing care or therapy from a licensed health care provider for

1	a condition that results from a temporary illness or injury for up to twenty-one (21) days subject
2	to an extension of additional days as approved by the department, or if the resident is under the
3	care of a licensed hospice agency provided the assisted living residence assumes responsibility
4	for ensuring that such care is received. For purposes of this statute, "resident" shall also mean the
5	resident's agent as designated in writing or legal guardian.
6	23-17.4-3. Purpose of provisions The purpose of this chapter is to provide for the
7	development, establishment, and enforcement of standards:
8	(1) For the care of residents in an assisted living residence; for adults; and
9	(2) For the maintenance and operation of assisted living residences for adults, which
10	will: promote a safe and protective environment for individuals living in those residences.
11	(i) Promote the dignity, individuality, independence, privacy, and autonomy of residents;
12	(ii) Provide a safe and home-like environment;
13	(iii) Protect the safety, health and welfare of residents;
14	(3) For the encouragement of quality of life for all residents; and
15	(4) For the encouragement of quality in all aspects of the operations of assisted living
16	residences.
17	<u>23-17.4-4. License required for assisted living residence operation. – (a) No person,</u>
18	acting severally or jointly with any other person, shall establish, conduct, or maintain an assisted
19	living residence in this state without a license under this chapter.
20	(b) No person, acting severally or jointly with any other person, shall admit or retain a
21	resident in an assisted living residence which residence (1) does not meet the definition and
22	requirements of this act; or (2) is not able to provide the services needed by a resident as agreed
23	to in the service plan required under section 23-17.4-15.6.
24	23-17.4-5. Application for license An application for a license shall be made to the
25	licensing agency upon forms provided by it and shall contain any information that the licensing
26	agency reasonably requires, which may include affirmative evidence of ability to comply with
27	reasonable standards, rules, and regulations as are lawfully prescribed under this chapter. The
28	licensing agency shall require criminal background checks on owners and operators of licensed
29	assisted living residences.
30	23-17.4-6. Issuance of license Posting Transfer (a) Issuance of license Upon
31	receipt of an application for a license, the licensing agency shall issue a license if the applicant
32	and residential care facility assisted living residence meet the requirements established under this
33	chapter; the director may shall establish levels of licensure as provided in subsections (b) and (c)
34	below and any rules and regulations as may be established in accordance with this chapter

1	herewith. A license issued under this chapter shall be the property of the state and loaned to the
2	licensee, and it shall be kept posted in a conspicuous place on the licensed premises. Each license
3	shall be issued only for the premises and persons named in the application, and shall not be
4	transferable or assignable except with the written approval of the licensing agency.
5	(b) Fire code and structural requirements.
6	(1) A facility residence with state fire code deficiencies may be granted a license which
7	may be renewed subject to the submission of a plan of correction acceptable to the state division
8	of fire safety, and provided the nature of the deficiencies are such that they do not jeopardize the
9	health, safety, and welfare of the residents.
10	(2) A facility residence with residents who are blind, deaf, and physically disabled shall
11	be subject to the applicable requirements of the American National Standards Institute (ANSI
12	standards)(1961), and any other provisions that may be required by rules and regulations pursuant
13	to this chapter.
14	(3) A facility residence that elects to comply with a higher life safety code and is so
15	approved by the state division of fire safety and meets the departments requirements for the
16	appropriate level of licensure may admit residents not capable of self preservation.
17	(c) Levels of licensure. The department shall establish requirements for a basic license
18	that apply to all assisted living residences. In addition, the department shall establish additional
19	licensing levels of assisted living including, but not limited to:
20	(3) "Medication administration" when one (1) or more resident requires medication
21	administration by appropriately qualified staff as determined by the department.
22	(a) "Dementia care" licensure shall be required when one (1) or more resident's dementia
23	symptoms impact their ability to function as demonstrated by any of the following:
24	(i) safety concerns due to elopement risk or other behaviors;
25	(ii) inappropriate social behaviors that adversely impact the rights of others;
26	(iii) inability to self preserve due to dementia;
27	(iv) a physician's recommendation that the resident needs dementia support consistent
28	with this level; or if the residence advertises or represents special dementia services or if the
29	residence segregates residents with dementia. In addition to the requirements for the basic
30	license, licensing requirements for the "dementia care" level shall include the following:
31	(A) staff training and/or requirements specific to dementia care as determined by the
32	department;
33	(B) a registered nurse on staff and available for consultation at all times;

(C) the residence shall provide for a secure environment appropriate for the resident

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2	(b) "Medication administration" when one (1) or more residents requires medication
3	administration by appropriately qualified staff as determined by the department.

- 23-17.4-10. Regulations, inspections, and investigations. -- (a) The licensing agency shall after public hearing pursuant to reasonable notice, adopt, amend, promulgate, and enforce any rules, regulations, and standards with respect to assisted living residences for adults licensed under this chapter as may be designed to further the accomplishment of the purposes of this chapter in promoting safe and adequate living environments for individuals in assisted living residences in the interest of public safety and welfare. These regulations may provide for the establishment of levels of service provided by the facility. residence.
- (b) The licensing agency shall make or cause to be made any inspections and investigations that it deems necessary by duly authorized agents of the director at any time and frequency determined by the licensing agency.
- (c) Upon request of the licensing agency, health agencies and professionals may share resident health status information with the department of health for the purpose of determining each resident's capability of self preservation.
- 23-17.4-11. Accessibility to residential care and assisted living facilities and residents.— Access to an assisted living residences for adults and its residents by individuals other than relatives and friends of the residents shall be permitted at reasonable hours by duly authorized agents of state and municipal agencies other than the licensing agency and the division of fire safety, private or public institutions, organizations, associations, or any other service agencies whose purpose includes discharging legally authorized responsibilities or rendering volunteer assistance or service to residents with respect to personal, social, legal, religious services, σ such other as civil and human rights. Access shall not substantially disrupt the operation of the facility. Anyone entering the facility shall produce appropriate identification prior to being granted permission to enter the premises. Entering a resident's room and visitation privileges with residents by these persons shall be subject to the provisions of section 23-17.4-16 and the rules and regulations promulgated pursuant to this chapter.
- <u>requirements. --</u> (a) The department of health shall certify a person to be an administrator of an assisted living residence if the person meets the following minimum qualifications:
- 33 (1) Twenty one (21) years of age or older;
- 34 (2) Good moral and responsible character and reputation;

1	-(3) Energey in English as defined by regulations promargated by the department of
2	health;
3	(4) Management or administrative ability to carry out the requirements of this chapter
4	and
5	(5) (i) Certification as an assisted living residence administrator or equivalent training;
6	(ii) The certification or training, as defined by regulations promulgated by the
7	department of health, shall include training in at least the following areas:
8	(A) Resident care plan;
9	(B) Characteristics of resident disabilities;
10	-(C) Resident health issues;
11	(D) Community resources;
12	(E) Social and recreational activities;
13	-(F) Nutrition and food service;
14	(G) First aid;
15	-(H) Medication;
16	(I) Business administration;
17	-(J) Maintenance and housekeeping;
18	(K) Residents' rights;
19	(L) State and federal regulations;
20	(M) Staff management and training;
21	(N) Mandatory continuing education.
22	(b) The department may suspend or revoke the certification of an administrator fo
23	cause, including but not limited to failure to maintain compliance with the qualifications stated i
24	this section, repeated or intentional violations of this chapter or regulations, or conviction
25	(including but not limited to a plea of nolo contendere) to charges of resident abuse under the
26	provisions of chapter 17.8 of this title, or a conviction of a felony, or exploitation.
27	(a) Each assisted living residence shall have an administrator who is certified by the
28	department in accordance with regulations established pursuant to section 23-17.4-21.1, in charge
29	of the maintenance and operation of the residence and the services to the residents. The
30	administrator is responsible for the safe and proper operation of the residence at all times by
31	competent and appropriate employee(s).
32	(b) The licensing agency shall perform a criminal background records check on an
33	person applying or reapplying for certification as an administrator. If disqualifying information
34	found, the licensing agency shall make a judgment regarding certification for that person.

1	(b) (c) The department may suspend or revoke the certification of an administrator for
2	cause, including but not limited to failure to maintain compliance with the qualifications stated in
3	this section, repeated or intentional visitations of this chapter or regulations, or conviction
4	(including but not limited to a plea of non contendere) to charges of resident abuse under the
5	provisions of chapter 17-8 of this title, or a conviction of a felony, or exploitation.
6	23-17.4-15.3. Resident records Each facility residence shall at a minimum maintain
7	the following information for each resident:
8	(1) The resident's name;
9	(2) The resident's last address;
10	(3) The name of the person or agency referring the resident to the home;
11	(4) The name, specialty (if any), telephone number, and emergency telephone number of
12	each physician who has treated the resident during the preceding twelve (12) months;
13	(5) The date the resident began residing in the home;
14	(6) A list of medications taken by the resident including the dosage;
15	(7) Written acknowledgements that the resident has received copies of the rights as
16	provided in section 23-17.4-16;
17	(8) A record of personal property and funds that the resident has entrusted to the facility;
18	(9) Information about any specific health problems of the resident that may be useful in a
19	medical emergency;
20	(10) The name, address, and telephone number of a person identified by the resident who
21	should be contacted in the event of an emergency or death of the resident;
22	(11) Any other health-related emergency, or pertinent information which the resident
23	requests the home residence to keep on record; and
24	(12) Specific records of medication administration as required by the licensing agency-
25	;and
26	(13) Copies of the resident agreement, initial and periodic assessments and service
27	plan(s).
28	23-17.4-16. Rights of residents (a) Every assisted living residence for adults licensed
29	under this chapter shall observe the following standards and any other appropriate standards as
30	may be prescribed in rules and regulations promulgated by the licensing agency with respect to
31	each resident of the facility residence:
32	(1) Residents are entitled to all rights recognized by <u>state and federal</u> law with respect to
33	discrimination, service decisions (including the right to refuse services), freedom from abuse and
34	neglect, privacy, association, and other areas of fundamental rights including the right to freedom

- of religious practice. Some of these basic rights include:
- 2 (i) To be offered eare services without discrimination as to sex, race, color, religion,
- 3 national origin, or source of payment;

- 4 (ii) To be free from verbal, sexual, physical, emotional, and mental abuse, corporal
- 5 punishment, and involuntary seclusion;
- 6 (iii) To be free from physical or chemical restraints for the purpose of discipline or
- 7 convenience and not required to treat the resident's medical symptoms. No chemical or physical
- 8 restraints will be used except on order of a physician;
- 9 (iv) To have their medical information protected by applicable state confidentiality laws;
- 10 (v) To have a service animal, consistent with the "reasonable accommodations" clause of 11
  - the Fair Housing Act, 42 U.S.C. section 3601 et seq. (such as a seeing eye dog); and
- 12 (2) In addition to these basic rights enjoyed by other adults, the residents of assisted
- 13 living also have the right to:
- 14 (i) Be treated as individuals and with dignity, and be assured choice and privacy and the
- 15 opportunity to act autonomously;
- 16 (ii) Upon request have access to all records pertaining to the resident, including clinical
- 17 records, within the next business day or immediately in emergency situations;
- 18 (iii) Arrange for services not available through the setting at their own expense as long as
- 19 the resident remains in compliance with the resident contract and applicable state law and
- 20 regulations;
- 21 (iv) Upon admission and during the resident's stay be fully informed in a language the
- 22 resident understands of all resident rights and rules governing resident conduct and
- 23 responsibilities. Each resident shall:
- 24 (A) Receive a copy of their rights;
- 25 (B) Acknowledge receipt in writing; and
- 26 (C) Be informed promptly of any changes;
- 27 (v) Remain in their room or apartment unless a change in room or apartment is related to
- 28 resident preference or to transfer conditions stipulated in their contract;
- 29 (vi) Consistent with the terms of the resident contract, furnish their own rooms and
- 30 maintain personal clothing and possessions as space permits, consistent with applicable life
- 31 safety, fire, or similar laws, regulations, and ordinances;
- 32 (vii) Be encouraged and assisted to exercise rights as a citizen; to voice grievances
- 33 through a documented grievance mechanism and suggest changes in policies and services to
- 34 either staff or outside representatives without fear of restraint, interference, coercion,

discrimination, or reprisal;

- 2 (viii) Have visitors of their choice without restrictions so long as those visitors do not
- 3 pose a health or safety risk to other residents, staff, or visitors, or a risk to property, and comply
- 4 with reasonable hours and security procedures;
- 5 (ix) Have personal privacy in their medical treatment, written communications and
- 6 telephone communications, and, to the fullest extent possible, in accommodation, personal care,
- 7 visits, and meetings;
- 8 (x) Have prominently displayed a posting of the facility's grievance procedure, the
- 9 names, addresses, and telephone numbers of all pertinent resident advocacy groups, the state
- ombudsperson, and the state licensing agency;
- 11 (xi) Choose his or her own physician(s) and have ready access to the name, specialty,
- and way of contacting the physician(s) responsible for the resident's care;
- 13 (xii) Have the <u>facility residence</u> record and periodically update the address and telephone
- number of the resident's legal representative or responsible party;
- 15 (xiii) Manage his or her financial affairs. The facility residence may not require residents
- 16 to deposit their personal funds with the facility residence. Upon written authorization of a resident
- and with the agreement of the facility residence, the facility residence holds, safeguards,
- manages, and accounts for personal funds of the resident as follows:
- 19 (A) Funds in excess of three hundred dollars (\$300) must be in an interest bearing
- 20 account, separate from any facility residence operating account that credits all interest on the
- 21 resident's funds to that account and the facility residence shall purchase a surety bond on this
- 22 account;
- 23 (B) A full and separate accounting of each resident's personal funds maintained must be
- 24 available through quarterly statements and on request of the resident;
- 25 (C) Resident funds shall not be commingled with facility residence funds or with funds
- of any person other than another resident;
- 27 (D) Upon the death of a resident, the <u>facility residence</u> must convey within thirty (30)
- days the resident's funds deposited with the facility residence and a full accounting of those funds
- 29 to the resident's responsible party or the administrator of the resident's estate;
- 30 (xiv) Have access to representatives of the state ombudsperson and to allow the
- 31 ombudsperson to examine a resident's records with the permission of the resident and consistent
- with state law;
- 33 (xv) Be informed, in writing, prior to or at the time of admission or at the signing of a
- 34 residential contract or agreement of:

1	(A) The scope of the services available through the facilities residence service program,
2	including health services, and of all related fees and charges, including charges not covered either
3	under federal and/or state programs or by other third party payors or by the facility's residence's
4	basic rate;
5	(B) The facility's residence's policies regarding overdue payment including notice
6	provisions and a schedule for late fee charges;
7	(C) The facility's residence's policy regarding acceptance of state and federal
8	government reimbursement for care in the facility both at time of admission and during the course
9	of residency if the resident depletes his or her own private resources;
10	(D) The facility's residence's criteria for admission, occupancy and discharge termination
11	of residency agreements;
12	(E) The facility's residence's capacity to serve residents with physical and cognitive
13	impairments;
14	(F) Support and any health services that the facility residence includes in its service
15	package or will make appropriate arrangements to provide the services;
16	(xvi) To be encouraged to meet with and participate in activities of social, religious, and
17	community groups at the resident's discretion;
18	(xvii) Upon provision of at least thirty (30) days notice, if a resident chooses to leave a
19	facility residence, the resident shall be refunded any advanced payment made provided that the
20	resident is current in all payments;
21	(xviii) To have the facility residence discharge a resident only for the following reasons
22	and within the following guidelines:
23	(A) Except in life threatening emergencies and for nonpayment of fees and costs, the
24	facility residence gives thirty (30) days' advance written notice of discharge termination of
25	residency agreement with a statement containing the reason, the effective date of termination, and
26	the resident's right to an appeal under state law;
27	(B) If the resident does not meet the requirements for residency criteria stated in the
28	residency agreement or requirements of state or local laws or regulations;
29	(C) If the resident is a danger to himself or herself or the welfare of others and the
30	facility residence has attempted to make a reasonable accommodation without success to address
31	the resident's behavior in ways that would make discharge termination of residency agreement or
32	change unnecessary, which would be documented in the resident's records;
33	(D) For failure to pay all fees and costs stated in the contract, resulting in bills more than

thirty (30) days outstanding. A resident who has been given notice to vacate for nonpayment of

2	premises, by tendering to the provider the entire amount of fees for services, rent, interest, and
3	costs then due. The provider may impose reasonable late fees for overdue payment; provided that
4	the resident has received due notice of those charges in accordance with the facility's residence's
5	policies. Chronic and repeated failure to pay rent is a violation of the lease covenant. However the
6	facility residence must make reasonable efforts to accommodate temporary financial hardship and
7	provide information on government or private subsidies available that may be available to help
8	with costs; and
9	(E) The facility residence makes a good faith effort to counsel the resident if the resident
10	shows indications of no longer meeting residence criteria or if service with a termination notice is
11	anticipated;
12	(xix) To have the facility residence provide for a safe and orderly discharge move out,
13	including assistance with identifying a resource to help locate another setting, regardless of
14	reason for move out;
15	(xx) To have the resident's responsible person and physician notified when there is:
16	(A) An accident involving the resident that results in injury and required physician
17	intervention;
18	(B) A significant change in the resident's physical, mental, or psychosocial status or
19	treatment;
20	(xxi) To be able to share a room or unit with a spouse or other consenting resident of the
21	facility residence in accordance with terms of the resident contract;
22	(xxii) To live in a safe and clean environment;
23	(xxiii) To have and use his or her own possessions where reasonable and have an
24	accessible lockable space provided for security of small personal valuables;
25	(xxiv) To receive a nourishing, palatable, well balanced diet that meets his or her daily
26	nutritional and special medical dietary needs;
27	(xxv) To attain or maintain the highest practicable physical, mental, and psychosocial
28	well being;
29	(xxvi) To be allowed to maintain an amount of money to cover reasonable monthly
30	personal expenses, the amount of which shall be at least equal to that amount required for
31	individuals on SSI as provided under section 40-6-27(a)(3); and
32	(xxvii) To have the facility residence implement written policies and procedures to
33	ensure that all facility staff are aware of and protect the resident's rights contained in this section.
34	(b) For purposes of subdivisions (a)(2)(ii), (iv), (xi), (xii), (xiv), (xvii), and (xviii)(A),

rent has the right to retain possession of the premises, up to any time prior to eviction from the

- 1 the term "resident" also means the resident's agent as designated in writing or legal guardian.
- 2 23-17.4-16.1. Posting and providing a copy of rights of residents. -- Each facility
- 3 <u>residence</u> shall provide each resident or his or her representative upon admission a copy of the
- 4 provisions of section 23-17.4-16, "Rights of Residents", and shall display in a conspicuous place
- 5 on the premises a copy of the "Rights of Residents".
- 6 <u>23-17.4-16.2. Special care unit disclosure by facilities. -- Special care unit disclosure</u>
- 7 <u>by residences. --</u> (a) Any assisted living residence which offers to provide or provides care for
- 8 patients or services to residents with Alzheimer's disease or other dementia by means of an
- 9 Alzheimer's special care unit shall be required to disclose the form of care or treatment type of
- 10 <u>services</u> provided, in addition to that care and treatment those services required by the rules and
- 11 regulations for the licensing of assisted living residences. That disclosure shall be made to the
- licensing agency and to any person seeking placement in an Alzheimer's special care unit of an
- 13 assisted living residence. The information disclosed shall explain that additional care is provided
- in each of the following areas:
  - (1) Philosophy. The Alzheimer's special care unit's written statement of its overall
- philosophy and mission which reflects the needs of residents afflicted with dementia.
- 17 (2) Pre-admission, admission, and discharge Pre-occupancy, occupancy, and termination
- 18 of residence. The process and criteria for placement occupancy, transfer, or discharge
- 19 <u>termination of residency</u> from the unit.
- 20 (3) Assessment, eare service planning, and implementation. The process used for
- 21 assessment and establishing the plan of care service and its implementation, including the method
- by which the plan of eare service evolves and is responsive to changes in condition.
- 23 (4) Staffing patterns and training ratios. Staff training and continuing education
- 24 practices.

- 25 (5) Physical environment. The physical environment and design features appropriate to
- support the functioning of cognitively impaired adult residents.
- 27 (6) Resident activities. The frequency and types of resident activities.
- 28 (7) Family role in eare providing support and services. The involvement in families and
- 29 family support programs.
- 30 (8) Program costs. The cost of care and any additional fees.
- 31 (b) The licensing agency shall develop a standard disclosure form and shall review the
- 32 information provided on the disclosure form by the residential care and assisted living facility to
- verify the accuracy of the information reported on it. Any significant changes in the information
- 34 provided by the residential care and assisted living facility will be reported to the licensing

agency at the time the changes are made.

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- 2 23-17.4-16.3. Residency agreement or contract. – (a) Prior to or as part of the exchange
- 3 of any funds and prior to admission procedure, the facility residence shall execute a residency
- 4 agreement or contract, signed by both the facility residence and the resident, that defines the
- 5 services the facility residence will provide and the financial agreements between the facility
- 6 residence and the resident or the residence's representative.
- 7 (b) The department shall establish regulations specifying the minimum provisions of
- 8 residency agreements or contracts and a minimum prior notification time for changes in rates,
- 9 fees, service charges or any other payments required by the residence.
- 10 (c) Any advanced deposit, application fee, or other pre-admission payment shall be 11 subject to a signed document explaining fully the terms of the payment.
- 12 (d) In cases of emergency placement, the residency agreement or contract shall be executed within five (5) working days of admissions.
  - 23-17.4-27. Criminal records review. -- (a) Any person seeking employment in any facility assisted living residence licensed under this act and having which is or is required to be licensed or registered with the department of health, if that employment involves routine contact with a patient or resident or having access to a resident's belonging or funds without the presence of other employees, shall undergo a criminal background check to be initiated processed prior to or within one week of employment. All employees hired prior to the enactment of this section shall be exempted from the requirements of this section.
  - (b) The director of the department of health may by rule identify those positions requiring criminal background checks. The employee, through the employer, shall apply to the bureau of criminal identification of the state police or local police department for a statewide criminal records check. Fingerprinting shall not be required. Upon the discovery of any disqualifying information as defined in section 23-17.4-30 and in accordance with the rule promulgated by the director of health, the bureau of criminal identification of the state police or the local police department will inform the applicant in writing of the nature of the disqualifying information; and, without disclosing the nature of the disqualifying information, will notify the employer in writing that disqualifying information has been discovered.
  - (c) An employee against whom disqualifying information has been found may request that a copy of the criminal background report be sent to the employer. who The administrator shall make a judgment regarding the continued employment of the employee.
- 33 (d) In those situations in which no disqualifying information has been found, the bureau 34 of criminal identification (BCI) of the state police or the local police shall inform the applicant

and the employer in writing of this fact.

- 2 (e) The employer shall maintain on file, subject to inspection by the department of 3 health, evidence that criminal records checks have been initiated on all employees seeking 4 employment after October 1, 1991, and the results of the checks. Failure to maintain that evidence
- 5 would be grounds to revoke the license or registration of the employer.
- 6 (f) It shall be the responsibility of the bureau of criminal identification (BCI) of the state 7 police or the local police department to conduct the criminal records check to the applicant for 8 employment without charge to either the employee or employer.
- 9 SECTION 2. Sections 23-17.4-15.5, 23-17.4-21, 23-17.4-22, 23-17.4-23, 23-17.4-24, 23-10 17.4-25 and 23-17.4-26 of the General Laws in Chapter 23-17.4 entitled "Assisted Living Residence Licensing Act" are hereby repealed.
  - <u>23-17.4-15.5. Initial evaluation and service plan.</u> -- (a) Prior to admission of a prospective resident, an agent of the facility shall conduct an evaluation to determine the facility's ability to meet the prospective resident's needs and preferences.
  - (b) Within a reasonable time after admission to a facility, each resident shall have a written service plan put in place based on an initial evaluation and periodic review of the resident's health, physical, social, functional, activity and cognitive needs and preferences that is developed with the input of the resident and their family and friends, if requested by the resident, and signed by the resident and facility agent. The service plan shall: (1) include the identified need for services and the type, frequency and duration of services or interventions to be provided, arranged for, or coordinated by the facility and any responsibility for service arrangement and management that will be the responsibility of the resident, and (2) be reviewed at least annually or at any time that the resident's needs change substantially and revised as appropriate.
  - <u>23-17.4-21. Permanent advisory commission.</u> There is established a permanent advisory commission on residential and assisted living care. The purpose of the commission shall be the coordination of policy for the state regarding laws, rules, and regulations governing the care of residents in an assisted living residence, and the maintenance and operation of the assisted living residences; to act as a grievance committee to which complaints may be made concerning problems that transcend more than one state agency or department; and to provide a forum where problems may be addressed relating to assisted living residences.
  - <u>23-17.4-22. Membership of commission. [Effective until January 7, 2003.] --</u> (a) The permanent advisory commission on assisted living residences shall be composed of nineteen (19) members as follows:
    - (1) The director of the department of health or designee;

1	(2) The director of the department of human services or designee;
2	-(3) The director of the department of mental health, retardation, and hospitals or
3	<del>designee;</del>
4	-(4) The director of the department of elderly affairs or designee;
5	(5) The state fire marshal or designee;
6	(6) The attorney general or designee;
7	(7) One public member to be appointed by the governor;
8	(8) An advocate for developmentally disabled persons;
9	(9) An advocate for mentally ill persons;
10	(10) An advocate for physically disabled persons;
11	(11) A representative of the Rhode Island Retired Teachers Association;
12	-(12) A representative of the Rhode Island chapter of the American Association of
13	Retired Persons;
14	(13) A state representative, to be appointed by the speaker of the house;
15	(14) An administrator of a for profit licensed assisted living residence to be
16	recommended by the Rhode Island Association of Residential Care Facilities;
17	(15) An administrator of a licensed not for profit assisted living residence to be
18	recommended by the Rhode Island Association of Facilities for the Aging;
19	(16) Two (2) residents of licensed assisted living residences;
20	(17) A state senator; and
21	(18) An administrator of a multilevel facility that includes both residential care/assisted
22	living and nursing care, to be appointed by the majority leader of the senate.
23	(b) The commission shall annually elect one of its members as chair to preside over
24	meetings of the commission.
25	(c) The commission shall meet at the call of the speaker of the house of representatives.
26	23-17.4-22. Membership of commission. [Effective January 7, 2003.] (a) The
27	permanent advisory commission on assisted living residences shall be composed of nineteen (19)
28	members as follows:
29	(1) The director of the department of health or designee;
30	(2) The director of the department of human services or designee;
31	-(3) The director of the department of mental health, retardation, and hospitals or
32	<del>designee</del> ;
33	(4) The director of the department of elderly affairs or designee;
34	(5) The state fire marshal or designee;

•	(b) The automoty general of designee,
2	(7) One public member to be appointed by the governor;
3	(8) An advocate for developmentally disabled persons;
4	(9) An advocate for mentally ill persons;
5	(10) An advocate for physically disabled persons;
6	(11) A representative of the Rhode Island Retired Teachers Association;
7	-(12) A representative of the Rhode Island chapter of the American Association of
8	Retired Persons;
9	(13) A state representative, to be appointed by the speaker of the house;
10	(14) An administrator of a for profit licensed assisted living residence to be
11	recommended by the Rhode Island Association of Residential Care Facilities;
12	(15) An administrator of a licensed not for profit assisted living residence to be
13	recommended by the Rhode Island Association of Facilities for the Aging;
14	(16) Two (2) residents of licensed assisted living residences;
15	-(17) A state senator; and
16	-(18) An administrator of a multilevel facility that includes both residential care/assisted
17	living and nursing care, to be appointed by the president of the senate.
18	(b) The commission shall annually elect one of its members as chair to preside over
19	meetings of the commission.
20	(c) The commission shall meet at the call of the speaker of the house of representatives.
21	23-17.4-23. Length of term Compensation (a) Each member of the commission
22	appointed according to section 23-17.4-22 shall serve a term of two (2) years or until the time that
23	the member's successor is appointed and qualified.
24	(b) The commission members shall serve without compensation.
25	23-17.4-24. Commission meetings public The meetings of the permanent advisory
26	commission on sheltered care, of which there shall be not less than three (3) annually, shall be
27	open to the public and the public shall be duly notified of the date, time, and location of each
28	meeting.
29	23-17.4-25. Recommendations of commission The commission on sheltered care
30	shall offer recommendations for the betterment of the sheltered care industry to the appropriate
31	state agencies and the general assembly whenever necessary.
32	23-17.4-26. Powers of commission cumulative The powers and authority of the
33	permanent advisory commission on sheltered care as stated in this chapter are in addition to and
34	not in lieu of the powers and authority of any other state agency, department, or division.

1	SECTION 3. Chapter 23-17.4 of the General Laws entitled "Assisted Living Residence
2	Licensing Act" is hereby amended by adding thereto the following sections:
3	23-17.4-10.1. Quality assurance. – Each assisted living residence shall develop,
4	implement and maintain a documented, ongoing quality assurance program.
5	23-17.4-10.2. Penalty for violation of section 23-17.4-10. – Every person or corporation
6	who shall willfully and continually violate the provisions of this chapter will be subject to a fine
7	of not less than three hundred dollars (\$300) or more than two thousand dollars (\$2,000) for each
8	violation of this section.
9	23-17.4-15.1.1. Administrator requirements. – (a) Each assisted living residence shall
10	have an administrator who is certified by the department in accordance with regulations
11	established pursuant to section 23-17.4-21.1, in charge of the maintenance and operation of the
12	residence and the services to the residents. The administrator is responsible for the safe and
13	proper operation of the residence at all times by competent and appropriate employee(s).
14	(b) The licensing agency shall perform a criminal background records check on any
15	person applying or reapplying for certification as an administrator. If disqualifying information is
16	found, the licensing agency shall make a judgment regarding certification for that person.
17	23-17.4-15.6. Assessments. – (a) Prior to the admission of a resident, or the signing of a
18	residency agreement with a resident, the administrator shall have a comprehensive assessment of
19	the resident's health, physical, social, functional, activity, and cognitive needs and preferences
20	conducted by a registered nurse. This assessment shall be used to determine if the resident's
21	needs and preferences can be met by the assisted living residence and the conclusions shall be
22	shared with the resident or the resident's representative. If a reasonable accommodation can
23	enable a resident to live in an assisted living residence, the nature of that accommodation and a
24	
25	plan for implementation or reason for denial should be included in an assessment.
	plan for implementation or reason for denial should be included in an assessment.  (b) The assessment shall be reviewed and updated on a periodic basis and each time a
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26 27	(b) The assessment shall be reviewed and updated on a periodic basis and each time a
	(b) The assessment shall be reviewed and updated on a periodic basis and each time a resident's condition changes significantly. In case of an emergency admission, the required
27	(b) The assessment shall be reviewed and updated on a periodic basis and each time a resident's condition changes significantly. In case of an emergency admission, the required assessment shall take place within five (5) working days.
27 28	(b) The assessment shall be reviewed and updated on a periodic basis and each time a resident's condition changes significantly. In case of an emergency admission, the required assessment shall take place within five (5) working days.  23-17.4-15.7. Service plans. – Within a reasonable time after move-in, the administrator
27 28 29	(b) The assessment shall be reviewed and updated on a periodic basis and each time a resident's condition changes significantly. In case of an emergency admission, the required assessment shall take place within five (5) working days.  23-17.4-15.7. Service plans. – Within a reasonable time after move-in, the administrator shall be responsible for the development of a written service plan based on the initial assessment.
27 28 29 30	(b) The assessment shall be reviewed and updated on a periodic basis and each time a resident's condition changes significantly. In case of an emergency admission, the required assessment shall take place within five (5) working days.  23-17.4-15.7. Service plans. — Within a reasonable time after move-in, the administrator shall be responsible for the development of a written service plan based on the initial assessment.  The service plan shall include at least:
27 28 29 30 31	(b) The assessment shall be reviewed and updated on a periodic basis and each time a resident's condition changes significantly. In case of an emergency admission, the required assessment shall take place within five (5) working days.  23-17.4-15.7. Service plans. – Within a reasonable time after move-in, the administrator shall be responsible for the development of a written service plan based on the initial assessment.  The service plan shall include at least:  (1) the services and interventions needed;

1	parties. The service plan shall be reviewed by both parties periodically and each time a resident's
2	condition changes significantly and all changes shall be acknowledged in writing by both parties.
3	23-17.4-15.8. Staff. – The administrator shall be responsible for ensuring sufficient and
4	qualified staff to provide a safe and healthy environment and to provide the services specified on
5	each resident's service plan. The department shall establish requirements for staff qualifications
6	and training for each level of license. At least one (1) qualified staff person shall be on the
7	premises at all times.
8	<u>23-17.4-15.9. Activities.</u> – The department shall establish requirements for recreational
9	and other activities for each level of license.
10	23-17.4-16.5. Disclosure (a) Each assisted living residence shall disclose certain
11	information about the residence to each potential resident, the resident's interested family, and the
12	resident's agent as early as practical in the decision-making process and at least prior to the
13	admission decision being made. The disclosed information shall be in print format and shall
14	include at a minimum:
15	(1) Identification of the residence and its owner and operator;
16	(2) Level of license;
17	(3) Admission and discharge criteria;
18	(4) Services available;
19	(5) Financial terms to include all fees and deposits, including any first month rental
20	arrangements, and the residence's policy regarding notification to tenants of increases in fees,
21	rates, services and deposits;
22	(6) Terms of the residency agreement.
23	23-17.4-21.1. Assisted living administrator certification board. – (a) Within the
24	department there is established an assisted living administrator certification board to be appointed
25	by the director of health with the approval of the governor consisting of seven (7) members as
26	follows: two (2) members of the board are persons with at least five (5) years experience in
27	operating an assisted living residence; one (1) member of the board is an active assisted living
28	administrator who is not an assisted living owner; two (2) members are persons representing
29	assisted living consumers or family members; and two (2) members are representatives of the
30	assisted living industry or are assisted living employees.
31	(b) Members shall be appointed to three (3) year terms. No member shall serve for more
32	than two (2) terms. The director, with the approval of the governor, shall appoint all vacancies, as
33	they occur for the remainder of a term or until a successor is appointed.
34	(c) The director may remove, after a hearing and with the approval of the governor, any

2	unprofessional or dishonorable conduct. Before beginning a term, a member shall take an oath				
3	prescribed by law for state officers, a record of which shall be filed with the secretary of state.				
4	(d) The director shall appoint a chairperson.				
5	(e) Four (4) member of the board shall constitute a quorum.				
6	(f) The board shall serve without compensation.				
7	(g) Meetings of the board shall be called by the director or the director's designee, or a				
8	majority of the board members.				
9	(h) The director shall provide for a staff person of the department to serve as an				
10	administrative agent for the board.				
11	23-17.4-21.2. Functions of the department of health. – It is the function of the				
12	department of health to:				
13	(1) Develop, impose, and enforce standards which must be met by individuals in order to				
14	receive a certificate as an assisted living administrator. These standards are designed to insure				
15	that assisted living administrators will be individuals who are of good character and are suitable,				
16	and who, by training or experience in the field of institutional administration, are qualified to				
17	serve as assisted living administrators;				
18	(2) Establish and carry out procedures designed to insure that individuals certified as				
19	assisted living administrators will, during any period that they serve as assisted living				
20	administrators, comply with the requirements of those standards;				
21	(3) Receive, investigate, and take appropriate action with respect to any charge or				
22	complaint filed with the department to the effect that any individual certified as an assisted living				
23	administrator has failed to comply with the requirements of those standards;				
24	(4) Conduct a continuing study and investigation of assisted living administrators within				
25	the state, with a view to improving the standards imposed for the certification of those				
26	administrators, and of procedures and methods for enforcing those standards with respect to				
27	certified assisted living administrators.				
28	23-17.4-21.3. Functions of assisted living certification board. – It is the function of the				
29	board to:				
30	(1) Conduct examinations as required by the department and to act in an advisory				
31	capacity to the department in all matters pertaining to the certification of assisted living				
32	administrators;				
33	(2) Develop and apply appropriate techniques, including examinations and investigations,				
34	for determining whether an individual meets those standards, subject to the approval of the				

1 member of the board for neglect of any duty required by law or for any incompetency,

1	director;
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- 2 (3) Recommend to the department the issuance of licenses and registrations to individuals
- 3 <u>determined</u>, after application of those techniques, to meet those standards; and to recommend to
- 4 the director the revocation or suspension of licenses or registrations previously issued in any case
- 5 where the individual holding that license or registration is determined substantially to have failed
- 6 to conform to the requirements of those standards; and
- 7 (4) Adopt, with the approval of the director of health, rules and regulations governing a
- 8 mandatory program of continuing education for assisted living administrators.
- 9 SECTION 4. This act shall take effect upon passage.

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LC01736/SUB A

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### **EXPLANATION**

### BY THE LEGISLATIVE COUNCIL

OF

# AN ACT

# RELATING TO ASSISTED LIVING

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- 1 This act would make substantive changes to the assisted living residence licensing act.
- 2 This act would take effect upon passage.

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LC01736/SUB A

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