

## Enhanced Assisted Living Residence Overview

Assisted Living Residences (ALRs) provide a range of settings designed to emphasize personal dignity, individual autonomy, independence, privacy and freedom of choice. As stated in the authorizing statute, ALRs were created to be a clear and flexible structure for congregate residential housing with supportive services.

Choice is designed to be an important component in the daily life of all ALR residents, especially those with greater needs, as in an ALR Enhanced program. The residential setting must be flexible in the provision of services. Not only will the operator have to meet the various needs of a resident population, identified by the assessment process, that may run the range of healthy to very physically frail. The operator will also need to be able to respond to resident choices and employ appropriate medical professionals in sufficient numbers to meet changing resident needs.

An enhanced assisted living certificate means a certificate issued by the department which authorizes an assisted living residence (ALR) to provide aging in place by admitting and retaining residents who desire to continue to age in place and who:

1. Are chronically chairfast and unable to transfer, or chronically require the physical assistance of another person to transfer;
2. Chronically require the physical assistance of another person in order to walk;
3. Chronically require the physical assistance of another person to climb or descend stairs;
4. Are dependent on medical equipment and require more than intermittent or occasional assistance from medical personnel; or
5. Have chronic unmanaged urinary or bowel incontinence.

The submitted plan must contain the specific number of beds requested for aging in place with a narrative explanation of how this number is appropriate in relation to existing beds. Enhanced assisted living beds may “float”, i.e. be allocated within the building as the need arises, but the number of beds designated as enhanced assisted living beds may not exceed the number of beds on the facility’s operating certificate.

Aging in place means care and services at a facility which possesses an enhanced assisted living certificate which, to the extent practicable, within the

scope of services set forth in the written residency agreement, accommodates a resident's changing needs and preferences in order to allow such resident to remain in the residence as long as the residence is able and authorized to accommodate those current and changing needs. A residence that does not possess an enhanced assisted living certificate shall not be deemed able to accommodate a resident's needs if the resident requires or is in need of either enhanced assisted living or 24-hour skilled nursing care or medical care provided by a hospital or residential health care facility.

### Admission and Retention

An operator shall admit, retain and care for only those individuals who do not require services beyond those the operator is permitted to provide. An operator must provide disclosure to consumers and prospective residents as to how many "enhanced" care beds are available. When the number of "enhanced" beds is close to not meeting expected need an operator may request an expedited review by the DOH to expand the number of beds.

#### *Who May Enter and Be Retained:*

A resident shall be permitted to be admitted and continue to reside and age in place within an Enhanced ALR provided: the operator, the resident's physician, and, if applicable, the resident's licensed or certified home care agency agree that the additional needs of the resident can be safely and appropriately met at the residence.

A resident or representative shall submit to the residence a written report from a physician stating that the physician has physically examined the resident within the last month and the resident is not in need of 24-hour skilled nursing care or medical care which would require placement in a hospital or residential health care facility.

A resident who has intermittent nursing needs (less than 24 hours/day) that an ALR Enhanced nurse can perform may be retained. Examples of resident nursing needs may include:

- Eye drops
- Injections
- Catheter care
- Colostomy Care
- PRN medication administration
- Skilled observations which need to be reported to a physician
- Dressing changes, and
- Any other nursing services consistent with the Nurse Practice Act.

If a resident reaches a point where he/she requires 24-hour skilled nursing care, etc), the resident **may remain at the residence only if each of the following conditions is met:**

- Resident hires appropriate nursing, medical, or hospice staff to care for increased needs;
- Resident's physician and home care agency both determine and document that, with the provision of such additional nursing, medical, or hospice care, the resident can be safely cared for in the residence, and would not require placement in a (hospital, nursing home, etc.);
- Operator agrees to retain the resident and to coordinate the care provided by the operator and the additional nursing, medical, or hospice staff; and
- Resident is otherwise eligible to reside at the residence.

*Who May Not Enter and May Not Be Retained:*

An operator shall not accept nor retain any person who:

- Except as noted in detail above, is in need of continual (24 hour) medical or nursing care or supervision;
- Suffers from a serious and persistent mental disability sufficient to warrant placement in a residential facility;
- Requires health or mental health services, which are not available or cannot be provided;
- Causes, or is likely to cause, danger to himself or others;
- Repeatedly behaves in a manner which directly impairs the well-being, care or safety of the resident or other residents, or which substantially interferes with the orderly operation of the facility;
- Has a medical condition which is unstable and which requires continual skilled observation of symptoms and reactions or accurate recording of such skilled observations for the purposes of reporting to the resident's physician;
- Refuses or is unable to comply with a prescribed treatment program, including but not limited to a prescribed medications regimen when such

failure causes, or is likely to cause, in the judgment of a physician, life-threatening danger to the resident or others;

- Is chronically bedfast;
- Suffers from a communicable disease or health condition which constitutes a danger to other residents and staff;
- Engages in alcohol or drug use, which results in aggressive or destructive behavior; or
- Is under 18 years of age.

### Service Provision

In addition to the services required to be provided of an assisted living residence pursuant to an executed residency agreement, a resident of enhanced assisted living may receive health care services provided by staff directly employed by the enhanced assisted living residence or by a licensed home care agency. The enhanced assisted living operator may, but is not required to, obtain licensure or certification pursuant to Article 36 of the Public Health Law, to provide these health care services such as nursing, home health aide, physical therapy, occupational therapy and speech therapy. If an enhanced assisted living residence chooses to provide such services directly, then the operator must have policies and procedures comparable to the policies and procedures of a licensed home care services agency.

Personal care tasks that exceed the approved scope of tasks in which an assisted living resident aide is trained must be performed by a trained home health aides. In addition, an enhanced assisted living residence must provide or arrange for any necessary nursing services for its residents. Such services shall include but not be limited to assessment and evaluations; monitoring and supervision; nursing care and treatments; and medication administration and management.

### Staffing

The operator shall provide sufficient numbers of qualified staff to provide for resident needs and to safely evacuate residents in case of emergency, in accordance with: the resident's medical evaluation and Individualized Service Plan; applicable professional standards of practice; and the requirements of law.

The minimum staffing requirements for an Enhanced Assisted Living Residence can be found on the Department's "Assisted Living" webpage (document titled "Staffing in ALRs, EALRs and SNALRs").

### Structural Requirements

In addition to the safety features required for ALRs (an automatic sprinkler system, a supervised smoke detection system, a fire protection system, handrails, and a centralized emergency call system), an Enhanced ALR must be provided with smoke barriers. In buildings with more than 16 residents, smoke barriers must divide each floor into at least two smoke compartments, each of which must not exceed 100 feet in length. Smoke barriers are a continuous fire-rated partition or wall, extending from one exterior wall to another exterior wall, with all openings (doorways, etc.) protected with fire-rated and smoke-tight doors equipped with appropriate hardware. There must be monthly fire drills for staff and volunteers at varied times during day and night.