

Illinois

		Phone
Agency	Department of Public Health, Division of Assisted Living	(217) 782-2913
Contact	Lynda Kovarik	(217) 785-9174
E-mail	lynda.kovarik@illinois.gov	
Web Site	http://www.dph.illinois.gov/topics-services/health-care-regulation/assisted-living	

Licensure Term	Assisted Living Establishments and Shared Housing Establishments
Opening Statement	<p>The Illinois Department of Public Health regulates assisted living establishments and shared housing establishments through one set of rules. Assisted living requires single-occupancy private apartment units, whereas shared housing does not.</p> <p>All requirements described below apply to both types of establishments unless otherwise noted. This report does not detail additional requirements for supportive living facilities, which is a separate category of residential settings that accept Medicaid.</p>
Legislative and Regulatory Update	<p>Regulations were adopted in December 2001. As of March 28, 2018, the Illinois Department of Public Health regulated 471 licensed establishments with a total of 22,735 units, which are inspected by Division of Assisted Living surveyors. Of these establishments, 124 are freestanding Alzheimer's licensed buildings and 151 are licensed building establishments that have both Alzheimer's memory care units and regular assisted living units.</p> <p>There are no recent updates to the requirements for assisted living or shared housing establishments.</p> <p>For supportive living facilities, legislation was introduced and passed that outlined criteria for mixed use buildings for purposes other than Supportive Living (see Public Act 100-0583).</p>
Definition	<p>Assisted Living Establishment: Provides community-based residential care for at least three unrelated adults (at least 80 percent of whom are 55 years of age or older) who need assistance with activities of daily living (ADLs), including personal, supportive, and intermittent health-related services available 24-hours per day, if needed, to meet the scheduled and unscheduled needs of a resident.</p> <p>Shared Housing Establishment: Provides community-based residential care for 16 or fewer unrelated adults (at least 80 percent</p>

of whom are 55 years of age or older) who need assistance with housing, ADLs, and personal, supportive, and intermittent health-related services. This care must be available 24-hours per day, if needed, to meet the scheduled and unscheduled needs of a resident.

Disclosure Items

Each establishment shall provide a resident or representative with the following information at the time the resident is accepted into the establishment: (1) a copy of current resident policies or a resident handbook; (2) whether each unit has independent heating and cooling controls and their location; (3) the establishment's policy concerning response to medical emergency situations; and (4) whether the establishment provides therapeutic diets. An establishment must fill out an Alzheimer's Special Care Disclosure Form if they offer care to residents with Alzheimer's disease in a special unit.

Facility Scope of Care

Establishments must provide mandatory services, including: three meals per day; housekeeping; laundry; security; an emergency communication response system; and assisted with ADLs as required by each resident. Assistance with ADLs includes personal, supportive, and intermittent health-related services available 24 hours per day, if needed, to meet the scheduled and unscheduled needs of the resident.

Third Party Scope of Care

Home health agencies unrelated to the assisted living establishment may provide services under contract with residents.

Admission and Retention Policy

No individual shall be accepted for residency or remain in residence if: (1) the establishment cannot provide or secure appropriate services, (2) the individual requires a level of service or type of service for which the establishment is not licensed or which the establishment does not provide, or (3) the establishment does not have the staff appropriate in numbers and with appropriate skill to provide such services. The state specifies circumstances in which a person shall not be accepted for residency, including but not limited to: residents who pose a serious threat to self or others, have serious mental or emotional problems, who are in need of more than a specified amount of nursing care, or who require total assistance with two or more ADLs.

Resident Assessment

A physician's assessment must be completed no more than 120 days prior to a resident moving into any establishment. Re-evaluations must be completed at least annually. There is no required form but the assessment must include an evaluation of the individual's physical, cognitive, and psychosocial condition, and documentation of the presence or the absence of tuberculosis infection. Establishments may develop their own tools for evaluating residents. Documentation of evaluations and re-evaluations may be

in any form that is accurate, addresses the resident's condition, and incorporates the physician's assessment.

Medication Management

All medications must be self-administered or may be administered by licensed personnel as an optional service. Staff may give medication reminders and monitor residents to make sure they follow the directions on the container.

Square Feet Requirements

State requirements do not specify minimum square footage requirements for individual units.

Residents Allowed Per Room

Assisted living and shared housing units are individual units except in cases in which residents choose to share a unit. For assisted living establishments, a maximum of two individuals can choose to share a unit. The requirements for shared housing establishments do not specify a maximum number of residents allowed in a room.

Bathroom Requirements

Assisted Living Establishment: Units shall have a bathroom that provides privacy and contains an operational toilet, sink, mirror, means of ventilation or operable window, and assistive devices, if identified in the resident's service plan.

Shared Housing Establishment: Units shall provide one tub or shower for every six residents and one operational toilet and sink for every four residents.

Life Safety

Assisted living and shared housing establishments must comply with National Fire Protection Association Life Safety Code 101, Chapter 32 (New Residential Board & Care Occupancies), 2000 Edition, or Life Safety Code 101A, Chapters 6 (Evaluating Evacuation Capability) and 7 (Board and Care Occupancies), 2001 Edition. The state is undergoing rule revision to adopt the 2012 edition.

Unit and Staffing Requirements for Serving Persons with Dementia

A facility must fill out an Alzheimer's Special Care Disclosure Form if they offer care to residents with Alzheimer's disease in a special unit.

An establishment offering to provide a special program for persons with Alzheimer's disease and related disorders (among other things) must:

(1) Disclose specified information to the Department of Public Health and to potential or actual residents;

(2) Ensure a representative is designated for each resident;

(3) Ensure the continued safety of all residents including, but not limited to, those who may wander and those who may need supervision and assistance during emergency evacuations;

- (4) Provide coordination of communications with each resident, resident's representative, relatives, and other persons identified in the resident's service plan;
- (5) Provide in the service plan appropriate cognitive stimulation and activities to maximize functioning;
- (6) Provide an appropriate number of staff for its resident population. (At least one staff member must be awake and on duty at all times.); and
- (7) Provide at least 1.4 hours of services per resident per day.

The manager of an establishment providing Alzheimer's care or the supervisor of an Alzheimer's program must be 21 years of age and have either: (1) a college degree with documented course work in dementia care, plus one year of experience working with persons with dementia; or (2) at least two years of management experience with persons with dementia. The manager or supervisor must complete, in addition to other training requirements, six hours of annual continuing education regarding dementia care.

All staff members must receive, in addition to other required training, four hours of dementia-specific orientation prior to assuming job responsibilities. Training must cover, at a minimum, the following topics: (1) basic information about the causes, progression, and management of Alzheimer's disease and other related dementia disorders; (2) techniques for creating an environment that minimizes challenging behavior; (3) identifying and alleviating safety risks to residents with Alzheimer's disease; (4) techniques for successful communication with individuals with dementia; and (5) resident rights.

Direct care staff must receive 16 hours of on-the-job supervision and training following orientation. Training must cover: (1) encouraging independence in and providing assistance with ADLs; (2) emergency and evacuation procedures specific to the dementia population; (3) techniques for creating an environment that minimizes challenging behaviors; (4) resident rights and choice for persons with dementia, working with families, and caregiver stress; and (5) techniques for successful communication.

Direct care staff must annually complete 12 hours of in-service education regarding Alzheimer's disease and other related dementia

disorders.

Staffing Requirements

Assisted Living Establishment: Must have a full-time manager. The establishment shall have staff sufficient in number with qualifications, adequate skills, education and experience to meet the 24-hour scheduled and unscheduled needs of residents and who participate in ongoing training to serve the resident population. There are no staffing ratios. At least one staff member must be awake, on duty, and on site 24 hours per day. There must be a minimum of one direct care staff person who is CPR-certified, awake, and on duty at all times in assisted living establishments.

Shared Housing Establishments: Must have a manager, who may oversee no more than three establishments if they are located within 30 minutes driving time during non-rush hour and if the manager may be immediately contacted by an electronic communication device. The establishment shall have staff sufficient in number with qualifications, adequate skills, education and experience to meet the 24-hour scheduled and unscheduled needs of residents and who participate in ongoing training to serve the resident population. There are no staffing ratios. Shared housing establishments must have at least one staff member on site at all times, except in certain situations, such as taking a resident to the emergency room or planned or unplanned trips to the grocery store, that would require the staff person to be away for a brief period of time. In such situations, arrangements shall be made to monitor the safety of the residents in accordance with the service delivery plan. There must be a minimum of one direct care staff person who is CPR-certified, awake, and on duty at all times in assisted living establishments.

Administrator Education/Training

The administrator must be a high school graduate or equivalent and at least 21 years of age. The manager must receive training and orientation in care and service system delivery and have at least: one year of management experience in health care, housing or hospitality or providing similar services to the elderly; or two years of experience in health care, housing, or hospitality or providing similar services to the elderly.

Each manager shall complete a minimum of eight hours of ongoing training, applicable to the employee's responsibilities, every 12 months after the starting date of employment. The training shall include: 1) promoting resident dignity, independence, self-determination, privacy, choice, and resident rights; 2) disaster procedures; 3) hygiene and infection control; 4) assisting residents in self-administering medications; 5) abuse and neglect prevention and reporting requirements; and 6) assisting residents with ADLs.

Staff Education/Training

All personnel must have training and/or experience in the job assigned to them. An ongoing in-service training program is required to ensure staff have the necessary skills to perform job duties. Each new employee must complete orientation within 10 days of their start date on topics such as the establishment's philosophy and goals; resident rights; and abuse and neglect prevention and reporting requirements. Within 30 days, each employee must complete an additional orientation on specified topics such as orientation to the characteristics and needs of the establishment's residents; internal establishment requirements, policies, and procedures; and training in assistance with ADLs appropriate to the job.

Each manager and direct care staff member shall complete a minimum of eight hours of ongoing training, applicable to the employee's responsibilities, every 12 months after the starting date of employment. The training shall include: 1) promoting resident dignity, independence, self-determination, privacy, choice, and resident rights; 2) disaster procedures; 3) hygiene and infection control; 4) assisting residents in self-administering medications; 5) abuse and neglect prevention and reporting requirements; and 6) assisting residents with ADLs.

**Entity Approving
CE Program**

None specified.

**Medicaid Policy and
Reimbursement**

Illinois operates the Supportive Living Program (SLP) under a 1915(c) Home and Community Based Services waiver and has authority to serve up to 12,132 Medicaid residents in Fiscal Year 2018. Under this program, Medicaid may cover services for Medicaid beneficiaries receiving services from SLP providers. The Department of Healthcare and Family Services, which administers the state Medicaid program, certifies and monitors SLP providers. These providers offer similar services as assisted living and shared housing, but operate under different requirements. In 2018, there are 153 operating SLP providers with a total of 12,800+ apartments and another 11 sites under development. There was recently a legislative rate change. Assisted living establishments are not Medicaid-certified providers.

Citations

Administrative Code, Title 77, Chapter I, Subchapter c, Part 295: Assisted Living and Shared Housing Establishment Code. [July 31, 2015]
<http://www.ilga.gov/commission/jcar/admincode/077/07700295sections.html>

Illinois Compiled Statutes, Chapter 210: Assisted Living and Shared

Housing Act [effective January 1, 2001]

<http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=1217&ChapterID=21>

Illinois Supportive Living Program website.

<https://www.illinois.gov/hfs/MedicalPrograms/slf/Pages/default.aspx>

Administrative Code, Title 89, Chapter I, Subchapter d, Part 146,
Subpart B: Supportive Living Facilities

<ftp://www.ilga.gov/jcar/admincode/089/08900146sections.html>

Illinois Department of Public Health, Division of Assisted Living
(217) 782-2913