# MAINE STATE LEGISLATURE

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# 117th MAINE LEGISLATURE

### **SECOND REGULAR SESSION-1996**

Legislative Document

No. 1835

S.P. 731

In Senate, March 11, 1996

An Act to Provide for Assisted Living Services.

Reported by Senator PENDEXTER of Cumberland for the Assisted Living Task Force pursuant to Public Law 1995, chapter 362.

Reference to the Committee on Human Resources suggested and ordered printed pursuant to Joint Rule 20.

MAY M. ROSS Secretary of the Senate

Printed on recycled paper

Be	it	enacted	by	the	Peop	ple	of	the	State	of	Maine	as	follows

2	PART A
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6	Sec. A-1. 21-A MRSA §751, sub-§7, as amended by PL 1991, c. 466, §24, is further amended to read:
8	7. Residence in certain facilities. Resident-of Residence in a licensed nursing home, as defined in Title 22, chapter 405,
10	licensed boarding home, as defined in Title 22, chapter 1665, or certified congregate housing unit, as defined in Title 22,
12	chapter 1457-A, 1665. Residents of those facilities may cast absentee ballots only when the clerk is present;
14	Sec. A-2. 21-A MRSA §753, sub-§3-A, as amended by PL 1991, c.
16	862, §6, is further amended to read:
18	3-A. Alternate method of balloting by residents of licensed nursing homes, licensed boarding homes or certified congregate
20	housing units. The municipal clerk shall designate one or more times during the 30-day period prior to an election during which
22	the municipal clerk must be present in any licensed nursing home, as defined in Title 22, chapter 405; licensed boarding home, as
24	defined in Title 22, chapter 1665; or certified congregate housing unit, as defined in Title 22, chapter 1457-A 1665, for
26	the purpose of absentee balloting by the residents of these homes or units. The clerk shall designate which areas in these
28	facilities constitute the voting place, the voting booth and the guardrail enclosure. Sections 681 and 682 apply to voting in
30	these facilities within the areas designated by the clerk.
32	Sec. A-3. 22 MRSA $\S5107$ -A, last $\P$ , as enacted by PL 1991, c. 622, Pt. QQ, $\S2$ , is amended to read:
34	Any person, official or institution that in good faith
36	participates in the registering of a complaint pursuant to this section or in good faith investigates that complaint or provides
38	access to those persons carrying out the investigation about an
40	act or practice in any bearding residential care facility licensed according to section 5154-er 7801 or any nursing home
42	licensed according to section 1817 or that participates in a judicial proceeding resulting from that complaint is immune from any civil or criminal liability that otherwise might result from

Sec. A-4. 22 MRSA c. 1457-A, as amended, is repealed.

acting pursuant to this section did so in good faith.

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these actions. For the purpose of any civil or criminal proceedings, there is a rebuttable presumption that any person

	Sec. A-5. 22 MRSA c. 1665 is amended by repealing the chapter
2	headnote and enacting the following in its place:
4	<u>CHAPTER 1665</u>
6	ASSISTED LIVING PROGRAMS
8	Sec. A-6. 22 MRSA §7901-A, as amended by PL 1993, c. 661, §7, is repealed.
10	Sec. A-7. 22 MRSA §§7901-B and 7901-C are enacted to read:
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14	§7901-B. Assisted living programs and services authorized
16	Assisted living programs and services are authorized under this chapter subject to the following standards and in the
18	following settings.
20	1. Standards. Assisted living programs further the independence of the resident and respect the privacy and
22	personal choices of the resident, including the choice to continue to reside at home as the resident ages, except when that choice would pose a direct threat to the health or safety of
24	other individuals or would result in substantial physical damage to the property of others. Assisted living services provided to
26	residents must be consumer oriented and of high quality.
28	2. Settings. Assisted living services may be provided in the following settings:
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32	A. Congregate housing licensed under this subsection. A congregate housing program providing assisted living services may operate under the following models of assisted
34	living.
36	(1) A license is not required for providers operating congregate housing.
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40	(2) A license is optional for providers operating congregate housing with personal care assistance.
42	(3) A license is required for providers operating
44	<pre>congregate housing with personal care assistance and administration of medication.</pre>
46	(4) A license is required for providers operating
48	<pre>congregate housing with nursing services including personal care assistance and administration of</pre>
50	medication; and

B. Residential care facilities licensed under chapter 1663.

### §7901-C. Definitions

As used in this subtitle, unless the context otherwise indicates, the following terms have the following meanings.

1. Activities of daily living. "Activities of daily living" means tasks routinely performed by a person to maintain bodily functions, including bed mobility, transfers, dressing, eating, toileting, bathing and personal hygiene.

2. Assisted living services. "Assisted living services" means the provision, directly or under contract with an agency, by a single entity of housing and assistance with the activities of daily living and the instrumental activities of daily living. "Assisted living services" may include personal supervision, protection from environmental hazards, diet care, supervision and assistance in the administration of medications, diversional or motivational activities, assistance in activities of daily living or physical exercise and nursing services.

3. Congregate housing. "Congregate housing" means residential housing that consists of private dwelling units with an individual bathroom and an individual food preparation area, in addition to central dining facilities, and within which a congregate housing supportive services program serves occupants.

4. Congregate housing services program. "Congregate housing services program" means a comprehensive program of supportive services, including meals, housekeeping and chore assistance, case management and other services that are delivered on the site of congregate housing and assist occupants to manage the activities of daily living and the instrumental activities of daily living. Congregate housing services may also include personal care assistance, with or without supervision, assistance in the administration of medication and nursing services subject to the licensing requirements of chapter 1663.

5. Instrumental activities of daily living. "Instrumental activities of daily living" include but are not limited to meal preparation, taking medication, using the telephone, handling finances, banking and shopping, light housekeeping, heavy housekeeping and getting to appointments.

 6. Long-term care facility. "Long-term care facility" means any program of assisted living licensed pursuant to chapters 1663 and 1665 and any nursing facility or unit licensed pursuant to chapter 405.

- 7. Nursing services. "Nursing services" means services

  provided by professional nurses licensed pursuant to Title 32, section 2102, subsection 2, including personal care assistance and administration of medication. For the purposes of this subtitle, "nursing services" includes coordination and oversight of patient care services provided by unlicensed health care assistive personnel in group residential settings consisting of private apartments.
- 8. Personal care assistance. "Personal care assistance"
  means services provided in group residential settings consisting
  of private apartments including assistance with the activities of
  daily living and the instrumental activities of daily living and
  supervision of residents self-administering medication.
  "Personal care assistance," does not include the administration
  of medication.

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- 9. Personal care assistance with administration of medication. "Personal care assistance with administration of medication" means personal care assistance that includes the administration of medication to the resident by provider staff.
- 10. Private apartment. "Private apartment" means a private dwelling unit with an individual bathroom and an individual food preparation area.
- 11. Resident. "Resident" means any person 18 years of age or older who is not related by blood or marriage to the owner or person in charge of the facility in which the resident lives and receives assisted living services.
- 12. Residential care facility. "Residential care facility" 32 means a house or other place that, for consideration, is maintained wholly or partly for the purpose of providing 34 residents with assisted living services as defined in subsection 2. A "residential care facility" includes, but is not limited 36 to, facilities formerly defined and regulated as adult foster care homes and boarding homes under former section 7901-A and 38 adult family care homes regulated under this chapter. 40 "Residential care facility" does not include a licensed nursing home, a supported living arrangement certified by the Department of Mental Health and Mental Retardation or congregate housing. 42
- 13. Shared staffing. "Shared staffing" means the use of licensed and unlicensed personnel who are employed, directly or under a contract with a licensed agency, by a long-term care facility in more than one level of care provided by a single entity on the same premises.

Sec. A-8. 22 MRSA §7902, sub-§1, as amended by PL 1993, c. 661, §8, is further amended to read:

The commissioner shall adopt rules for the Rules. various types and <u>levels</u> of residential care facilities. rules must be developed in consultation with the long-term care ombudsman program, providers of assisted living services and consumer representatives. These rules must include but are not limited to rules pertaining to administration, staffing, number of residents, the quality of care, the quality of treatment, if applicable, the health and safety of staff and residents, the rights of residents, community relations, administration of medication, criteria for placement of residents who are 17 years of age or older and under 18 years of age and licensing procedures. The - commissioner - may - adopt - separate - rules for-various-types-of-residential-eare-facilities. Rules adopted pursuant to this section are major substantive rules as defined in Title 5, chapter 375, subchapter II-A.

In establishing the rules for the administration of medication, the commissioner shall consider, among other factors, the general health of the persons likely to receive medication, the number of persons served by the facility and the number of persons employed by the facility. In the rules for the administration of medication established for residential care facilities, the Department of Human Services may require unlicensed personnel to have successfully completed a program of training and instruction, approved by the department for the administration of medication, that is not limited to in-service training.

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### Sec. A-9. 22 MRSA §§7914 to 7918 are enacted to read:

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### §7914. Shared staffing

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The department shall permit staff in residential care facilities to be shared with other levels of assisted living on the same premises as long as there is a clear, documented audit trail and the staffing in the residential care facilities remains adequate to meet the needs of residents. Staffing to be shared may be based on the average number of hours used per week or month within the assisted living program.

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## §7915. Administration of congregate housing services programs funded by the State; eligible clients

The Department of Human Services, Bureau of Elder and Adult Services, with advice from the Maine State Housing Authority, the Rural Housing Services or any other housing agency financing the congregate housing facility, shall administer state-funded

2	<pre>congregate housing services programs. Administration must include, but is not limited to:</pre>
4	1. Rules; operation of congregate housing services
6	<pre>programs. Adopting rules governing the operation of congregate housing services programs;</pre>
8	2. Compliance with standards and guidelines. Reviewing the
10	compliance of congregate housing services programs with standards and guidelines established for the program; and
12	3. Awarding of grants. Awarding of grants, when available and necessary, to subsidize the cost of congregate housing
14	services programs for eligible clients.
16	For the purposes of this subsection, "eligible clients" means adults who have been determined through an approved assessment by
18	the Department of Human Services to be functionally or cognitively impaired and in need of financial assistance to
20	access congregate housing services.
22	§7916. Fire safety inspection
24	In accordance with this section, the department shall adopt rules pursuant to Title 5, chapter 375 for the inspection of
26	congregate housing facilities by the Office of the State Fire Marshal and the fees for that inspection. Rules regarding fees
28	adopted pursuant to this section are major substantive rules as defined by Title 5, chapter 375, subchapter II-A.
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	1. Permit; inspection. Each congregate housing services
3 2	program must be inspected by the Office of the State Fire Marshal at the request of the department prior to licensure. Each
34	facility must be reinspected every 2 years.
36	2. Certificate of compliance. The Office of the State Fire
38	Marshal must issue a certificate of compliance to the department.
	3. Requirements. All facilities must be inspected using
10	Chapter 18, New Apartment Buildings, of the National Fire
	Protection Association Life Safety Code 101, 1994 edition. All
12	buildings must be protected throughout by an approved, supervised
	automatic sprinkler system.
14	§7917. Fees for licenses
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18	The department shall charge annual fees for congregate housing services programs as follows:
t O	nonsing services brodiging as rollows:

- 1. Personal care assistance. To be licensed to provide personal care assistance, \$50;
- 2. Personal care assistance with medication. To be licensed to provide personal care assistance with administration of medication, \$100; and
  - 3. Nursing services. To be licensed to provide nursing services, \$200.

### §7918. Rules

The commissioner shall adopt rules for the various types of

congregate housing services programs. The rules must be
developed in consultation with the long-term care ombudsman

program, providers of congregate housing and congregate housing
services programs and consumer representatives. The rules must

include but are not limited to rules pertaining to
administration, quality of care, quality of treatment,

qualifications of staff, rights of residents, contracts and
administration of medication. The rules must promote the
efficiencies inherent in providing services in a congregate

setting. Rules adopted pursuant to this section are major substantive rules as defined in Title 5, chapter 375, subchapter II-A.

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#### PART B

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Sec. B-1. 22 MRSA §1812-C, sub-§6-A is enacted to read:

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6-A. Shared staffing. The department shall permit staff in nursing facilities to be shared with other levels of assisted living on the same premises as long as there is a clear, documented audit trail and the staffing in the nursing facilities remains adequate to meet the needs of residents. Staffing to be shared may be based on the average number of hours used per week or month within the assisted living program.

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- Sec. B-2. 22 MRSA §1812-G, sub-§3, as enacted by PL 1991, c. 421, §1, is amended to read:
- 3. Eligibility requirements for listing. The State Board of Nursing shall adopt rules pursuant to the Maine Administrative Procedure Act defining eligibility requirements for listing on the Maine Registry of Certified Nursing Assistants, including rules regarding temporary listing of nursing assistants who have received training in another jurisdiction. The rules must permit nursing assistants to work under the supervision of a registered professional nurse in a facility providing assisted living services as defined in chapter 1665 and must recognize work in

those facilities for the purpose of qualifying for and continuing
listing on the registry. Rules adopted regarding the work of
nursing assistants in facilities providing assisted living
services are routine technical rules as defined by Title 5,
chapter 375, subchapter II-A. The board shall submit a report of
the adopted rules to the joint standing committee of the
Legislature having jurisdiction over business-legislation human
resource matters by January 15, 1992.

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Sec. B-3. 22 MRSA  $\S5107$ -A, first  $\P$ , as amended by PL 1993, c. 284,  $\S1$ , is further amended to read:

In accordance with the program established pursuant to section 5106, subsection 11-C, the ombudsman may enter onto the premises of any bearding residential care facility, as defined in section 7901-C, licensed according to section 7801, any assisted living facility licensed pursuant to chapter 1663 or 1665 and any nursing home facility licensed according to section 1817 to investigate complaints concerning those facilities or to perform any other functions authorized by this section or other applicable law or rules. The ombudsman shall investigate complaints received on behalf of individuals receiving long-term care services provided by home-based care programs, the Medicaid waiver program, licensed home health agencies, assisted living services providers, certified homemaker agencies and licensed adult day care agencies. To carry out this function, any staff member or volunteer authorized by the ombudsman may enter onto the premises of any adult--fester residential care facility, bearding-eare assisted living facility or nursing home facility during the course of an investigation, speak privately with any in the facility of--home who consents conversation and inspect and copy all records pertaining to a resident as long as the resident or the legal representative of resident consents in writing to that inspection. consent, when required and not obtainable in writing, may be conveyed orally or otherwise to the staff of the facility ex heme. When a resident is not competent to grant consent and has no legal representative, the ombudsman may inspect the resident's records and may make copies without the written consent of a duly appointed legal representative. The ombudsman may authorize as many individuals as necessary, in addition to staff, to carry out this function except that these individuals may not make copies of confidential client information. Appropriate identification must be issued to all such persons. In accordance with the federal 1987 Older Americans Act, 42 United States Code, amended, a person may not serve as an ombudsman without training as to the rights and responsibilities of an ombudsman or without a specific plan of action under direction of the ombudsman. ombudsman shall renew the authorization and issue identification

annually. The findings of the ombudsman must be available to the 2 public upon request. 4 Sec. B-4. 22 MRSA §5107-A, last ¶, as enacted by PL 1991, c. 622, Pt. QQ, §2, is amended to read: 6 Any person, official or institution that in good faith participates in the registering of a complaint pursuant to this section or in good faith investigates that complaint or provides 10 access to those persons carrying out the investigation about an act or practice in any bearding residential care facility licensed according to section 5154-er 7801, any assisted living 12 facility or program or any nursing home facility licensed according to section 1817 or that participates in a judicial 14 proceeding resulting from that complaint is immune from any civil or criminal liability that otherwise might result from these 16 actions. For the purpose of any civil or criminal proceedings, 18 there is a rebuttable presumption that any person acting pursuant to this section did so in good faith. 20 Sec. B-5. 22 MRSA §7801, sub-§1, ¶A-1 is enacted to read: 22 A-1. In accordance with subparagraphs (1) and (2), a congregate housing services program directly or by contract 24 with an agency providing to its residents any of the 26 following services: personal care assistance, the administration of medication or nursing services. 28 (1) A congregate housing services program may directly 30 provide to its residents meals, housekeeping and chore assistance, case management and personal care 32 assistance delivered on the site of congregate housing without obtaining a separate license to do so. 34 (2) A congregate housing services program licensee may 36 hold at any one time only one license under section 7901-B, subsection 2. A qualified congregate housing 38 services program may obtain a license for a different category under section 7901-B, subsection 2, upon 40 application and surrender of the previous license; Sec. B-6. 22 MRSA §7802, sub-§1, ¶E, as enacted by PL 1993, c. 42 661, §5, is amended to read: 44 A 2-year full license may be issued by the department

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when an individual or agency is licensed as a residential care facility for one or 2 adults or a congregate housing

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2	with licensing rules and has no history of health or safety violations.
4	<pre>Sec. B-7. 22 MRSA §7922, sub-§1, as amended by PL 1993, c. 661, §20, is further amended to read:</pre>
6	<ol> <li>Long-term care facility. "Long-term care facility"</li> </ol>
8	means any residential-care-facility-with-more-than-5-residents program of assisted living licensed pursuant to chapters 1663 and
10	1665, and any skilled nursing er-intermediate-care-facility or unit licensed pursuant to chapter 405.
12	PART C
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16	Sec. C-1. 22 MRSA §2053, sub-§2-C, as enacted by PL 1995, c. 362, §1, is repealed.
18	Sec. C-2. 22 MRSA §2053, sub-§3-A, as amended by PL 1995, c. 452, §1, is further amended to read:
20	3-A. Health care facility. "Health care facility" means a
22	nursing home that is, or will be upon completion, licensed under
24	chapter 405; a residential care facility that is, or will be upon completion, licensed under chapter 1663; a continuing care
24	retirement community that is, or will be upon completion,
26	licensed under Title 24-A, chapter 73; an assisted living
	facility that is, or will be upon completion, licensed under
28	<pre>chapter 1665; a hospital; a community mental health facility; or</pre>
	a community health center.
30	C. C 2 22 MDCA 92072 1.97
2.2	Sec. C-3. 22 MRSA §2053, sub-§5, as amended by PL 1995, c.
32	362, §2, is further amended to read:
34	5. Participating health care facility. "Participating
	health care facility" means a health care or congregate-housing
36	licensed assisted living facility that, pursuant to this chapter,
	undertakes the financing and construction or acquisition of a
38	project or undertakes the refunding or refinancing of existing
	indebtedness as provided in and permitted by this chapter.
40	C C 4 22 MIDCA 22102 22 MIE
42	Sec. C-4. 32 MRSA §2102, sub-§2, ¶F, as amended by PL 1993, c. 600, Pt. A, § 110, is further amended to read:
44	F. Administration of medications and treatment as
46	prescribed by a legally authorized individual. Nothing in this section may be construed as limiting the administration of medication by licensed or unlicensed personnel as
48	of medication by licensed or unlicensed personnel as provided in other laws; and

Sec. C-5. 32 MRSA §2102, sub-§2,  $\P G$ , as enacted by PL 1985, c. 724, §2, is amended to read:

G. Teaching activities of daily living to care providers designated by the patient and family; and

Sec. C-6. 32 MRSA §2102, sub-§2, ¶H is enacted to read:

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H. Coordination and oversight of patient care services provided by unlicensed health care assistive personnel.

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PART D

Sec. D-1. Report of the Commissioner of Human Services. The Commissioner of Human Services shall review the laws and rules on residential care facilities and assisted living programs in consultation with providers of residential care and assisted living services and consumer representatives. In the review, the commissioner shall consider the report due to the joint standing committee having jurisdiction over human resource matters by October 1, 1996 from the commissioner, the Commissioner of Mental Health and Mental Retardation and the State Board of Nursing. By January 1, 1997 the commissioner shall report to the joint standing committee of the Legislature having jurisdiction over human resource matters with the recommendations of the Department of Human Services and any legislation necessary to implement those recommendations.

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Sec. D-2. Report of the Commissioner of Human Services, the Commissioner of Mental Health and Mental Retardation and the State Board of Nursing. By October 1, 1996 the Commissioner of Human the Commissioner of Mental Health Retardation and the State Board of Nursing shall report to the joint standing committee of the Legislature having jurisdiction recommendations resource matters on courses utilization standardization of educational and unlicensed assistive personnel who administer medications in long-term care facilities as defined in the Maine Revised Statutes, Title 22, section 7901-C.

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Sec. D-3. Effective date. With the exception of sections 1 and 2 of this Part and those sections of this Act that repeal the Maine Revised Statutes, Title 22, section 5155 and enact Title 22, section 7916, this Act takes effect January 1, 1997. Those sections of this Act that repeal Title 22, section 5155 and enact Title 22, section 7916 take effect October 1, 1996. Sections 1 and 2 of this Part take effect July 15, 1996.

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#### STATEMENT OF FACT

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Part A of this bill makes changes to the statutes on residential care facilities and repeals the Maine Statutes, Title 22, chapter 1457-A, moving its content to Title 22, chapter 1665 and changing the chapter heading to "Assisted Living Programs." The various types of assisted living programs are defined, including residential care facilities and congregate housing facilities, as are the types of services they may provide. This Part authorizes the Commissioner of Human Services to adopt rules for assisted living programs in consultation with providers, advocates and consumer representatives. changes to the congregate housing services laws, extending the Act to cover younger adults with disabilities as well as the eliminates process of certification Ιt the congregate housing services programs, replacing it with a process of optional licensing for assisted living providers that offer personal care assistance and mandatory licensing for assisted living providers that offer personal care assistance including administration of medication and nursing services. It makes the necessary changes to the licensing laws. It sets the fees for congregate housing programs seeking licenses as assisted living programs. It sets forth fire safety requirements for congregate housing programs operating assisted living programs.

Part B adds to the assisted living facilities that come under the jurisdiction of the long-term care ombudsman. It sets forth requirements for shared staffing in assisted living programs, residential care facilities and long-term care facilities. It extends residents' rights laws to assisted living programs. It allows 2-year licenses for congregate housing services programs. It requires the State Board of Nursing to adopt rules allowing certified nursing assistants to work under the supervision of a registered professional nurse in a facility providing assisted living services.

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Part C amends the provisions of law regarding the Maine Health and Higher Educational Facilities Authority Act to reflect the definition of assisted living adopted in the other provisions of the bill. It makes changes that allow professional nurses to coordinate and oversee patient care services provided by unlicensed personnel.

Part D requires the Commissioner of Human Services, Commissioner of Mental Health and Mental Retardation and the Board of Nursing to develop recommendations standardization of educational courses and utilization of unlicensed assistive personnel who administer medications long-term care facilities. It requires the Commissioner of Human Services to review laws and rules on residential care facilities

- and assisted living programs and make recommendations for legislative changes. It also establishes a general effective
- date of January 1, 1997. The fire safety requirements take 4 effect on October 1, 1996. The provisions requiring reports to the Joint Standing Committee on Human Resources take effect July
- 6 15, 1996.