Sec. 19-13-D105. Assisted living services agency

(a) Definitions. As used in this section:

(1) “Agency” means assisted living services agency.

(2) “Assisted living services” for the purpose of this section only means nursing services and assistance with activities of daily living provided to clients living within a managed residential community having supportive services that encourage clients primarily age fifty-five (55) or older to maintain a maximum level of independence. Routine household services may be provided as assisted living services by the assisted living services agency or by the managed residential community as defined in subsection (a) (13). These services provide an alternative for elderly persons who require some help or aid with activities of daily living as described in subsection (a) (4) or nursing services in order to remain in their private residential units within the managed residential community.

(3) “Assisted living services agency” means an entity that provides assisted living services.

(4) “Assisted living aide” means an unlicensed person who has successfully completed a training and competency evaluation program in accordance with Section 19-13-D8t (1), Section 19-13-D69 (d) (2) or Section 19-13-D83 (b) of the regulations of Connecticut State Agencies. An assisted living aide may assist clients with one or more of the following activities of daily living: ambulation, feeding, bathing, dressing, grooming, toileting, oral hygiene, transfers, exercise and supervision of self administration of medications.

(5) “Client” means the recipient of the assisted living services provided by licensed nurses or assisted living aides.

(6) “Client service program” means a written schedule of assisted living services to be provided to, reviewed with and agreed to by a client or client representative.

(7) “Commissioner” means the Commissioner of the Department of Public Health and Addiction Services, or the commissioner’s representative.

(8) “Community” means managed residential community.

(9) “Core services” means the services described in subsection (c) (3) of this section which shall be made available in order for an assisted living services agency, for the purpose of this section only, to provide services within a managed residential community.

(10) “Department” means the Connecticut Department of Public Health and Addiction Services.

(11) “Full time” means on duty a minimum of thirty-five (35) hours per workweek.

(12) “Licensed nurse” means a registered nurse or licensed practical nurse licensed under chapter 378 of the Connecticut General Statutes.

(13) “Managed residential community” means a facility consisting of private residential units that provides a managed group living environment, including housing and services primarily for persons age fifty-five (55) or older.

(14) “Primary agency” means an assisted living services agency that contracts for the services of other organizations, agencies or individuals who provide care or services to its clients.

(15) “Private residential unit” means a living environment belonging to a tenant(s) that includes a full bathroom within the unit including a water closet, lavatory, tub or shower bathing unit and access to facilities and equipment for the preparation and storage of food.
(16) “Self administration of medications” means a client taking medication in accordance with directions for use and includes:

(A) the client removing an individual dose from a container of medications that have been ordered by a physician or health care practitioner with the statutory authority to prescribe medications and dispensed by a pharmacy or purchased over-the-counter by or under the direction of the client; or

(B) the client taking an individual or multiple dose(s) of medications that have been prepared or prepoured by a licensed nurse, family member or significant other and stored for client administration in the client’s home.

(17) “Tenant” means a person who either owns, rents under a lease agreement or otherwise contracts for the use of the home within a managed residential community in which that person resides.

(b) Assisted living services agency

(1) If it is determined by the appropriate state agency that a certificate of need is required to operate an assisted living services agency, the certificate of need shall be a prerequisite to licensing.

(2) Application for licensure

(A) No person shall operate an assisted living services agency without a license issued by the department in accordance with Connecticut General Statutes, Section 19a-491.

(B) Application for the grant or renewal of a license to operate an assisted living services agency shall be made to the department, in writing, on forms provided by the department; shall be signed by the person seeking authority to operate the service; shall be notarized; and shall include, but not necessarily be limited to, the following information:

(i) a list of the managed residential communities where assisted living services shall be provided;

(ii) an affidavit attesting that assisted living services shall be provided only at managed residential communities that have complied with the requirements of subsection (c) of this section;

(iii) an affidavit attesting that assisted living services shall be provided on an individual basis to clients who fully understand and agree to the provision of services and are made aware of the costs involved prior to the initiation of such services;

(iv) the total number of employees, by category;

(v) the services provided;

(vi) evidence of financial viability to include a projected two (2) year budget, with estimates of net income and expenditures, at the time of initial application;

(vii) a certificate of malpractice and public liability insurance;

(viii) a certificate of good standing, if applicable;

(ix) a statement of ownership and operation, to include, but not necessarily be limited to the following information:

(a) the name and address of each owner and, if the agency is a corporation, all ownership interests (direct or indirect) of ten percent (10%) or more; and

(b) the name and address of each officer, director and member of the governing authority;

(x) any relevant statistical information requested by the department;

(xi) the agent for service; and
(xii) a listing of the health care institutions or agencies owned or operated in other states, at the time of initial application.

(C) The assisted living services agency shall notify the department of any changes in the information provided in accordance with subparagraph (B)(i)(v)(vii)(viii)(ix) and (xi) of this subdivision.

(3) Issuance and renewal of license

(A) Upon determination by the department that the assisted living services agency is in compliance with chapter 368V of the Connecticut General Statutes and the regulations thereunder pertaining to its licensure, the department shall issue a license or renewal of license to operate the service for a period not to exceed two (2) years.

(B) Application for license renewal shall be made in accordance with subdivision (2)(B) of this subsection not less than thirty (30) days preceding the date of expiration of the agency’s current license.

(C) A license shall be issued in the name of the entity that has submitted application for the license.

(D) The license shall not be transferable to any other person, entity or service.

(E) Each license shall list on its face, the name of the licensee, the “doing business as” name, the location(s) served and the date of issuance and expiration.

(F) The license shall be posted in the business office of the licensee.

(G) The licensee shall immediately notify the department in writing of any change in the supervisor of the assisted living services agency.

(H) Any change in the ownership of an assisted living services agency, owned by an individual, partnership or association or the change in ownership or beneficial ownership of ten percent (10%) more of the stock of a corporation that owns, conducts, operates or maintains such agency, shall be subject to prior approval of the department. The licensee shall notify the department in writing of any such proposed change of ownership, at least ninety (90) days prior to the effective date of the proposed change.

(4) Suspension, revocation, denial, non-renewal or voluntary surrender of license.

(A) A license may be suspended, revoked, denied or its renewal refused whenever in the judgment of the department the facility:

(i) fails to comply with applicable regulations prescribed by the commissioner or statutes;

(ii) furnishes or makes any false or misleading statements to the department in order to obtain or retain the license; or

(iii) provides assisted living services in a managed residential community that fails to provide or arrange to make available the core services on a regular and continual basis.

(B) In the event of the suspension, revocation, denial or non-renewal of a license, the assisted living services agency shall have the opportunity for a hearing in accordance with the contested case provisions of Chapter 54 of the Connecticut General Statutes and Sections 19a-4-1 through 19a-4-31 of the regulations of Connecticut State Agencies, as applicable.

(C) Refusal to grant the department access to clients, records and staff of the agency shall be grounds for suspension, revocation, denial or non-renewal of the license.

(D) Surrender of license. The licensee shall notify, in writing, each client receiving services from the agency, the next of kin or legal representative, and any third party payors concerned, at least thirty (30) days prior to the voluntary surrender of an assisted living
services agency license or surrender of license upon the department’s order of revocation, refusal to renew, or suspension of license. Arrangements shall be made by the licensee for the continuation of care and services as required for any individual client following the surrender of the agency’s license. This notice shall include at a minimum:

(i) a statement by the assisted living services agency identifying which services shall no longer be provided to clients; and

(ii) information regarding other resources available to provide health care services to clients.

(5) The assisted living services agency shall ensure that all of the core services are provided. In the event that a managed residential community fails to provide or arrange to make available one or more of the core services on a regular and continual basis, the licensee shall terminate the provision of assisted living services to the managed residential community. The department, each client receiving services from the agency, the next of kin or legal representative and any third party payors concerned shall be mailed written notice from the licensee at least thirty (30) days prior to the termination of services. Arrangements shall be made by the licensee for the continuation of care and services as required by any individual client following termination of the assisted living service. In the event that the disruption of services is temporary, alternative arrangements for the health and safety of the clients shall be made immediately by the managed residential community, with full service restored in not more than seven (7) days.

(6) The assisted living services agency shall maintain records of all temporary service disruptions or the managed residential community’s failure to provide core services and shall record the length of disruptions and provision of alternative arrangements.

(7) Waiver

(A) The commissioner in accordance with section 19a-6c of the Connecticut General Statutes, may waive provisions of this section for assisted living services agencies, only when such agencies provide services in state-funded congregate housing facilities. No waiver of this section shall be made if the commissioner determines that the waiver would:

(i) endanger the life, safety or health of any resident receiving assisted living services in a state-funded congregate housing facility;

(ii) impact the quality or provision of services provided to a resident in a state-funded congregate housing facility;

(iii) revise or eliminate the requirements for an assisted living services agency’s quality assurance program;

(iv) revise or eliminate the requirements for an assisted living services agency’s grievance and appeals process; or

(v) revise or eliminate the assisted living services agency’s requirements relative to a client’s bill of rights and responsibilities.

(B) The commissioner, upon the granting or renewing of a waiver of any provision of this section, may impose conditions, which assure the health, safety, and welfare of residents receiving assisted living services in a state-funded congregate housing facility. The commissioner may revoke such waiver upon a finding:

(i) that the health, safety, or welfare of any patient has been jeopardized; or

(ii) that such facility or agency has failed to comply with such conditions as the
commissioner may impose pursuant to this subparagraph.

(C) Any agency requesting a waiver shall apply in writing to the department. Such application shall include:

(i) the specific regulations for assisted living service agencies for which the waiver is requested;

(ii) reasons for requesting a waiver, including a statement of the type and degree of any hardship that would result to the agency upon enforcement of the regulations;

(iii) the specific relief requested;

(iv) reasons that the waiver would not endanger the life, safety or health of any resident or negatively impact the quality or provision of services to residents; and

(v) any documentation which supports the application for waiver.

(D) Waiver applications shall by signed by a person authorized to bind the agency and shall be notarized.

(E) In consideration of any application for waiver, the commissioner shall consider the following:

(i) the maximum resident capacity;

(ii) the impact of a waiver on care provided; and

(iii) alternative policies or procedures proposed.

(F) Waivers shall be granted for a period of no more than two (2) years. An agency shall reapply in writing to the department in order to renew such waiver at least sixty (60) days in advance of the expiration date of the current waiver.

(G) If the commissioner, upon the granting of a waiver, imposes any conditions to ensure the health, safety and welfare of residents, the agency shall acknowledge in writing his or her agreement to abide by such conditions.

(H) The department reserves the right to request additional information before processing an application for waiver.

(c) Managed residential communities served by assisted living services agencies

(1) Assisted living services may not be provided in a managed residential community unless the managed residential community has notified the department either in writing or by telephone of its intention to provide or arrange to make available licensed assisted living services and has submitted all information as required in this subsection and until the assisted living services agency has been issued a license to operate by the department. The information shall be provided to the department on forms provided by the department, shall be signed by the owner(s) or the operating or managing entity and shall be notarized. The form(s) shall include the following information:

(A) evidence of compliance with local zoning ordinances, local building codes and the Connecticut Fire Safety Code and Supplement;

(B) name of the management company or manager, as appropriate;

(C) legal entity that owns or operates the managed residential community;

(D) description of the manner in which tenants are advised that the managed residential community is not licensed by the department;

(E) description of the information provided to tenants informing them of the assisted living services and home health care services available for individual use and how to access itemized costs of services delivered by these providers;
(F) person to whom official notices are to be sent;
(G) name of the assisted living services agencies; and
(H) attestation that the core services described in subdivision (3) of this subsection are made available and are accessible on a regular and continual basis to those tenants who choose to use such core services.

(2) Upon receipt of the form(s) by the department, the department shall notify the managed residential community in writing within thirty (30) days that either the managed residential community’s form(s) is complete and shall be maintained on file in the department or that the information submitted was incorrect or incomplete.

(3) A managed residential community shall provide or arrange to make available the following core services to its tenants who choose to use any or all of the core services:
(A) regularly scheduled meal service for three (3) meals per day;
(B) regularly scheduled laundry service for personal laundry and linens;
(C) regularly scheduled transportation for personal shopping, social and recreational events, health care appointments and similar needs and for which public bus transportation shall not qualify as the only form of transportation;
(D) regularly scheduled housekeeping services;
(E) maintenance service for tenants’ living units, including chore services for routine domestic tasks that the tenant is unable to perform; and
(F) programs of social and recreational opportunities.

(4) A managed residential community shall also provide:
(A) a formally established program that provides tenants with twenty-four (24) hour a day security designed to protect tenants from intruders;
(B) an emergency call system in each living unit;
(C) on-site washers and dryers sufficient to meet the needs of the tenants; and
(D) common use space that is sufficient in size to accommodate fifty percent (50%) of the tenant population.

(5) The managed residential community shall employ an on-site service coordinator who reports directly to the operating or managing entity or the administrator of the managed residential community.

(A) The service coordinator shall possess at a minimum a bachelor’s degree in social work or in a related human service field. Individuals without a bachelor’s degree may be hired if they have an associate’s degree in social work or in a related human service field and two (2) years of experience in a social service delivery system dealing with issues and coordinating services related to persons primarily age fifty-five (55) or older. Individuals without a bachelor’s degree or an associate’s degree may be hired if they have four (4) years of experience in a social service delivery system dealing with issues and coordinating services related to persons primarily age fifty-five (55) or older. The service coordinator should have prior supervisory or management experience. Any person employed as a service coordinator prior to December 1, 1994 shall be eligible to continue in the facility of employment without restriction.

(B) Responsibilities of the service coordinator shall include, but not necessarily be limited to:
(i) ensuring that the services required by this subsection are provided or made available
to all tenants;
(ii) assisting tenants in making arrangements to meet their personal needs;
(iii) establishing collaborative relations with provider agencies, support services and community resources.
(iv) establishing a tenant council, ensuring that a private space is provided to the group for meetings and providing assistance and responding to written requests that result from group meetings;
(v) serving as an ongoing liaison with the assisted living services agencies to include liaison with the assisted living services agencies’ quality assurance committee as required in subsection (l) of this section;
(vi) ensuring that a tenant information system is in place; and
(vii) developing a written plan for the delegation of responsibilities and functions in the absence of the service coordinator.
(C) A service coordinator’s absence of longer than one (1) month shall be reported to any assisted living services agencies servicing the community.
(6) The managed residential community, through its service coordinator or any other representative, may not provide health services, including but not limited to the provision of rehabilitative therapy, administration or supervision of the self-administration of medications, nursing care or medical treatment, unless it has been licensed as an assisted living services agency. It may contract with one or more assisted living services agencies, home health care agencies, or other appropriately licensed health care providers to make available health services for tenants provided by such licensed persons or entities.
(7) Managed residential communities may not require tenants to share units. Sharing of a unit shall be permitted solely upon the request and mutual consent of tenants.
(8) The owner or operating entity shall notify the department and any assisted living services agency that provides services to tenants of the managed residential community, in writing, of any proposed change of ownership or operating entity or elimination of core services at least thirty (30) days prior to the effective date of such proposed change.
(9) The owner or operating entity shall immediately notify any assisted living services agencies servicing the community of any change in the service coordinator.
(10) The managed residential community shall provide the department with unrestricted access to the community, tenants and tenant related documents.
(11) The managed residential community shall notify, in writing, each tenant concerned, the next of kin or legal representative, any third party payers concerned and any assisted living services agency servicing the community at least thirty (30) days prior to the voluntary elimination of its status as a managed residential community and immediately upon the department’s order of revocation, refusal to renew or suspension of license of the assisted living services agency. This notice shall include at a minimum:
(A) a statement by the managed residential community identifying which core services and assisted living services shall no longer be provided to tenants and clients; and
(B) information regarding other resources available to tenants and clients to provide health care services.
(d) Governing authority of an assisted living services agency
(1) There shall be a formal governing authority with full legal authority and responsibility
for the operation of the agency, which shall be the officers and directors of the corporation, and which shall adopt bylaws or rules that are reviewed in accordance with a schedule established by the governing authority and so dated. Such bylaws or rules shall include, but not necessarily be limited to:

(A) the purpose of the agency;
(B) a delineation of the powers, duties and voting procedures of the governing authority, its officers and committees;
(C) the qualifications for membership, method of selection and terms of office of members and chairpersons of committees;
(D) a description of the authority delegated to the supervisor of the assisted living services agency;
(E) the agency’s conflict of interest policy and procedures;
(F) assurances that a written contract shall be maintained with one or more licensed home health care agencies if the licensed home health care agencies are not owned and operated by the managed residential community; and
(G) assurances that a written contract shall be maintained with one or more licensed assisted living services agencies if the agencies are not owned and operated by the managed residential community.

(2) The bylaws or rules shall be available to all members of the governing authority and all individuals to whom authority is delegated.

(3) The governing authority shall:
(A) meet as frequently as necessary to fulfill its responsibilities as stated in subdivision (4) of this subsection, but no less than two (2) times per year;
(B) maintain minutes for each meeting;
(C) ensure that minutes reflect the identity of those members in attendance and that, following approval, such minutes are dated and signed by the secretary; and
(D) ensure that the minutes of any of its meetings or any of its committees are available at any time to the commissioner.

(4) Responsibilities of the governing authority shall include, but not necessarily be limited to:
(A) ensuring the quality of services provided by the agency and the quality of care rendered to clients;
(B) establishing a quality assurance program in accordance with subsection (l) of this section;
(C) selecting and appointing a quality assurance committee;
(D) reviewing and accepting all minutes of meetings held by the quality assurance committee and assuring the implementation of corrective actions identified in these minutes;
(E) adopting and documenting the annual review of the written agency budget;
(F) developing policies and programs and delegating the authority to implement policies and programs;
(G) managing the fiscal affairs of the agency;
(H) establishing a schedule for the review of its bylaws or rules;
(I) establishing a schedule for the submission of the reports described in subsection (g) (2) (G) and (H) of this section to the governing authority;
(J) ensuring that a written contract is maintained between the assisted living services agency and one or more licensed home health care agencies or the managed residential community and one or more licensed home health care agencies unless the assisted living services agency operates under common ownership with the licensed home health care agencies that serve the same managed residential community; and

(K) ensuring that a written contract to include provisions that the assisted living services agency shall monitor the provision of core services to determine if the services are being provided on a regular and continual basis, is maintained between the assisted living services agency and the managed residential community unless the licensed assisted living services agency is under common ownership with the managed residential community.

(5) If an assisted living services agency is owned by or is under common or related ownership with the managed residential communities it serves or a licensed home care agency serving such communities, the governing authority of the related managed residential community or licensed home health care agency may serve as the governing authority of the assisted living services agency provided that the requirements of this subsection are met and minutes of meetings clearly identify discussions related to the assisted living services agency.

(e) General requirements for an assisted living services agency

(1) An agency shall be in compliance with all applicable federal, state and local laws and regulations.

(2) An assisted living services agency, as defined in this section, shall only provide services to individuals residing in a managed residential community.

(3) Any assisted living services agency which contracts individually with a tenant of a managed residential community and is not under contract with the community shall comply with this section.

(4) Each agency shall have a designated office on the site of the managed residential community. This office shall provide adequate and safe space for:

(A) conferences with clients and their families;
(B) staff to carry out pre and post client visit activities;
(C) supervisory conferences with staff;
(D) storage and maintenance of equipment and supplies necessary to provide client services in an area, that may be separate from the business office; and
(E) maintenance of administrative records and files, financial records and client service records in locked file cabinets or an area that can be locked.

(5) Contracted services. Assisted living services agencies may contract with other organizations, agencies or individuals to provide the services defined in subsections (h) and (i) of this section to their clients. Services provided by the primary agency through arrangements with a contracted agency or individuals(s) shall be set forth in either a written contract or a written memorandum of understanding between participating agencies. The provisions set forth in this subdivision shall also apply when services are being provided at the same time to the same client by more than one (1) agency licensed to provide such services. The contract or written memorandum of understanding shall include, but not necessarily be limited to:

(A) a statement that clearly defines the assignment of primary responsibility for the
client’s care;

(B) the methods of communication and coordination between agencies to ensure that all
information necessary for safe, coordinated care to clients is accessible and available to all
participating agencies;

(C) the necessity to conform with all applicable primary agency policies, including
personnel qualifications and staffing patterns; and

(D) the responsibility of participating agencies in developing and implementing the client
service program.

(6) Each assisted living services agency shall have a communication system adequate
to receive requests and referrals for service, maintain verbal contact with health service
personnel at all times when they are providing services to clients, receive calls from clients
under the care of the agency and tenants residing in the community and maintain contact as
needed with the client’s source of medical care and other providers of care, if applicable.

(7) Assisted living services, including nursing services and assistance with activities of
daily living, may be provided to clients with chronic and stable conditions as determined
by a physician or health care practitioner with applicable statutory authority at least on an
annual basis and as needed. Chronic and stable conditions are not limited to medical or
physical conditions, but also include chronic and stable mental health and cognitive
conditions. The determination shall be made in writing and maintained in the client’s service
record.

(8) Each agency shall establish written criteria for admission to assisted living services.
The criteria shall not impose unreasonable restrictions which screen out a client whose
needs may be met by the agency.

(9) Each agency shall develop written policies for the discharge of clients from the
agency. Agency discharge policies shall define categories for the discharge of clients and
shall include but not necessarily be limited to:

(A) Change in client’s condition. Termination of services when the client’s condition is
no longer chronic and stable;

(B) Routine discharge. Termination of services when goals of care have been met and
the client no longer requires assisted living services;

(C) Emergency discharge. Termination of services due to the presence of safety issues
which place the client or agency staff in immediate jeopardy and prevent the agency from
delivering assisted living services;

(D) Financial discharge. Termination of services when the client’s insurance benefits or
financial resources have been exhausted; and

(E) Premature discharge. Termination of services when goals of care have not been met
and the client continues to require assisted living services.

(10) Clients and other responsible parties shall be informed when their individual care
and service needs may qualify for reimbursement by a third party payor. A summary of
the information provided to the client shall be documented in the client service record and shall
be signed and dated by the supervisor of assisted living services or his or her designee as
well as by the client or the client’s representative.

(11) Each agency shall develop and have readily available a policy and procedure to
address the appropriate steps to follow in the event of a medical emergency. A review of
the policy and procedure shall be included in the employee orientation program.

(12) Each agency shall establish a written complaint procedure regarding the provision of care and services, any allegations of physical or mental abuse or exploitation or the lack of respect for a client’s property by anyone providing agency services including, but not necessarily limited to:

(A) a statement that a client or his or her family has the right to file a complaint without discrimination or reprisal from the agency;

(B) the manner in which the agency shall address the complaint with the client or his or her family including a full investigation into the complaint; and

(C) provisions to ensure that the agency shall promptly attempt to resolve complaints.

(13) The agency shall maintain a complaint log which shall include, but not necessarily be limited to the name of the client and the date, nature and resolution of the complaint. The log shall be available to the department upon its request.

(14) The agency shall apprise the client of his or her right to access the appropriate state agency should the complaint not be resolved to the client’s satisfaction.

(f) Personnel policies for an assisted living services agency

(1) An agency shall have written personnel policies which shall include but not necessarily be limited to the following:

(A) Each agency shall have an orientation policy and procedure for all employees which shall include but not necessarily be limited to the following:

(i) organizational structure of the agency and philosophy of assisted living services;

(ii) agency client services policies and procedures;

(iii) agency personnel policies;

(iv) applicable regulations governing the delivery of assisted living services; and

(v) orientation dates, content, and name and title of the person providing the orientation as documented in the employee’s personnel folder.

(B) Each agency shall have an in-service education policy that provides an annual average of at least one (1) hour bimonthly for each assisted living aide.

(i) The in-service education shall include, but not necessarily be limited to current information regarding specific service procedures and techniques and information related to the population being served.

(ii) The in-service education program shall be provided by or under the supervision of the supervisor of assisted living services or a designated licensed nurse who possesses a minimum of two (2) years of full time or full time equivalent experience in nursing, at least one (1) year of which shall be in a home health care agency or community health program that included care of the sick at home.

(iii) An assisted living services agency that utilizes an aide from a placement agency or nursing pool shall maintain sufficient documentation to demonstrate that in-service education requirements are met.

(iv) A nursing home or home health care agency having the same ownership as, or under common or related ownership with, as assisted living services agency may provide joint in-service education programs for all aides, provided that records of such in-services clearly reflect content, attendance and work location.

(v) An assisted living services agency may contract with a home health care agency or
nursing home to provide in-service education to its assisted living aides in accordance with this section.

(C) Each agency shall have a policy and procedure for the annual performance evaluation of employees which includes a process for corrective action when an employee receives an unsatisfactory performance evaluation.

(D) Agency personnel policies and procedures shall include written job descriptions that specify the duties and qualifications of each job.

(E) Agency policies and procedures shall address documentation by a physician or health care practitioner with applicable statutory authority of annual physical examinations, including tuberculin testing, that are performed for the purpose of preventing infection or contagion from communicable disease. A statement that the employee is free from communicable disease, including results of the tuberculin testing, shall be obtained prior to assignment to client care activities.

(2) For all employees of the agency employed directly or via individual or agency contracts, the agency shall maintain individual personnel records containing at least the following:

(A) educational preparation and work experience;

(B) written verification of successful completion of a home health aide training and competency evaluation program or a competency evaluation program approved by the commissioner in accordance with Section 19-13-D8t (l), Section 19-13-D69 (d) (2) or Section 19-13-D83 (b) of the regulations of Connecticut State Agencies, if applicable;

(C) current licensure, if applicable;

(D) written annual performance evaluations;

(E) record of health examinations; and

(F) documentation of orientation.

(3) For persons utilized via contract with another assisted living services agency, a home health care agency, homemaker-home health aide agency or nursing pool, the assisted living services agency shall ensure it has access to the personnel records required in subdivision (2) of this subsection and shall make the documents available to the department upon its request.

(4) An assisted living services agency owned by, or under common or related ownership with, a nursing home or home health care agency, may maintain one (1) personnel file for each employee or independent contractor utilized by the nursing home or home health care agency and the assisted living services agency.

(g) **Supervisor of assisted living services**

(1) The supervisor of assisted living services shall be a registered nurse licensed to practice in this state who has one of the following:

(A) a baccalaureate degree in nursing and a minimum of two (2) years full time or full time equivalent clinical experience in nursing, at least one (1) of which shall be in a home health care agency or community health program that included care of the sick at home; or

(B) a diploma or associate’s degree in nursing and at least four (4) years full time or full time equivalent clinical experience in nursing within the past ten (10) years, at least one (1) year of which shall be in a home health care agency or community health program that included care of the sick at home.
(2) The supervisor’s responsibilities include, but are not necessarily limited to:
   (A) coordinating and managing all nursing and assisted living aide services rendered to
       clients by direct service staff under his or her supervision;
   (B) supervising assigned nursing personnel and assisted living aides in the delivery of
       nursing services and assistance with the provision of activities of daily living;
   (C) ensuring the evaluation of the clinical competence of assigned nursing personnel
       and assisted living aides;
   (D) participating in or developing all agency objectives, standards of care, policies and
       procedures concerning nursing services and the provision of assistance with activities of
       daily living;
   (E) participating in direct service staff recruitment, selection, orientation and in-service
       education;
   (F) participating in program planning, budgeting and evaluating activities related to the
       clinical services provided by the agency;
   (G) providing weekly reports to the service coordinator regarding any problems
       associated with the provision of the core services, or any problems or concerns associated
       with the managed residential community or the assisted living services agency, summaries
       of which shall be provided to the governing authority in accordance with the schedule
       established by the governing authority; and
   (H) providing monthly reports to the service coordinator regarding statistical data
       including the number of clients served and services provided, summaries of which shall be
       provided to the governing authority in accordance with the schedule established by the
       governing authority.

(3) The supervisor of assisted living services may provide direct nursing services to
    clients in accordance with subsection (h) of this section.

(4) Any absence of the supervisor of assisted living services longer than one (1) month
    shall be reported to the commissioner. A registered nurse with a minimum of two (2) years
    full time or full time equivalent clinical experience in nursing, at least one (1) year of which
    shall be in a home health care agency or community health program that included care of
    the sick at home, shall be designated, in writing, to act during any absence of the supervisor
    of assisted living services.

   (h) Nursing Services provided by an assisted living services agency

(1) An assisted living services agency shall have written policies governing the delivery
    of nursing services.

(2) Nursing services shall be provided by licensed nurses in accordance with
    subparagraph (J) of subdivision (3) of this subsection.

(3) A registered nurse shall be responsible for the following which shall be documented
    in the client’s service record:
    (A) admission of clients for service;
    (B) development of the client service program and instructions for assisted living aide
        services;
    (C) assessments, completed as often as necessary based on the client’s condition but not
        less frequently than every one hundred and twenty (120) days, and prompt action when a
        change in the client’s condition would require a change in the client’s service program;
(D) coordination of services with the client, family, and other appropriate individuals involved in the client service program;
(E) participation in orientation, teaching, and supervision of assisted living aides;
(F) arrangements for training or supervision of the assisted living aide by other professionals, when appropriate;
(G) referral to appropriate professionals or agencies, whenever the client’s condition necessitates, including the provision of current clinical information ensuring that if the client’s condition is no longer chronic and stable, services of a licensed home health care agency are engaged or other appropriate arrangements are made;
(H) planning for clients who shall no longer receive or require the services of the assisted living services agency;
(I) implementation or delegation of responsibility for the availability of nursing services on a twenty-four (24) hour basis;
(J) nursing services which shall include, but not necessarily be limited to:
   (i) client teaching;
   (ii) wellness counselling;
   (iii) health promotion;
   (iv) disease prevention;
   (v) medication administration and delegation of supervision of self-administered medications as specified in subdivision (4) of this subsection; and
   (vi) provision of care and services to clients whose conditions are chronic and stable as defined in subdivision (7) of subsection (e).

(4) Supervision of medication administration by an assisted living service agency shall be provided in accordance with the following:
   (A) A licensed nurse may administer medications to clients under the written order of a physician or health care practitioner with applicable statutory authority.
   (B) A licensed nurse may pre-pour medications for clients who are able to self-administer medications, under the written order of a physician or health care practitioner with applicable statutory authority.
   (C) With the approval of the client or his or her representative an assisted living aide may supervise a client’s self-administration of medications. The aide shall only:
      (i) remind a client to self administer the medications;
      (ii) verify that a client has self administered their medications; or
      (iii) assist the client with the self administration in the form of opening bottles, bubble packs or other forms of packaging if the client is not capable of performing this function.
   (D) For clients who require only supervision of self-administration, a registered nurse may verbally verify the client’s medication regimen with the client’s physician or health care practitioner with applicable statutory authority and document the medication regime in the client’s service record.
   (E) The registered nurse shall verify written or verbal orders from the physician or health care practitioner with applicable statutory authority as needed, but at least once every one hundred and twenty (120) days.
   (F) All medications shall be stored within a client’s private residential unit.
   (G) A licensed nurse shall ensure that the client or his or her representative is aware of
the client’s medication regime and able to make decisions regarding medication administration.

(i) Assisted living aide services provided by an assisted living services agency

(1) An assisted living services agency shall have written policies governing the delivery of services by an assisted living aide.

(2) Any person who furnishes assisted living services on behalf of an assisted living services agency shall have successfully completed a training and competency evaluation program in accordance with Section 19-13-D8t (1), Section 19-13-D69 (d) (2) or Section 19-13-D83 (b) of the regulations of Connecticut State Agencies, and shall have completed ten (10) hours of orientation prior to providing any direct client care service. This orientation shall be provided by the supervisor of assisted living services or a licensed nurse designated by the supervisor.

(3) When designated by the licensed nurse responsible for a client’s care and services, the duties of the assisted living aide may include:
   
   (A) assisting the client with personal care activities including bathing, oral hygiene, feeding, dressing, toileting and grooming;
   
   (B) assisting the client with exercises, ambulation, transfer activities and supervision of self-administered medication; and
   
   (C) performing routine household services essential to client care at home, including shopping, meal preparation, laundry and housecleaning.

(4) An assisted living services agency is not required to provide the services described in subparagraph (C) of subdivision (3) of this subsection. These services may be provided by an assisted living aide or any other person.

(5) Supervision of assisted living aides

   (A) A registered nurse shall be accessible by telephone and available to make a home visit at all times, including nights, weekends and holidays, when assisted living aides are on assignment in a client’s home.

   (B) The licensed nurse assigned to the client is responsible for supervision of the services rendered by the assisted living aide.

(j) Assisted living services agency staffing requirements

(1) An assisted living services agency shall appoint, with the written approval of the governing authority, a supervisor of assisted living services and a designee, as described in subsection (g) of this section.

(2) An assisted living services agency shall employ or contract with at least one (1) registered nurse in addition to the supervisor of assisted living services. This registered nurse may serve as the designee in the absence of the supervisor and shall be available to provide relief for the supervisor as needed.

(3) The agency shall employ a supervisor of assisted living services to be on site as follows:

   (A) at least twenty (20) hours per week for each ten (10) or less full time or full time equivalent licensed nurses or assisted living aides; or

   (B) at least forty (40) hours per week for each twenty (20) or less full time or full time equivalent licensed nurses or assisted living aides.

(4) In addition to the supervisor of assisted living services, the agency shall be staffed
with licensed nurses at least ten (10) hours per week for each additional ten (10) or less full time or full time equivalent assisted living aides.

(5) The supervisor of assisted living services shall be responsible for ensuring that licensed nurse staffing is adequate at all times to meet client needs.

(6) All registered nurses shall be supervised directly by the supervisor of assisted living services.

(7) All licensed practical nurses shall be supervised by the supervisor of assisted living services or a registered nurse designated by said supervisor.

(8) An assisted living services agency shall designate a registered nurse to be on call twenty-four (24) hours a day. The on-call registered nurse shall have two (2) years of full time or full time equivalent clinical experience in nursing, at least one (1) year of which shall be in a home health care agency or community health program that included care of the sick at home. The on-call registered nurse may be the supervisor of assisted living services or another registered nurse as specified in this section. An assisted living services agency may contract for on-call registered nurse services with a licensed home health care agency. The on-call nurse shall be reachable by telephone and shall be available to make an on-site visit, if necessary in order to:

(A) respond to the assisted living aides during the provision of care to clients; and

(B) respond to client emergencies.

(9) In an assisted living services agency that serves no more than thirty (30) clients on a daily basis, one (1) individual may serve as both the supervisor of assisted living services and the service coordinator, as described in subdivision (5) of subsection (C) of this section, provided that the assisted living services agency is owned by, or under common or related ownership with the management of the managed residential community. The minimum qualifications required for the supervisor of assisted living services shall be sufficient to meet the minimum qualifications required for these shared positions. In the event that the monthly average of clients served per day exceeds thirty (30) for two (2) consecutive months, the agency shall not qualify for the sharing of the positions.

(10) The supervisor of assisted living services shall be responsible for ensuring that sufficient numbers of assisted living aides are available to meet the needs of clients at all times based on the clients’ service programs.

(k) **Client service record**

(1) Each assisted living services agency shall maintain a complete service record for each client. All parts of the record pertinent to the daily care and treatment of the client shall be located in an accessible area on the campus of the managed residential community. The agency shall use a format that shall be provided by the department.

(2) The complete client service record shall include, but not necessarily be limited to:

(A) client identifying data including name, date of birth, sex, date of admission or readmission, marital status, and religion;

(B) name of family member or significant other, including address and telephone number;

(C) name, location and phone number of client’s personal physician or source of medical care;

(D) complete medical diagnoses;
(E) all initial and subsequent orders by the physician or health care practitioner with applicable statutory authority, if applicable;

(F) assessment of the client including pertinent past and current health history, physical, mental and social status, and evaluation of client’s needs;

(G) annual and other certifications by a physician or health care practitioner with applicable statutory authority of the client’s chronic and stable condition;

(H) a client service program, completed by a registered nurse in consultation with the client, family and others involved in the care of the client, within seven (7) days of the client’s admission to the agency, which shall be reviewed as often as the client’s condition requires but not less than once every one hundred and twenty (120) days, shall be explained to, reviewed with and agreed to by the client or his or her representative, shall reflect the client’s or his or her representative’s or family’s preferences and choices regarding client services, and shall include but not necessarily be limited to:

(i) identification of client’s problems and needs;

(ii) goals of management, plans for intervention and implementation;

(iii) types and frequency of services and equipment required;

(iv) types and frequency of services to be provided by the client’s family or informal support system;

(v) medications to be self-administered with supervision or administered by a licensed nurse, treatments and other required nursing services;

(vi) written instructions for the assisted living aide which shall be completed before the assisted living aide provides care and services to include the scope and limitations of the assisted living aide’s activities and pertinent aspects of the client’s condition to be observed and reported to the registered nurse; and

(vii) frequency and plan for registered nurse supervision of the assisted living aides, including methods of ensuring ongoing competence of the assisted living aide;

(I) nurses notes including changes in client conditions and notification of appropriate source of medical care, family member or significant other, treatments, and responses to such treatments;

(J) a record of medications administered, including medications pre-poured for the client or medications refused by the client;

(K) documentation of coordination of services with the client, family, and others involved in the client service program;

(L) documentation of all care and services rendered, including assisted living aide notes which have been reviewed by the registered nurse; and

(M) referrals and discharge summary, if applicable.

3) Upon a client’s referral to a home health care agency, the name of the agency to which the client was referred and a summary of the reason(s) for the referral shall be documented in the client record including the staff person contacted and the date of contact with the agency.

4) Upon a client’s resumption of services by an assisted living services agency, a summary of the care and services provided to the client by the home health care agency shall be documented in the client record.

5) All entries in the client service record shall be typewritten or written in ink and
legible. All entries shall be verified according to accepted professional standards.

(6) Client service records shall be safeguarded against loss, destruction or unauthorized use.

(7) All client service records, originals or copies, shall be preserved for at least seven years following death or discharge of the client from the assisted living services agency.

(8) Client records shall be confidential. Written consent shall be obtained from the client prior to the release of information to persons not otherwise authorized under law to receive said information.

(1) Quality assurance program for an assisted living service agency

(1) There shall be a quality assurance committee, appointed by the governing authority, consisting of at least one (1) physician, one (1) registered nurse with a minimum of two (2) years of clinical experience in home health care or one (1) nurse with a bachelor’s degree in nursing and one (1) social worker with a bachelor’s degree in social work or in a related human service field. Representatives appointed to the committee shall be in active practice in their profession or shall have been in active practice within the last five (5) years. No member of the quality assurance committee shall be an owner, stockholder, employee of the agency or related by blood or marriage to an owner, stockholder or employee of the agency. However, provision may be made for employees to serve on the committee as ex officio members only, without voting powers. The service coordinator of a managed residential community may be appointed to serve as the social worker for the assisted living services agency’s quality assurance committee provided that the agency is not owned by, or under common or related ownership with the managed residential community.

(2) The quality assurance committee shall meet at least once every one hundred and twenty (120) days.

(3) Written minutes shall document dates of meetings, attendance, and recommendations. The minutes shall be presented and acted on at the next regular meeting of the governing authority of the agency following the quality assurance committee meeting. These minutes shall be available to the department upon its request.

(4) The professional advisory committee of a home health care agency that owns, or is under common or related ownership with, an assisted living services agency may also serve as the quality assurance committee for the assisted living services agency, provided that minutes and other records clearly distinguish committee activities.

(5) The functions of the quality assurance committee shall be to participate in the agency’s quality assurance program to the extent defined in the quality assurance program policies and to, at least annually, review and revise, if necessary, the agency’s policies on:

(A) program evaluation;
(B) assessment and referral criteria;
(C) service records;
(D) evaluation of client satisfaction;
(E) personnel qualifications;
(F) standards of care; and
(G) professional issues, especially as they relate to the delivery of services and findings of the quality assurance program.

(6) Each agency shall have a written quality assurance program which shall include, but
not necessarily be limited to:

(A) program evaluation; and
(B) client record review.

(7) The quality assurance committee shall conduct the program evaluation, which shall include, but not necessarily be limited to:

(A) the extent to which the managed residential community’s policies and resources are adequate to maintain core services on a regular and continual basis and are appropriate to the community tenants and family needs; and
(B) the extent to which the agency’s objectives, policies and resources, are adequate to meet health and personal care needs of the managed residential community tenants, including referral to other health care services agencies or professionals, as appropriate.

(8) At least every one hundred and twenty (120) days, the quality assurance committee shall review a random sample of active and closed client records. Each record review shall be documented on a record review form and shall include, but not necessarily be limited to verification that:

(A) agency policies are followed in the provision of services to clients;
(B) services are provided only to clients whose level of care needs can be met by an assisted living services agency;
(C) provision of care is coordinated within the agency involved in the care of the client; and
(D) referral of the client is made to a home health care agency or other services of care or health care professionals when the client’s status and care needs are no longer limited to the services provided by an assisted living services agency.

(9) The agency’s sampling methodology for reviewing client records shall be defined in its quality assurance program policies and procedures.

(10) An annual written report of the agency’s quality assurance program shall summarize all findings and recommendations resulting from the quality assurance activities. This report and documentation of all actions taken as a result of the findings or recommendations included in the report shall be available to the department.

(m) **Client’s bill of rights and responsibilities.** An assisted living services agency shall have a written bill of rights and responsibilities governing agency services which shall be provided and explained to each client at the time of admission to the agency. Such explanation shall be documented in the client’s service record.

All clients shall receive a written copy of any changes made to the bill of rights. The bill of rights shall include but not necessarily be limited to:

(1) description of available services, charges and billing mechanisms with the assurance that any changes shall be given to the client orally and in writing as soon as possible but no less than fifteen (15) working days prior to the date such changes become effective;
(2) criteria for admission to service;
(3) information regarding the right to participate in the planning of (or any changes in) the care to be furnished, the frequency of visits proposed, the nurse supervising care and the manner in which the nurse may be contacted;
(4) client responsibility for participation in the development and implementation of the client service program and the client’s right to refuse recommended services;
(5) right of the client to be free from physical and mental abuse and exploitation and to have personal property treated with respect;

(6) explanation of confidential treatment of all client information retained in the agency and the requirement for written consent for release of information to persons not otherwise authorized under law to receive it;

(7) policy regarding client access to his or her service record;

(8) explanation of the complaint procedure and right to file a complaint without discrimination or reprisal from the agency regarding the provision of care and services, any allegations of physical or mental abuse or exploitation or the lack of respect for property by anyone providing agency services;

(9) agency’s responsibility to promptly investigate the complaints made by a client or his or her family regarding the provision of care and services, any allegations of physical or mental abuse or exploitation or lack of respect for the client’s property by anyone providing agency services;

(10) procedure for registering complaints with the commissioner including the address and phone number of the department;

(11) the client’s right to have services provided by an individual or entity other than via an assisted living services agency;

(12) the circumstances under which the client may be discharged from the agency or may not be permitted to receive services from the assisted living services agency;

(13) a description of Medicare-covered services and billing and payment requirements for such services;

(14) information advising the client of his or her rights under state law to make decisions about medical care, including the right to formulate advance directives such as living wills and durable power of attorney for health care decisions;

(15) the client’s right to make individual arrangements with an assisted living services agency which does not have a formal contract with the managed residential community in which he or she resides; and

(16) the client’s right to terminate or reduce services provided by an assisted living services agency at any time.

(Effective November 29, 1994; Amended June 29, 2001)