

Connecticut

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Licensure Term	Assisted Living Services Agencies and Managed Residential Communities
Opening Statement	<p>The Department of Public Health, Facility Licensing and Investigations Section licenses assisted living services agencies that provide assistance to residents of managed residential communities. Assisted living services agencies are required to be licensed, but managed residential communities are not. These communities must register with the Department of Public Health.</p> <p>Alzheimer's special care units/programs provide specialized care or services for people with Alzheimer's disease or dementia and have separate licensure requirements.</p>
Legislative and Regulatory Update	There are no recent legislative or regulatory updates affecting assisted living. Effective January 9, 2017, criminal background checks are required for staff (CT Gen Stat Section 19a-491c (2012)).
Definition	<p>Assisted living services agencies provide nursing services and assistance with activities of daily living (ADLs) to clients living within a managed residential community having supportive services that encourages clients primarily age 55 or older to maintain a maximum level of independence.</p> <p>A managed residential community is a facility consisting of private residential units that provides a managed group living environment, including housing and services for clients primarily age 55 years or older. The operator of a managed residential community may also be licensed as an assisted living services agency.</p>
Disclosure Items	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. The bill of rights must contain specified information, such as: description of available services; admission criteria; explanation of complaint procedure; and circumstances under which

a client may be discharged.

Alzheimer's special care units or programs have additional written disclosure requirements described below.

Facility Scope of Care

Assisted living services agencies may provide nursing services and assistance with ADLs to residents with chronic and stable conditions as determined by a physician or health care practitioner. A managed residential community shall provide or arrange to make available core services including regularly scheduled meals, laundry service, transportation, housekeeping, and other services.

Third Party Scope of Care

Assisted living services agencies may contract with other organizations, agencies or individuals to provide defined services.

Admission and Retention Policy

The state does not specify discharge or admission requirements; however, each agency must develop written policies for the admission and discharge of clients. The admission criteria shall not impose unreasonable restrictions which screen out a client whose needs may be met by the agency. The discharge policies must include, but are not limited to, change in a resident's condition (when a resident is no longer chronic and stable), and what constitutes routine, emergency, financial, and premature discharge.

Resident Assessment

There is no standard required resident assessment form. A client service program must be completed by a registered nurse in consultation with the client, family, and others in the care of the client within seven days of admission and reviewed as the client's condition requires, but not less than every 120 days. The service program shall include the client's problems and needs; types and frequency of services and equipment required; medications, treatments, and other required nursing services; and other items. State law requires a yearly written certification by the resident's attending physician that the resident's condition is chronic and stable.

Medication Management

A licensed nurse may administer medications and/or pre-pour medications for clients who are able to self-administer medications. With the approval of the client or his or her representative, an assisted living aide may supervise a client's self-administration of medications.

Square Feet Requirements

The managed residential community where services are offered must have private residential units that include a full bath, access to facilities, and equipment for the preparation and storage of food. Common space in the facility must be sufficient to accommodate 50 percent of the residents at any given time. The state does not specify minimum square foot requirements.

Residents Allowed Per Room

Managed residential communities may not require tenants to share units, though residents may choose to share a room. The state does not specify a maximum number of tenants that may share a unit.

Bathroom Requirements

Each unit must include a full bath.

Life Safety

Fire safety is not under the jurisdiction of the state Department of Public Health. Fire safety issues are the purview of local authorities. Managed residential communities must provide the department with evidence of compliance with local building codes and the Connecticut Fire Safety Code and Supplement.

Unit and Staffing Requirements for Serving Persons with Dementia

Alzheimer's special care units/programs provide specialized care or services for people with Alzheimer's disease or dementia and have separate licensure requirements.

Alzheimer's special care units or programs must provide a written disclosure, verified annually, including at a minimum information concerning: philosophy; preadmission, admission and discharge; assessment; care planning and implementation; staffing patterns and training ratios; physical environment; resident's activities; family role in care; and program costs.

All licensed and registered direct care staff in Alzheimer's special care units or programs must receive Alzheimer's and dementia-specific training annually that includes, but is not limited to: (1) not less than eight hours of dementia-specific training, which shall be completed not later than six months after the date of employment, and not less than eight hours of such training annually thereafter, and (2) annual training of not less than two hours in pain recognition and administration of pain management techniques. In such settings, at least one hour of Alzheimer's/dementia specific training must be provided to all non-direct care staff within six months of hire.

All assisted living services agencies must provide training and education on Alzheimer's disease and dementia symptoms and care to all staff providing direct care upon employment and annually thereafter.

Staffing Requirements

The assisted living services agency must appoint a supervisor of services, though an administrator is not required. The supervisor of assisted living services is responsible for ensuring that there are sufficient numbers of assisted living aides to meet client needs. The state specifies the minimum number of hours per week that supervisor must be on site, depending on the number of equivalent licensed nurses or assisted living aides. The supervisor must ensure

that licensed nurse staffing is adequate at all times to meet client needs, though there are no staffing ratios. A registered nurse must be on call 24 hours a day. A managed residential community must employ an on-site service coordinator with specified duties that include ensuring that services are provided to all tenants and assisting tenants in making arrangements for their personal needs. In an assisted living services agency serving no more than 30 clients on a daily basis, one individual may serve as both the supervisor of assisted living services and the service coordinator under certain circumstances.

**Administrator
Education/Training**

The supervisor must be a registered nurse with a baccalaureate degree in nursing and at least two years of experience in nursing, including one year in a home health agency or community health program; or with a diploma/associates degree in nursing with four years of clinical experience in nursing, including one year in a home health agency or community health program.

Staff Education/Training

Service coordinators hired after December 1, 1994 must have specified levels of education and/or experience. All staff must complete a 10-hour orientation program. The program must include specified topics, such as: the policies and procedures for medical emergencies, organization structure and the philosophy of assisted living, agency client services policies and procedures, agency personnel policies, and applicable regulations. Assisted living aides must pass a competency exam. Assisted living aides must have successfully completed a training and competency evaluation program as either a certified nurse's aide or home health aide. Each agency shall have an in-service education policy that provides an annual average of at least one hour bimonthly for each assisted living aide.

**Entity Approving
CE Program**

None specified.

**Medicaid Policy and
Reimbursement**

A Medicaid home and community-based services waiver called the Connecticut Home Care Program for Elders covers services for eligible low-income residents in assisted living.

Citations

Connecticut Department of Public Health, Managed Residential Community Guide [August 30, 2006]
http://www.ct.gov/dph/lib/dph/family_health/children_and_youth/pdf/mrc_summary_pamphlet.pdf

Connecticut Department of Social Services website: Assisted Living Program. [October 12, 2012 and March 10, 2017]
<http://www.ct.gov/dss/cwp/view.asp?a=2353&q=391114> and
<http://www.ct.gov/dss/cwp/view.asp?a=2353&q=305170>

General Statutes of Connecticut, Title 19A, Chapter 368v, Sec. 19a-562: Alzheimer's Special Care Units or Programs.

http://www.cga.ct.gov/current/pub/chap_368v.htm#sec_19a-562

Public Health Code, 19-13-D105: Assisted Living Services Agency.

[June 1, 2006]

http://www.sots.ct.gov/sots/lib/sots/regulations/title_19/013d.pdf