TITLE 9. HEALTH SERVICES

${\bf CHAPTER~10.~DEPARTMENT~OF~HEALTH~SERVICES-HEALTH~CARE~INSTITUTIONS:}$

LICENSING

Authority: A.R.S. §§ 36-132(A)(1), 36-136(G)

ARTICLE 1. GENERAL

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ARTICLE 1. GENERAL

R9-10-102. Health Care Institution Classes and Subclasses; Requirements

A. No change

- 1. No change
- 2. No change
- 3. No change
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- 21. No change
- 22. No change
- 23. No change
- 24. No change
- 25. No change
- 26. No change
- 27. No change
- B. No change
- C. No change
- **D.** No change
 - 1. No change

- 2. No change
- E. The Department may conduct on-site monitoring of health care institutions that are found to not be in substantial compliance with the applicable licensure requirements specified in this Chapter. On-site monitoring may apply to licensed health care institutions that:
 - 1. Are cited for significant deficiencies during routine or complaint-based inspections,
 - 2. Have repeated noncompliance with the same or related requirements,
 - 3. Are under a corrective action plan issued by the Department,
 - 4. Pose a direct risk to patient or resident health and safety.

R9-10-106. Fees

- A. No change
 - 1. No change
 - 2. No change
 - 3. No change
- **B.** No change
- C. No change
 - 1. No change
 - a. No change
 - b. No change
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- b. No change
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- 7. No change
 - a. No change
 - b. No change
- D. No change
- E. No change
- F. No change
- **G.** No change
- H. The Department may charge up to \$1,000 per visit for an on-site monitoring fee according to A.R.S. § 36-405(D).
- I. If the Department provides in-service training to a health care institution that requests in-service training relating to regulatory compliance outside of the survey process, the Department may charge up to \$500 an hour for the in-service training, according to A.R.S. § 36-405(E).

R9-10-111. Enforcement Actions

- A. No change
 - 1. No change
 - 2. No change
 - 3. No change
 - 4. No change
 - 5. No change
 - 6. No change
 - 7. No change
- **B.** In determining which action in subsection (A) is appropriate, the Department shall consider the direct risk to the life, health, or safety of a patient in the health care institution based on:
 - 1. Repeated violations of statutes or rules,
 - 2. Pattern of violations,
 - 3. Types of violation,
 - 4. Severity of violation, and
 - <mark>5.</mark> Number of violations.

- B. The Department may impose civil penalties on a licensed health care institution that violates

 Title 36 or this Chapter, with penalties assessed per resident or patient impacted by the violation
 as determined by the Department based on the following factors:
 - 1. The civil penalty may be \$1,000 per violation, if one or more of the following aggravating factors apply:
 - a. The violation is repeated;
 - b. Actual harm occurred;
 - The violation poses a potential threat for actual harm or to health and safety, including to patients, staff, or residents;
 - d. Immediate jeopardy exists due to the type and severity of the violation; or
 - e. The facility is unresponsive in correcting the violation, which may be a threat to health and safety; and
 - 2. In determining the final penalty, the Department may consider and reduce the penalty if one or more of the following mitigating factors apply:
 - a. The violation was isolated;
 - b. No actual harm occurred;
 - c. No immediate jeopardy was present;
 - d. The facility reported the violation to the Department;
 - e. The facility promptly corrected the violation;
 - <u>f.</u> Patterns of noncompliance;
 - g. The number of persons affected by the violation;
 - h. The total number of violations;
 - i. The size of the facility and the financial impact of the penalty; or
 - i. The length of time the violation occurred.

Table 1.2. Severity and Remedy Matrix

Severity	<u>Criteria</u>	<u>Action</u>
<u>Level</u>		

Level 1	If the violation is isolated and no actual	Written plan of correction;
	physical or psychosocial harm, with	Provider agreement; or
	potential for minimal physical or	Civil money penalties.
	psychosocial harm.	
Level 2	If the violation is isolated and no actual	Written plan of correction;
	physical or psychosocial harm, with	Directed plan of correction;
	potential for more than minimal physical	Provider agreement;
	or psychosocial harm.	Monitoring fee; or
		Civil money penalties.
Level 3	1. The violation resulted in actual	Written plan of correction;
	physical or psychosocial harm that is not	Onsite plan of correction;
	immediate jeopardy;	Provider agreement;
	2. The licensee provided false or	Monitoring fee:
	misleading information;	Civil money penalties;
	3. The licensee is unresponsive in	Suspension;
	correcting deficiencies that pose a direct	Intermediate sanctions; or
	risk to residents or patients;	Revocation.
	4. If the violation is repeated or if there	
	is a pattern with no actual physical or	
	psychosocial harm with potential for	
	minimal physical or psychosocial harm;	
	<u>or</u>	
	5. If the violation is repeated or if there	
	is a pattern with no actual physical or	
	psychosocial harm with potential for	
	more than minimal physical or	
	psychosocial harm.	
Level 4	Immediate jeopardy to health and safety	Directed plan of correction;
		Provider agreement:
		Monitoring fee;
		<u>Civil money penalties;</u>
		Suspension;
		Intermediate sanctions;

	Revocation; or
	Other remedies, as applicable, in Title 41, Chapter 6.



ARTICLE 8. ASSISTED LIVING FACILITIES

R9-10-801. Definitions

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

- 1. "Accept" or "acceptance" means:
 - a. An individual begins living in and receiving assisted living services from an assisted living facility; or
 - An individual begins receiving adult day health care services or respite care services from an assisted living facility.
- "Assistant caregiver" means an employee or volunteer who helps a manager or caregiver provide supervisory care services, personal care services, or directed care services to a resident, and does not include a family member of the resident.
- 3. "Assisted living services" means supervisory care services, personal care services, directed care services, behavioral care, or ancillary services provided to a resident by or on behalf of an assisted living facility.
- 4. "Caregiver" means an individual who provides supervisory care services, personal care services, or directed care services to a resident, and does not include a family member of the resident.
- 5. "Elopement" means when a resident egresses from the facility without authorization or supervision.
- <u>5.6.</u> "Manager" means an individual designated by a governing authority to act on behalf of the governing authority in the onsite management of the assisted living facility.
- 6.7. "Medication organizer" means a container that is designed to hold doses of medication and is divided according to date or time increments.
- 8. "Memory care services" means the same as defined in A.R.S. § 36-405.03(D).
- 7.9. "Primary care provider" means a physician, a physician's assistant, or registered nurse practitioner who directs a resident's medical services.
- **8.10.** "Residency agreement" means a document signed by a resident or the resident's representative and a manager, detailing the terms of residency.
- 9.11. "Service plan" means a written description of a resident's need for supervisory care services, personal care services, directed care services, ancillary services, or behavioral health services and the specific assisted living services to be provided to the resident.
- <u>10.12.</u> "Termination of residency" or "terminate residency" means a resident is no longer living in and receiving assisted living services from an assisted living facility.

R9-10-802. Supplemental Application Requirements; Exemption

- **A.** In addition to the license application requirements in A.R.S. § 36-422 and R9-10-105, an applicant for a license as an assisted living facility shall include in a Department-provided format:
 - 1. Which of the following levels of assisted living services the applicant is requesting authorization to provide:

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- a. Supervisory care services,
- b. Personal care services, or
- c. Directed care services; and
- 2. Whether the applicant is requesting authorization to provide:
 - a. Adult day health care services, or
 - b. Behavioral health services other than behavioral care.
 - c. Memory Care Services.

B. No change

- 1. No change
- 2. No change

R9-10-803. Administration

- **A.** A governing authority shall:
 - 1. Consist of one or more individuals responsible for the organization, operation, and administration of an assisted living facility;
 - 2. Establish, in writing, an assisted living facility's scope of services;
 - 3. Designate, in writing, a manager who:
 - a. Is 21 years of age or older; and
 - 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
 - ii. A temporary certificate as an assisted living facility manager issued under A.R.S.
 § 36-446.06;
 - 4. Adopt a quality management program that complies with R9-10-804;
 - 5. Review and evaluate the effectiveness of the quality management program at least once every 12 months:
 - 6. Designate, in writing, an acting manager who has the qualifications established in subsection (A)(3), if the manager is:
 - a. Expected not to be present on the assisted living facility's premises for more than 30 calendar days, or
 - b. Not present on the assisted living facility's premises for more than 30 calendar days;
 - 7. Except as provided in subsection (A)(6), notify the Department according to A.R.S. § 36-425(I) when there is a change in the manager and identify the name and qualifications of the new manager;

- 8. Ensure that a manager or caregiver who is able to read, write, understand, and communicate in English is on an assisted living facility's premises; and
- 9. Ensure compliance with A.R.S. § 36-411.
- 10. In addition to complying with the requirements in this Chapter, the health, safety, or welfare of a resident is not placed at risk of harm;

B. No change

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 - b. No change

C. No change

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- **G.** No change
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- 3. No change

R9-10-821. Memory Care Services

- A. If an assisted living facility is authorized by the Department to provide memory care services, a manager shall ensure that:
 - 1. Policies and procedures are established, documented, and implemented to cover the following:
 - Skills and knowledge necessary for the personnel member to provide the expected memory care services;
 - b. Interventions used for behavior management;
 - c. Systems to accommodate visitors, staff, and residents who do not need controlled egress;
 - d. The requirements in R9-10-815(F) regarding the prevention of unsafe wandering or exit seeking, which may include the use of tracking systems;
 - e. Promotion of nutrition and hydration care;
 - <u>f.</u> <u>Evacuation and emergency procedures specific to memory care residents;</u>
 - <u>Prevention of elopement and responding to elopement incidents promptly and effectively;</u>
 and
 - h. Monitoring memory care residents in outdoor areas on the premises;
 - Activities that match the resident's cognitive ability, memory, attention span, language, reasoning ability, and physical function;
 - 3. For a resident who requests or receives memory care services from the assisted living facility, a medical practitioner:
 - a. Evaluates the resident within 30 calendar days before acceptance of the resident and at least once every six months throughout the duration of the resident's need for memory care services;
 - b. Reviews the assisted living facility's scope of services; and
 - 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.
 - 4. There is sufficient staffing to ensure adequate supervision and care for memory care residents.
- A manager shall ensure that staff receive at least eight hours of training specific to memory care within the first 30 days of hire. If a staff member or contractor does not work at an assisted living facility that is licensed to provide directed care services for a period of 12 months, the staff member or contractor must

complete the initial 8-hour training within 30 days after the date of hire, rehire, or returning to work. The training shall include:

- 1. <u>Understanding cognitive impairments and their impact on residents;</u>
- 2. Communication techniques with cognitively impaired residents;
- 3. Managing challenging behaviors such as aggression, wandering, and agitation;
- 4. Techniques for promoting dignity, comfort, and emotional well-being of residents;
- 5. Use of individualized care plans for memory care residents;
- <u>6.</u> <u>Emergency and safety protocols specific to memory care; and</u>
- 7. Recognizing, preventing, reporting abuse, neglect, or exploitation;
- C. After the initial training, specified in subsection (B), staff shall complete a minimum of four hours of continuing education annually in topics related to memory care and cognitive impairment.
- According to A.R.S. 36.405.03(C), a licensee shall provide documentation of the staff training in subsection (B) and (C) to the Department, and as specified in R9-10-803(E):
- Each resident receiving memory care services must have a service plan that meets the requirements specified in R9-10-815(C).
- <u>Clear, easy-to-understand signage and visual cues must be used throughout the memory care unit to assist residents in navigating their environment.</u>
- G. A memory care facility shall minimize environmental factors that may confuse or distress residents including loud noises, and bright lights.
- A resident does not use or have access to any materials, furnishings, or equipment or participate in any activity or treatment that may present a threat to the resident's health or safety.
- I. The assisted living facility shall only admit residents whose cognitive and physical care needs can be safely managed within the memory care unit.
- **J.** An assisted living facility providing memory care services shall:
 - 1. Conduct an elopement drill every six months with participation from all staff and the administrator;
 - 2. Document the date, time, and description of each elopement drill in subsection (H)(1); and
 - 3. Immediately investigate any elopement and notify the Department within one business day.

R9-10-822. Memory Care Training Program Application and Renewal

- An applicant for a memory care training program, shall submit to the Department, in a Department provided format, and application that contains:
 - 1. The applicant's name;
 - 2. The applicant's address and telephone number;

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- The applicant's e-mail address;
- 4. The name, telephone number, and e-mail address of the individual acting on behalf of the applicant;
- <u>The name under which the applicant plans to do business, if different from the applicant's name;</u>
 <u>and</u>
- 6. The address and telephone number of each facility from which training services will be provided.
- B. For renewal, at least 60 days before the expiration of approval, a memory care training services program shall submit to the Department in a Department-provided format:
 - 1. The memory care training program's approval number; and
 - The information in subsection (A).

R9-10-823. Memory Care Training Program Application or Renewal Approval Process

- A. The Department shall:
 - 1. Review the documents submitted by the applicant or memory care training program provider as required in R9-10-822,
 - 2. <u>Issue an approval or non-approval based on the applicant's or memory care training program</u> provider's compliance with the requirements in this Article, and
 - 3. Notify the applicant or memory care training program provider of the Department's decision within 30 days after receiving the documents specified in R9-10-822.
- B. The Department shall send an applicant or memory care training program provider a written notice of non-approval, with reasons for the non-approval if:
 - 1. The applicant fails to provide the documentation required in R9-10-822, or
 - 2. The Department determines the documentation submitted under R9-10-822 does not comply with this Article or contains false information.

R9-10-824. Notification of Change

- A. A memory care training program provider shall notify the Department in writing at least 30 days before the effective date of:
 - 1. Termination of the provision of the memory care training program, or
 - 2. A change in the:
 - a. Name under which the memory care training program provider does business;
 - b. Address or telephone number of a facility where memory care trainings are provided;
 - c. Administrator; or

- d. Memory care training program topics provided, including a list of the topics according to R9-10-821(B), that the memory care training program provider intends to add; and
- B. If applicable, the Department shall update the memory care training program provider's approval to reflect the changes in subsections (A)(2)(a) through (c).
- C. The Department shall review the notification of change for subsection (A)(d)(d) and:
 - 1. If the information complies with the requirements in this Article, the Department shall approve the change, or
 - 2. If the information does not comply with the requirements in this Article, the Department shall send notification to the memory care training program provider with reasons for the determination of non-compliance.
- **D.** The Department may conduct an onsite inspection as part of the notification of change process.
- A memory care training program provider shall not add memory care training topic specified in subsection (A)(1)(b)(iv) until the Department approves the change.
- The memory care training program provider retains the existing expiration date of the application approval.

R9-10-825. Rescinding Approval

- A. The Department may rescind the approval of a memory care training programprovider if the Department determines that noncompliance with this Article.
- B. If the Department rescinds the approval of a memory care training program provider, the Department shall:
 - 1. Provide written notice of the rescindment to the memory care training program provider that includes a list of the requirements with which the memory care training program provider is not in compliance, and
 - 2. Remove the memory care training program provider from the list of the Department's approved memory care training program providers.
- C. To obtain approval after a rescindment, an applicant shall submit the application required in R9-10-822.
- <u>D.</u> The Department shall review the application and recommendation in subsection (C) and issue an approval or notice of non-approval no sooner than 60 days, but not later than 90 days, after the Department receives the application and recommendation.

R9-20-826. Administration, Monitoring

- A. A memory care training program provider shall designate an administrator who meets qualifications established by the memory care training program provider.
- An applicant or memory care training program provider shall provide the Department access to a client, records, and all areas of a facility according to A.R.S. § 41-1009 within two hours after the Department's request.

R9-10-827. Memory Care Certificate of Completion

- A. Memory care services training programs, approved by the Department according to R9-10-822, shall provide staff and contractors who complete the training, a certificate of completion that may be used to work at an assisted living facility that is licensed to provide directed care services with the following information:
 - 1. The title of the certificate is clearly stated, Certificate of Completion;
 - 2. Specify the training program, e.g., Memory Care Services Training;
 - 3. Title of the training program;
 - 4. Name of the training organization or provider;
 - 5. Full name and qualifications of the trainee;
 - 6. Contact information for the training organization;
 - 7. The date or dates of training;
 - 8. The number of hours completed;
 - 9. The training topics or modules covered;
 - 10. A statement confirming the trainee's successful completion of the training;
 - 11. Signature of the trainer;
 - 12. Date of issuance; and
 - 13. The expiration date of the Certificate of Completion.