RESIDENT FILES

Department of Health
Division of Health Care Services
Residential Licensing

LEARNING GOALS

At the end of this course, you will...

- ► Identify what documents the Assisted Living Home needs to maintain in a resident file.
- Understand Residential Licensing file and document expectations.

RESIDENT FILES DEFINITIONS:

Prior to reviewing what is required of a residents file there are important definitions to understand.

Definitions:

Resident:

Means an adult who has signed a residential service contract with and resides in an assisted living home.

► Representative:

Means a guardian, conservator, attorney in fact, or other person designated by a court, or in writing by a legally competent person, to act on behalf of a person.

RESIDENT FILES DEFINITIONS

Service Coordinator :

Means a person who is responsible for coordinating the services of community agencies that provide services to a resident of an assisted living home; participating in inter-agency case management for a resident; planning for the placement of a person in an assisted living home.

Includes:

- Care Coordinators
- Case Managers
- Service Coordinators

► Entity:

Means the administration, program, and physical plant of a business or other premises subject to the applicable provisions of regulations and statutes; "entity" includes other parts of the building housing the entity and adjoining grounds over which the administrator has direct control;

► Home:

Means an assisted living home

ADMISSION DATE

AS 47.33.210. RESIDENTIAL SERVICES CONTRACTS. (a) A person may not begin residency in an assisted living home unless a representative of the home and either the person or the person's representative signs a residential service contract that complies with the provisions of this section. Upon signing of the contract, the home shall give the resident and the resident's representative, if any, a copy of the contract and place a copy of the contract in the resident's file.

AS 47.33.200. COMMENCEMENT OF RESIDENCY. A person may not begin to reside in an assisted living home without that person's consent, or, if the person is not competent, the consent of the person's representative (§ 1 ch. 130 SLA 1994)

ADMISSION DATE CONTINUED

Interpretation

- ► The Home will document in the residents file the date they moved into the facility.
- ► This date is used to determine compliance with a variety of statutes and regulations; including the need for residential service contact, timeframes for creating an assisted living plan (including nurse's review and physician statement), restraint assessment and resident policy notifications.
- ► This date most often is found on a resident cover page, in the resident services contract, or in the residents assisted living plan/ waiver plan of care.
- ▶ If a provider operates multiple homes or contracts with a placement agency the admission date found in Waiver Plan of Care or General Relief records may not accurately reflect the actual move in date to a specific facility.
- ► Homes are expected to update this admission date if they move between facilities operate by the same provider.

DATE OF BIRTH & SOCIAL SECURITY NUMBER

AS 47.33.070. RESIDENT FILES. (a) An assisted living home shall maintain, for each resident of the home, a file that includes (1) the name and birth date, and, if provided by the resident, the social security number of the resident;

Interpretation

- The Home will document the date of birth and social security number for each of their clients.
- This information is usually found on a resident cover sheet or in their plan of care/assisted living plan.
- ▶ It can also be found in medical records.
- Some older resident's records may say their date of birth is on or about a certain date.
- ► This information is used to help identify residents, in determining appropriate services, and in making referrals to LTCO.

Note: Residents can decline to provide their social security number.

CONTACTS

AS 47.33.070. RESIDENT FILES. (a) An assisted living home shall maintain, for each resident of the home, a file that includes (2) the name, address, and telephone number of the resident's closest relative, service coordinator, if any, and representative, if any;

Interpretation

- ► The home will have on file the contact information for resident's closest relative, service coordinator, if any, and representative, if any.
- ▶ This is usually kept on its own contact sheet, on a resident cover sheet, on the homes master list of names, on the waiver plan of care or assisted living plan.
- ▶ If a resident has an OPA guardian the home should record which specific guardian at OPA they are working with.

Technical Assistance:

While not required it is recommended that homes also add the contacts e-mail addresses to the list.

REPRESENTATIVE AUTHORIZATION

AS 47.33.070. RESIDENT FILES. (a) An assisted living home shall maintain, for each resident of the home, a file that includes (3) a statement of what actions, if any, the resident's representative is authorized to take on the resident's behalf;

AS 47.33.070. RESIDENT FILES. (a) An assisted living home shall maintain, for each resident of the home, a file that includes (10) a copy of a power of attorney or other written designation of an agent, representative, or surrogate by the resident.

REPRESENTATIVE AUTHORIZATION

Interpretation

- ▶ If a resident of the home has a representative the Home will maintain a statement of what actions, if any, the resident's representative is authorized to take on the resident's behalf.
- Resident may have one of the following types of representatives; Power of Attorney, Guardian, Payee, Conservator, Surrogate Decision Maker.
- ► The home needs to maintain a copy of the court records appointing the representative and describing the actions they may take.
- Payees and Surrogate Decision makers may not have court records, the home needs to maintain a copy of the contract or agreement between the resident and the representative.
- ▶ If a resident has an OPA guardian the home should record which specific guardian at OPA they are working with, however any guardian at OPA can act on behalf of a ward.

ASSISTED LIVING PLAN/ PLAN OF CARE

AS 47.33.220. ASSISTED LIVING PLAN REQUIRED. An assisted living home shall ensure that an assisted living plan for a resident of the home is developed, and approved by the resident or the resident's representative, within 30 days after the resident was admitted to the home. The assisted living plan must be developed by the resident or the resident's representative with participation from (1) the resident's service coordinator, if any; (2) representatives of providers of services to the resident; and (3) the administrator of the home (§ 1 ch. 130 SLA 1994)

AS 47.33.230. ASSISTED LIVING PLAN CONTENTS; DISTRIBUTION.

(d) A resident's assisted living plan must be in writing, in language that can be understood by the resident. (e) If a person's reasonable wants and needs can be met by a particular assisted living home and a decision is made to enter into a residential services contract between the person and the home, the resident's assisted living plan shall be approved, dated, and signed by the administrator of that home and either the resident or the resident's representative. (f) The assisted living plan shall be retained by the home in the resident's file. The home shall provide a copy of the plan to the resident and to the resident's representative if any. (§ 1 ch. 130 SLA 1994)

ASSISTED LIVING PLAN/ PLAN OF CARE

Assisted Living Plans vs Plans of Care:

► Residents on the Medicaid Waiver will have a Plan of Care. A Plans of Care can be used as an assisted living plan if it address the items required of an assisted living plan.

Start Date and End Date:

- ► The residents initial assisted living plan/plan of care must be created and approved within 30 days of the resident being admitted to the home.
- Most assisted living plans created by a home will not have an end date, unless the Home and resident agree on an end date.
- Waiver plans of care will have an end date and are not valid after that end date and need to be renewed or recreated annually.

Approval of a Plan

- ► The assisted living plan must be developed by the resident or the resident's representative with participation from the resident's service coordinator, if any; representatives of providers of services to the resident; and the administrator of the home.
- ► The assisted living plan must be dated and signed by the administrator of the home and either the resident or the resident's representative.
- ► The home must have proof that the service coordinator participated in the development of the plan, usually a signature on the plan.
- A copy of the plan must be kept in the resident's file.
- A copy of the plan must be given to the resident or their representative.
- ► The plan must be in a language the resident understands.

ASSISTED LIVING PLAN/ PLAN OF CARE

ASSISTED LIVING PLAN/ PLAN OF CARE CONTENT PART 1

AS 47.33.230. ASSISTED LIVING PLAN CONTENTS; DISTRIBUTION.

- (a) An assisted living plan for a resident of an assisted living home must;
- ▶ (1) promote the resident's participation in the community and increased independence through training and support, in order to provide the resident with an environment suited to the resident's needs and best interests:
- ▶ (2) recognize the responsibility and right of the resident or the resident's representative to evaluate and choose, after discussion with all relevant parties, including the home, the risks associated with each option when making decisions pertaining to the resident's abilities, preferences, and service needs; and
- ▶ (3) recognize the right of the home to evaluate and to either consent or refuse to accept the resident's choice of risks under (2) of this subsection.

ASSISTED LIVING PLAN/ PLAN OF CARE CONTENT PART 2

AS 47.33.230. ASSISTED LIVING PLAN CONTENTS; DISTRIBUTION.

- (b) An assisted living plan for a resident must identify and describe;
- ▶ (1) the resident's specific strengths and limitations in performing the activities of daily living;
- ▶ (2) any physical disabilities and impairments, and the aspects of the resident's medical condition, general health, emotional health, mental health, or other conditions or problems that are relevant to the services needed by the resident;
- ▶ (3) the resident's preference in roommates, living environment, food, recreational activities, religious affiliation, and relationships and visitation with friends, family members, and others;
- ▶ (4) specific activities of daily living with which the resident needs assistance;

- ► (5) how assistance with the activities of daily living will be provided or arranged for by the home or the resident;
- ► (6) the frequency of the resident's training for independent living, if habilitation is part of the plan;
- ▶ (7) the resident's need for personal assistance and how those needs will be met by home staff or another service provider from the community;
- ▶ (8) the resident's need for health-related services and how that need will be met;
- ▶ (9) the resident's reasonable wants and the services that will be used to meet those wants.

ASSISTED LIVING PLAN/ PLAN OF CARE

CONTENT PART 2

PHYSICIAN STATEMENT

AS 47.33.230. ASSISTED LIVING PLAN CONTENTS; DISTRIBUTION. (c) If the assisted living home provides or arranges for the provision of health-related services to a resident, the home shall ensure that a (2) physician's statement about the resident is included in the plan.

AS 47.33.990. DEFINITIONS. (17) "physician's statement" means a written statement by a person's primary physician that includes a (A) medical history and physical, not older than six months, of the person; (B) listing of the person's complete current medicine regimen; and (C) statement of current therapy regimen necessary to maintain or increase the person's functioning, mobility, or independence;

PHYSICIAN STATEMENT



Interpretation:

- Home's must have a physician statement attached to the initial assisted living plan (or Plan of Care).
- ► This physician statement cannot be older than 6 months from the date it is obtained.
- ► The physician statement is part of the assisted living plan.
- ► The physician statement must be from the person's primary physician if they have one.

PHYSICIAN STATEMENT

- ▶ If a resident does not have a primary physician, a home can use discharge information from the hospital or urgent care if the records are signed by a physician.
- ► A physician statement with an electronic signature will be accepted.
- ► A facility can use the Medicaid Waiver Verification of Diagnosis (VOD) form if it has or is supplemented with additional information regarding other diagnosis or history, current physical, medicine regimen and therapy regimen, as applicable.
- ► A facility can use the General Relief Physician Report if it has or is supplemented with additional information regarding current medicine regimen and therapy regimen, as applicable.

PHYSICIAN STATEMENT

- ► Since the physician statement is part of the assisted living plan a facility must review the information in the statement when they conduct their quarterly evaluations.
- ▶ If information in the physician statement has changed, they will need to update that information with verification from the individual's physician.
- Most commonly this will be an updated and current list of prescribed medications.
- A physician statement can be completed by an advanced nurse practitioner (ANP) or Physician Assistant (PA).

NURSE **REVIEW** OF **HEALTH-**RELATED **SERVICES**

AS 47.33.230. ASSISTED LIVING PLAN CONTENTS; DISTRIBUTION. (c) If the assisted living home provides or arranges for the provision of health-related services to a resident, the home shall ensure that a (1) registered nurse licensed under

AS 08.68 reviews the portion of an assisted living plan that describes how the resident's need for health-related services will be met:

Interpretation

- ▶ If the facility provides or arranges for health-related services, then facility will need to have a register nurse (RN) review that portion of the resident assisted living plan.
- ► The nurse review will be completed as a part of the development of the assisted living plan. The review must be completed within 30 days of admission, but after the plan has been completed and approved.
- The facility must document when the review occurred and who reviewed it. Usually, the nurse will sign off on the plan or sign off on a separate review sheet.
- ► The purpose of the review is to ensure the facility's plan for meeting the resident's health service needs is adequate and appropriate.
- ► Alternatively, an Advanced Nurse Practitioner (ANP) or physician can sign his section of the plan.

LIVING WILL

AS 47.33.070. RESIDENT FILES. (a) An assisted living home shall maintain, for each resident of the home, a file that includes (9) a copy of the resident's living will, if any;

Interpretation

▶ If a resident has a living will the home will maintain a copy of it in the resident's file.

ADVANCED HEALTH CARE DIRECTIVES /LIVING WILL

- ► If a resident has an Advanced Health Care Directives/Living Will, Comfort One, or POLUS they will need to incorporate those orders in the resident assisted living plan and maintain those records as a part of that plan.
- ► Comfort One, POLUS, or Advanced Health Care Directives/Living Will provide directives regarding the use of life saving measures if the resident health fails.
- Common with elderly or severely ill patients.
- Common with patients on endof-life/hospice care.
- ► Staff must be made aware of these resident wishes and directives.

QUARTERLY REVIEWS

AS 47.33.240. EVALUATION OF ASSISTED LIVING

PLAN.(a) An assisted living home resident or the resident's representative, and the home administrator or the administrator's designee, shall evaluate the resident's assisted living plan, determine whether the plan is meeting the resident's reasonable wants and needs, and revise the plan if necessary. At the request of the resident or the resident's representative, the resident's service coordinator, if any, and family members may participate in the evaluation. If the assisted living home provides or arranges for the provision of health-related services to a resident, the resident's evaluation shall be done at three-month intervals. If the assisted living home does not provide or arrange to provide health-related services to a resident, the resident's evaluation shall be done at least at one-year intervals.

AS 47.33.240. EVALUATION OF ASSISTED LIVING

PLAN. (b) The administrator or the administrator's designee shall (1) document the results of the evaluation in the resident's record; (2) sign and date any revisions to the resident's assisted living plan; (3) place a copy of the revisions in the resident's file; and (4) provide the resident and the resident's representative, if any, with a copy of the revisions. (§ 1 ch. 130 SLA 1994)

QUARTERLY REVIEWS

Interpretation:

- ▶ If an assisted living plan does not arrange for health-related services a review and update to the plan must be completed annually. (This is rare as most clients need assistance with health-related services or medication.)
- ▶ If the plan does arrange for health-related service a review and update to the plan must be completed at three-month intervals. A three-month interval is interpreted to mean that a plan must be reviewed once every three months and that no more than three months may pass between evaluations.
- A resident or the resident's representative, the resident's service coordinator, if any, and family members may participate in the evaluation if requested, otherwise only the administrator or designee needs to participate in the review.
- ► The Home must document their review and revise the plan as applicable. That record must be kept in the resident's file.
- ▶ If there is a change, and the assisted living plan or plan of care needs revisions, the Home must provide a copy of the revisions to the resident's representative. The Home will need to have proof that this was done, usually confirmed with a signature or by other written means (like an email or other written confirmation).

QUARTERLY REVIEWS

Interpretation:

- Since assisted living plans require a nurse review of health-related services a new nurse review of health-related services will need to be completed if it is determined that the health-related services have changed during the evaluation period.
- ➤ Since assisted living plans require a physician statement the physician statement will need to be updated to reflect any changes to the resident's medical history, medication regimen, or therapy regimen that occurred during the evaluation period. This update will need to be completed by the physician statement.
- ► Homes that use Waiver Plans of Care as assisted living plans must still complete evaluations of those plans at three-month intervals and document any changes. They do not need to have the care coordinator update the care plan after each evaluation.

RESIDENTIAL SERVICE CONTRACT

AS 47.33.200. COMMENCEMENT OF RESIDENCY. A person may not begin to reside in an assisted living home without that person's consent, or, if the person is not competent, the consent of the person's representative (§ 1 ch. 130 SLA 1994)

AS 47.33.070. RESIDENT FILES. (a) An assisted living home shall maintain, for each resident of the home, a file that includes (5) a copy of the residential services contract between the home and the resident;

RESIDENTIAL SERVICE CONTRACT

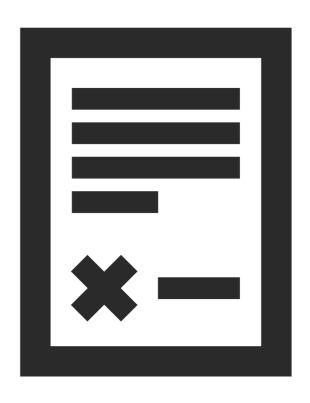
AS 47.33.210. RESIDENTIAL SERVICES CONTRACTS.

- (a) A person may not begin residency in an assisted living home unless a representative of the home and either the person or the person's representative signs a residential service contract that complies with the provisions of this section. Upon signing of the contract, the home shall give the resident and the resident's representative, if any, a copy of the contract and place a copy of the contract in the resident's file
- (b) A residential services contract must(1) specifically describe the services and accommodations to be provided by the assisted living home; (2) set out the rates charged by the home; (3) specifically describe the rights, duties, and obligations of the resident, other than those specified in this chapter; (4) set out the policies and procedures for termination of the contract as provided for in this chapter; (5) state the amount and purpose of any advance payments required by the home; and (6) set out the home's policy for refund of advance payments in the event of termination of the contract or death of the resident. (§ 1 ch. 130 SLA 1994)

Interpretation

- On or before the date of admission, the facility must enter into a residential service contract with the resident and/or their representative.
- ► The contract will be signed and dated by the facility and the resident or the representative.
- ► The contract must describe the services and accommodations being provide by the facility.
- The contract must document rates being charged by the facility.
- ► The contract must describe the rights, duties, and obligations of the resident. (usually house rules)

RESIDENTIAL SERVICE CONTRACT



- ► The contract must describe the policy and procedures for termination of the contract.
- ► Those policies and procedures must be compliant with AS 47.33.360.
- ► The contact must state the amount and purpose of any advance payments (security deposit or advanced rent) and describe how that advanced payment will be refunded.
- ► A copy of the contract must be maintained in the residents file and a copy of the contract must be provided to the resident and/or their representative.
- ▶ **NOTE:** Some facilities enter into placement agreements with agencies to provide care. These placement agreements are <u>not</u> residential service contracts.

RESIDENTIAL SERVICE CONTRACT

ADVANCED DEPOSITS

AS 47.33.030. ADVANCE PAYMENTS. (a) An assisted living home may not require a resident or prospective resident of the home or a resident or prospective resident's representative, to make an advance payment to the home except as security for performance of the contract or as advance rent for the immediately following rental period as the rental period is defined in the contract. If a home requires a resident or prospective resident to make an advance payment for security or as advance rent, (1) the home shall promptly deposit the money in a designated trust account in a financial institution, separate from other money and property of the home; (2) the home may not represent on a financial statement that the advance payment money is part of the assets of the home;(3) the advance payment money may be used only for the account of the resident;(4) the home shall notify the resident or the resident's representative, in writing, of the name and address of the depository in which the advance payment money is being held; and(5) the home shall provide to the resident or the resident's representative the terms and conditions under which the advance payment money may be withheld by the home.

ADVANCED DEPOSITS

AS 47.33.030. ADVANCE
PAYMENTS. (b) An assisted living home shall establish a written policy for the refund of unused advance payments in the event of termination of a residential services contract or death of a resident. The policy must provide that a resident is entitled to a prorated refund of the unused portion of an advance payment, less reasonable charges for damages to the home resulting from other than normal use. (§ 1 ch. 130 SLA 1994)

ADVANCED DEPOSITS

Interpretation

- The Home may only require a resident to make an advance deposit if it is for a security deposit or for advance rent for the next immediate rental period.
- The Home must deposit the money in a separate trust account.
- The advance deposit cannot be considered an asset of the home.
- Advanced deposits can only be used for the account of named resident.
- ► The Home will notify, in writing, the resident and the representative the name and address of the depository in which the advance deposit is being held.
- The Home will notify the resident or their representative of the terms under which the advance deposit will be used.
- ► The Home will have a policy for refunding advance deposit for when a residential service contract is terminated or a resident dies, including charges for damages or prorated refunds.
- ► Technical Assistance: Promptly It should be reasonably expected that a Home should deposit the money in the trust account within two weeks of receiving the funds.

AS 47.33.070. RESIDENT FILES. (a) An assisted living home shall maintain, for each resident of the home, a file that includes (7) written acknowledgement by the resident or the resident's representative that the resident has received a copy of and has read, or has been read the (A) resident's rights under AS 47.33.300; (B) resident's right to pursue a grievance under AS 47.33.340;

AS 47.33.310. NOTICE OF RIGHTS. (a) At the time a person begins residency in an assisted living home, the home shall provide the resident and the resident's representative, if any, with a copy of the rights set out in AS 47.33.300. The home shall obtain from the resident or the resident's representative a signed and dated acknowledgement stating that the resident has read or been read the rights, understands the rights, and has had any questions about the rights answered by the home.

RESIDENTS RIGHTS

Interpretation

- On or before admission the facility will provide a resident, their service coordinator, and their representative of the resident rights.
- ► The facility will need to document when this occurred and who they provided the residents rights and grievances to.
- ▶ The Home is required to get written acknowledgement that the individual received a copy of the resident rights.
- ▶ Typically you will see facilities have residents and their representatives sign a copy of the resident rights and grievances. Alternatively they may sign a statement that indicates they received a copy of the resident rights and grievances.

RESIDENTS RIGHTS

AS 47.33.340. RESIDENT GRIEVANCE PROCEDURE. (a) An assisted living home shall establish a written grievance procedure for handling complaints of residents of the home. At the time a person begins residency in an assisted living home, the home shall give a copy of the grievance procedure to the resident and the resident's representative, if any.

AS 47.33.340. RESIDENT GRIEVANCE PROCEDURE. (b) The grievance procedure established under this section must provide that a resident and the resident's representative have the right to (1) present both a written and an oral explanation of the resident's grievance; (2) have an advocate of the resident's choice, and the resident's representative, if any, attend meetings concerning the resident's grievance; and (3) be notified in writing, within 30 days after the filing of the grievance, of the final decision of the home regarding the grievance.

GRIEVANCES

- On or before admission the facility will provide a resident and their representative of the Home's grievance policy.
- ▶ The facility will need to document when this occurred and who they provided the grievances policy to.
- Typically you will see facilities have residents and their representatives sign a copy of the grievances policy.
- Alternatively they may sign a statement that indicates they received a copy of the grievance policy.

GRIEVANCES

- ▶ Resident or their representatives can file oral or written grievances.
- ▶ The resident has the right to have an advocate attend any meeting regarding the grievance.
- ▶ The resident has the right to be notified in writing, within 30 days after the filing of the grievance, of the final decision of the home regarding the grievance.

GRIEVANCES

AS 47.33.060. HOUSE RULES. (a) An assisted living home may establish house rules, subject to the limitations provided for under this chapter. (b) An assisted living home shall give a copy of the house rules to a prospective resident or the prospective resident's representative before the prospective resident enters into a residential services contract with the home, and shall post the house rules in a conspicuous place in the home.

AS 47.33.070. RESIDENT FILES. (a) An assisted living home shall maintain, for each resident of the home, a file that includes (7) written acknowledgement by the resident or the resident's representative that the resident has received a copy of and has read, or has been read the (E) home's house rules;

HOME RULES

- ▶ On or before admission, the facility will provide a resident, their service coordinator, and their representative a copy of the any house rules.
- ► The facility will need to document when this occurred and who they provided the house rules too.
- ► The Home is required to get written acknowledgement that the individual received a copy of the house rules.
- ► Typically you will see facilities have residents and their representatives sign a copy of the house rules.
- Alternatively the may sign a statement that indicates they received a copy of the House Rules.
- ► The resident should sign the house rules unless they have guardian then their guardian needs to sign them.
- The House rules must also be posted in a conspicuous place, a common area, like the living room or dining room.

HOME RULES

House rules may address various issues, including

- Times and frequency of use of the telephone.
- ► Hours for viewing and volume for listening to television, radio, and other electronic equipment that could disturb other residents.
- Visitors.
- Movement of residents in and out of the home.
- Use of personal property.
- Use of tobacco, marijuana, and alcohol.
- Physical, verbal, or other abuse of other residents or staff.
- An assisted living home may not adopt a house rule that unreasonably restricts a right of a resident provided for under this chapter or under any other provision of law, including a facilities Certification or GR requirements.

HOME RULES

AS 47.33.070. RESIDENT FILES. (a) An assisted living home shall maintain, for each resident of the home, a file that includes (8) an acknowledgement and agreement relating to home safekeeping and management of the resident's money, as required by AS 47.33.040;

7 AAC 75.310. ACCEPTANCE AND MANAGEMENT OF RESIDENTS' MONEY. (a) Before an assisted living home accepts the money of a resident for safekeeping and management, the home shall obtain written authorization from the resident or the resident's representative or representative payee. The authorization must (1) be attested to by a competent witness who has no pecuniary interest in the home or its operations, and who is not connected to the home or its operations in any manner; (2) indicate exactly which or how much of the resident's money the assisted living home is authorized to manage; and (3) provide for an amount not to exceed \$100 a month that the assisted living home may keep on hand for the resident to use to meet that resident's day-to-day needs, unless the resident has other sources of money for that purpose.

RESIDENTIAL MONEY AGREEMENT

- On or before admission the Facility will provide a resident, their service coordinator, and their representative of any agreement related to the management of resident money.
- ► The facility will need to document when this occurred and who they provided the agreement to.
- ► The Home is required to get written acknowledgement that the individual received a copy of the agreement.

RESIDENTIAL MONEY AGREEMENT

- Typically you will see facilities have residents and their representatives sign a copy of the agreement.
- Alternatively the may sign a statement that indicates they received a copy of the agreement.
- ► There must be a witness, who is competent and has no relationship to the facility, who attests to the agreement.
- ► The agreement must document how much money the home is authorized to manage.
- ▶ This amount may not exceed \$100 per month.

RESIDENTIAL MONEY AGREEMENT

7 AAC 75.295. USE OF INTERVENTION AND PHYSICAL RESTRAINT. (c) At the time of a resident's admission to the home, the home shall (1) explain its approved physical restraint procedures to the resident or resident's representative; (2) perform an assessment at the time of admission regarding the potential need for the use of time outs or physical restraint, asking for information (A) about the resident's prior behavior that might indicate a need for the use of time outs or physical restraint; and (B) that might help minimize use of time outs or physical restraint; (3) address the need for using time outs or physical restraint in the resident's assisted living plan if the home has reason to believe that time outs or physical restraint may be necessary because the resident's prior behavior or medical condition indicates that the resident may occasionally present an imminent danger to the resident or others; the plan must include information regarding (A) when time outs or physical restraint should be used; (B) what forms of physical restraint should be used, based on recommendations from the resident's primary physician; and (C) any prenotification procedures requested by the resident's representative if the 24-hour notice required by (d)(1) of this section is unsatisfactory to the representative

RESTRAINT POLICY/ASSESSMENT

- When a resident is admitted the home will explain its approved restraint procedure and perform an assessment.
- ► The assessment will document if the resident needs restraints and if so what kind and how they are to be used and when.
- ▶ This must be based on recommendation from the resident's physician.

RESTRAINT POLICY/ASSESSMENT

7 AAC 10.1010. Life and fire safety. (e) An entity must have a disaster preparedness and emergency evacuation plan that (6) for an assisted living home, provides that the procedures developed in the plan will be reviewed with each adult in care or that adult's representative before the adult begins to receive care.

Interpretation

- ▶ On or before the date of admission a facility will review their disaster plan with the resident and/or their legal representative.
- ► The facility will need to document when this occurred and who they reviewed the disaster plan with.
- Typically you will see facilities have residents and their representatives sign a copy of the disaster plan. Alternatively they may sign a statement that indicates they reviewed or received a copy of the plan. In rare cases when representatives are not available the facility may document when they sent a copy of the plan to the representative.

DISASTER/EMERGENCY EVACUATION PLAN

7 AAC 10.1095. Toxic substances; poisonous plants. (b) The department may allow a poisonous plant that is a common household plant, including a poinsettia, a dieffenbachia, an English ivy, a mother-in-law, and a philodendron, to be present in an entity described in (a)(3) of this section, if the department finds that children in care or adults with impaired judgment will be protected from harm. The entity shall submit to the department a written list of all poisonous plants maintained in the entity, and a description of how the entity will protect children, or adults with impaired judgment, from being harmed by the plants. If the department allows one or more poisonous plants to be present in the entity, the entity shall inform each adult's representative, parents of children in care, social workers, care coordinators, and case managers, as applicable, of any poisonous plant present in the entity, and describe how the entity will protect children, or adults with impaired judgment, from harm.

PLANT NOTIFICATION

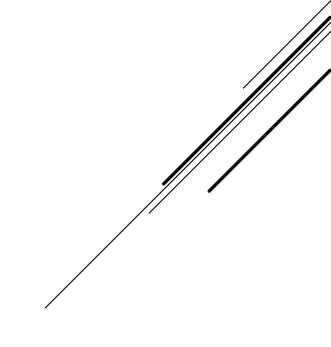
- ▶ If a facility has poisonous plants they must submit a safety plan to ensure adults with impaired judgement are protected from harm. The plan will include a list of poisonous plants in the facility.
- ▶ If the plan is approved the facility will notify each resident, their services coordinator, and/or representative of the presence of the poisonous plants and provide them with a copy of their safety plan.
- ► This requirement applies to plants on the property as well as an entity includes the surrounding grounds.
- ▶ **NOTE:** This only applies to poisonous plants and does not apply to non-poisonous plants.

PLANT NOTIFICATION

7 AAC 10.1095. Toxic substances; poisonous plants. (c) In this section, "poisonous plant"

(1) means a plant, tree, or shrub that can cause injury or death, if a portion of that plant, tree, or shrub is ingested or touched;

PLANT NOTIFICATION



- Poisonous and toxic flower garden plants, include;
 - ▶ autumn crocus
 - bleeding heart
 - chrysanthemum
 - ▶ daffodil
 - ► four-o'clocks
 - ▶ foxglove
 - hyacinth
 - hydrangea
 - ▶ iris, jonquil
 - ▶ lily of the valley
 - morning glory
 - narcissus
 - snow on the mountain

FLOWER GARDEN PLANTS

- Poisonous and toxic flower garden plants, include;
 - ▶ Belladonna
 - Bittersweet
 - ▶ Buttercups
 - Indian hemp
 - ▶ jack-in-the-pulpit
 - ▶ jimson weed
 - Larkspur
 - Monkshood
 - certain mushrooms
 - Nightshade
 - poison hemlock
 - poison ivy, poison oak
 - poison sumac
 - ▶ Tobacco
 - skunk cabbage

FLOWER GARDEN PLANTS

- Poisonous and toxic house plants, include;
 - bird of paradise
 - castor bean
 - dumbcane (also known as dieffenbachia)
 - ▶ English ivy
 - ► Holly
 - jequirty bean (also known as rosary pea)
 - Jerusalem cherry, mistletoe
 - ▶ mother-in-law
 - Oleander
 - ▶ Philodendron
 - ▶ Poinsettia
 - ▶ rhododendron

HOUSE PLANTS

- ▶ Poisonous and toxic trees and shrubs, include;
 - black locust, boxwood
 - ► Chokecherry
 - ► Elderberry
 - ► English yew
 - ▶ horse chestnut
 - ► Buckeye
 - ▶ Juniper
 - ▶ Oak
 - water hemlock
 - yew

TREE AND SHRUBS

- Poisonous and toxic vegetable garden plants, include;
 - Asparagus
 - sprouts and green parts of potato
 - ▶ rhubarb leaves
 - green parts of tomato

VEGETABLE GARDEN PLANTS

7 AAC 10.1090. Animals. (b) The entity shall inform each adult in care or that adult's representative, parents of children in care, social workers, care coordinators, and case managers, as applicable, if any animal is present in the entity.

ANIMAL NOTIFICATION

- The Home will notify the representative, parents of children in care, social workers, care coordinators, and case managers, as applicable, if any animal is present in the entity.
- ► Entity includes the structure or surrounding grounds.
- ▶ The Home will document the date this notification was completed.
- ▶ If animals are present in the facility on the date of admission the Home must provide the notification at that time.
- ▶ If a home acquires an animal after a resident is admitted, they will provide the notification on or before the day the animal arrives at the Home.
- ▶ The most common proof of notification is a signed copy of the notification.
- Alternatively a Home could document the date that they verbally notified adult in care or that adult's representative, parents of children in care, social workers, care coordinators, or case manager.

Technical Assistance: During the notification the Home should indicate what type of animals are present and how many.

If the home allows visiting animals this should be included in the notification.

ANIMAL NOTIFICATION

7 AAC 10.1080. Firearms and ammunition. (c) The entity shall inform each adult in care or that adult's representative, parents of children in care, or social workers, care coordinators, or case managers, as applicable, if firearms are present in the entity.

Interpretation

- A facility will notify residents, their service coordinators, and representatives if there are fire arms in the home.
- They do not have to disclose the type or number of fire arms.
- ▶ They do not have to disclose the location of the fire arms.
- ▶ The facility will need to provide this notification on or before admission and will need to document the date of notification and who they notified.
- ▶ Typically you will see facilities have residents and their representatives sign a copy of a firearm notification. In rare cases when representatives are not available the facility may document when they sent a copy of the notification to the representative.

FIRE ARM NOTIFICATION