

## LCB File No. R108-98

### PROPOSED REGULATION OF THE HEALTH DIVISION

(Workshops for this proposed regulation were held in Reno and Las Vegas on July 2, 1998. It will come before the State Board of Health on August 7, 1998.)

#### **BLC Regulations - Homes for individuals with Developmental Disabilities**

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Authority NRS 449.038 Regulations

Explanation – underlined matter is new; matter in brackets [ ] is material to be deleted.

#### **Section 1. Definitions**

1. As used in (sections 1-12) inclusive, unless the context otherwise requires, the words and terms defined in (section 1) have the meanings ascribed to them in those sections.
2. “Ambulatory” defined. “Ambulatory” means a client who, without the assistance of any other person, is physically and mentally capable of moving himself from the room in which he sleeps to outside the facility in four (4) minutes or less.
3. “Board” defined. “Board” means the Nevada State Board of Health.
4. “Director” defined. “Director” means a person:
  - a. Whose name appears on a license issued by the bureau as director of record for a Home for the Developmentally Disabled; and
  - b. Who is legally responsible for the care of clients and the daily operation of the facility.
5. “Family Member” defined. “Family Member” means a person related to the Director or the owner within the third degree of consanguinity or affinity.
6. “Homes for individuals with Developmental Disabilities” defined. “Homes for people with Developmental Disabilities” means a home for six (6) or fewer clients with mental retardation, funded by the Welfare Division or the Mental Hygiene and Mental Retardation

Division, and certified by the Mental Hygiene and Mental Retardation Division of the Department of Human Resources, herein after referred to as facility. This definition is used by the Bureau of Licensure and Certification for licensing.

7. “Developmental Group Home” defined. “Developmental Group Home” means a home certified by Desert Regional Center, Sierra Regional Center or Rural Mental Retardation Services, located in community neighborhoods serving up to four (4) individuals with mental retardation and related conditions. The homes are typically owned by the caregivers who provide habilitation services in a nuclear family setting. Consumers may be children or adults and typically have few or minor misbehaviors or physical needs that require intervention or training. This definition is used by the Mental Hygiene and Mental Retardation Division for certification.
8. “Private Group Home” defined. “Private Group Home” means a home certified by Desert Regional Center, Sierra Regional Center or Rural Mental Retardation Services, located in community neighborhoods serving up to six (6) individuals, over the age of sixteen (16) who have mental retardation and related conditions. The services are provided through corporate providers who lease or purchase homes and hire group care operators and professional staff. Consumers include persons with multiple or severe misbehavior or physical conditions that require intervention and training. This definition is used by the Mental Hygiene and Mental Retardation Division for certification.
9. “Live-in Facility Staff” defined. “Live-in Facility Staff” means an employee who sleeps at the facility.
10. “Mental Retardation” defined. “Mental Retardation” has the definition ascribed to it in NRS 433.174.

11. “Protective Supervision” defined. “Protective Supervision” means supervision that protects the client’s physical and mental well-being and protects the client from potential dangers.
12. “Restraint” defined. “Restraint” means (a) A psychopharmacologic drug that is used for discipline or convenience and is not required to treat medical symptoms; (b) A manual method for restricting a client’s freedom from movement or his normal access to his body; or (c) A device or material or equipment which is attached to or adjacent to a client’s body that cannot be removed easily by a resident that restricts the client’s freedom of movement or his normal access to his body.

## **Section 2. Requirements for Employees**

1. The facility must maintain a file for each employee. Each employee must have documentation of proof of health certifications in accordance the standards specified by NAC 441A.375.
2. Each employee must have documentation of current First Aid and CPR training certifications.

## **Section 3. Health Requirements**

1. A first aid kit must be available and include, at a minimum:
  - (a) Germicide safe for use by humans
  - (b) Adhesive bandages
  - (c) A thermometer
  - (d) Disposable gloves
  - (e) CPR face shield or mask (including mouthpiece)
  - (f) Sterile gauze pads

2. Medications must be stored in a secure area as follows:
  - (a) Medications for each client must be kept in separate containers that are secured in a locked area or in separate locked boxes. If the Interdisciplinary Team (IDT) has determined that the client can self-manage his medications, that client and the director shall have access to the area in which that particular client's medications are locked.
  - (b) Medications for external use only must be kept in a separate locked area.
  - (c) Medications stored in a refrigerator must be kept in a locked box.
  - (d) Within five (5) days of discontinuance or expiration, medications shall be disposed of by the provider and witnessed by a nurse. The disposal of medications must be documented.
3. The facility must establish and adhere to regular meal times. The facility must serve at least three meals a day at regular intervals when clients are at the facility during meal times. The facility must not allow more than 14 hours to elapse between the meal in the evening and breakfast the next day.
4. Each meal must provide one-third of the daily dietary allowances recommended by the Food and Nutrition Board, National Academy of Sciences and National Research Council. A variety of food choices must be provided and adjusted for seasonal changes.
5. Written documentation of food selections reflecting the client's personal choice and in accordance with subsection 4 must be maintained in the files of the facility for ninety (90) days.
6. If a client has a prescription for special diets and nourishment, the facility must provide an appropriate diet in accordance with the prescription. The facility must maintain documentation of the provision of a special diet.

7. The facility must provide adequate equipment for the preparation, service, and storage of food.
8. The refrigerator must be maintained at a maximum temperature of 40 degrees F (4.44 degrees C) or below. Freezers or freezer compartments must be maintained at a maximum temperature of 0 degrees F (-17.7 degrees C).

#### **Section 4. Fire Safety**

1. Existing facilities licensed for 5 or more clients must install a complete automatic fire sprinkler system on or before July 1, 2000. Facilities for 5 or more clients will not be initially licensed after July 1, 2000 without a complete automatic fire sprinkler system. Automatic fire sprinkler systems must comply with the provisions of Chapter 477 of NRS and any local ordinances relating to the installation of automatic sprinkler systems.
2. The facility must meet the standards of the Nevada State Fire Marshall. A facility may not be licensed until a certificate of occupancy from the Nevada State Fire Marshal has been issued to the facility. A copy of this certificate must be furnished to the Bureau.
3. All windows and doors used as exits must be easily opened and unobstructed. All doors and windows must open from the inside without the use of a key. Security bars are prohibited.
4. Bedroom windows must have a minimum height in dimension of 24 inches, minimum width of 20 inches and sill height of not more than 44 inches from the floor.
5. Facilities must provide exiting from the back yard. No combination locks are allowed on gates. If a lock is used on a gate for security, a key must be hung in an accessible location in the path of egress.

6. The facility must have a smoke detector in every bedroom, common area, laundry room and attached garage. The smoke detectors must be connected to electricity with a functioning back-up battery.
7. The facility must provide at least one portable fire extinguisher for every 75 feet. There must be one fire extinguisher for each floor. The fire extinguisher(s) must be mounted or attached to a wall, operable, annually serviced and tagged by a qualified technician.
8. Emergency numbers must be located near the telephone. A telephone must be accessible to clients for local calls.
9. Fire drills must be conducted monthly and written documentation must be maintained. Fire drills must be conducted at irregular hours in various simulated areas. Fire drills must include familiarization with the evacuation plan.
10. Space heaters or portable heating devices are prohibited.

### **Section 5. Physical Setting**

1. The interior and exterior of the environment must be clean and hazard-free.
2. The facility must provide a minimum of fifteen (15) square feet of common space for each client.
3. Each client must be provided space for storage of at least ten (10) square feet and twenty-four (24) inches of space in a permanent or portable closet for hanging garments.
4. A client may not share a bedroom with more than one other client. A bedroom that is shared by two clients must have at least sixty (60) square feet of floor space for each client. Single occupant bedrooms must have a minimum of one hundred (100) square feet of floor space.

5. Bedrooms must be provided for live-in facility staff and any family members who live at the facility.
6. All bathrooms, bedrooms, and closets equipped with locks must open with a single motion from the inside.
7. All openable windows must be screened against insects. All doors left open to assist with ventilation must also be screened against insects.
8. The facility must maintain comfortable and safe temperature levels within the temperature range of 68 degrees to 82 degrees F.
9. Adequate lighting must be provided in all areas for client use.
10. Appropriate and well-maintained furnishings must be provided. Furniture must be clean and in good repair.
11. The facility must have bathrooms and toilets in sufficient number to accommodate clients, employees, and other persons at the facility.
12. The bottoms of tubs and showers must have surfaces which inhibit falling or slipping.
13. The range of water temperatures in the facility must be safely regulated.

#### **Section 6. Sanitation**

1. The facility must ensure that the physical setting is clean.
2. The facility must provide laundry facilities which ensure that appropriate and sanitary methods are used for handling, cleaning, and storage of personal laundry and linens. The laundry room must be adequate in size and maintained in a sanitary manner. Laundry must always be washed in a manner which will sanitize the laundry either by chemical or heat. Clients' laundry must be protected from co-mingling.

3. Each client must be provided with appropriate bedroom furniture and linens, to include: A bed with a clean and comfortable mattress, made with two clean sheets, sufficient blankets, pillow and pillowcase, and a bedspread. Linens must be changed as necessary but at least once per week.
4. In addition to the provisions of subsection (3), the facility must provide, as necessary, mattress pads and rubber or protective mattress coverings.
5. Each client must have his own toiletries stored in a separate area from other clients, and be provided with toilet paper, individual towels, and wash cloths. (Disposable towels may be used for hand towels.) The use of common wash cloths and towels is prohibited.
6. Containers used to store garbage in the kitchen and laundry room must be covered with a lid unless kept in an enclosed cupboard that is kept clean and rodent and insect free.

### **Section 7. Records**

1. The facility must maintain a separate file for each client. Each file must have documentation of proof of health certifications in accordance with the standards specified by NAC 441A.380.

### **Section 8. Money Handling**

1. An accurate record must be kept of all money deposited with the facility for use by the client, including withdrawals. The record must include:
  - (a) A separate accounting of the money held by the facility on behalf of the client;
  - (b) Receipts for expenditures made by the facility on behalf of the client; and
  - (c) A written acknowledgement by the client or guardian for each withdrawal of the client's money.

2. An employee of a facility must not handle a client's money without first being requested to do so in writing by the client or his representative.
3. An employee of a facility shall not borrow money from a client.

### **Section 9. Client Rights**

1. The facility must maintain conditions in which the clients may exercise the following rights:
  - (a) To be free from abuse, neglect, and exploitation.
  - (b) To speak with advocates.
  - (c) To be treated with respect and dignity.
  - (d) To live in a safe and comfortable environment.
  - (e) Freedom to have social interaction and communication that are without restriction and to engage in private conversation.
  - (f) To be able to lodge a complaint or grievance, and receive a response in a timely manner.
  - (g) To be notified in advance of changes of rooms and/or roommates.
  - (h) To initiate an advance directive and/or power of attorney for health care decisions and to have the wishes contained in such documents complied with.
2. The Director of a facility shall, in addition to the rights described in subsection 1, ensure that each client is afforded all Constitutional rights of an American citizen.
3. The Director of a facility shall maintain and have available a list of the rights described in subsections 1 and 2 in the facility.
4. The Director of a facility shall provide a procedure to respond immediately to grievances, incidents and complaints. The procedure must include a method for ensuring that the

director is notified of the grievance, incident or complaint. The director shall personally investigate the matter. A client who files a grievance or complaint or reports an incident pursuant to this subsection must be notified in writing of the action taken in response to the grievance, complaint or report or be given a reason why no action needs to be taken.

5. A facility must provide the services necessary to treat properly a client in a particular case or must be able to arrange the transfer of the client to another facility which can provide that care. A client may be transferred to another facility only if the client has received an explanation of the need to transfer him and the alternatives available, unless his condition necessitates an immediate transfer to a facility for a higher level of care and he is unable to understand the explanation.

#### **Section 10. Discrimination prohibited.**

1. A client shall not be segregated or restricted in the enjoyment of any advantage or privilege enjoyed by other clients, or provided with any assistance, service or other benefit with is different or provided in a different manner from that provided to others, on the grounds of race, color, national origin, or disability.
2. The facility's policy regarding non-discrimination must be posted in a public area of the facility.

#### **Section 11. Supervision of Clients.**

1. The Director of a facility must provide a staff member on-site at the facility at all times during which a client is on the premises.
2. When a client has been assessed and determined by the Interdisciplinary Team (IDT) to be capable of having unsupervised time at the facility, subsection 1 does not apply for that particular client within the parameters of the IDT's recommendations.

3. The facility shall develop and maintain a written, monthly staffing schedule showing the number of staff assigned for each shift. Any changes must be documented on the schedule . The schedule must be kept on file for 90 days.

## **Section 12. Admission Policies**

1. The facility must have a written policy on admissions which includes:
  - (a) A statement of nondiscrimination regarding admission to the facility and treatment after admission; and
  - (b) The requirements for eligibility as a client.
2. A facility which is not equipped with automatic fire sprinklers shall only admit or retain clients who are ambulatory.
3. A facility shall not admit or retain a client with any of the following conditions:
  - (a) Is bedfast; or
  - (b) Requires confinement in locked quarters; or
  - (c) Requires 24-hour skilled nursing or medical supervision.
4. A facility shall not utilize a restraint for a client, except as indicated in the following subsections:
  - (a) The IDT has assessed and approved through the human rights committee the use of such restraint; and
  - (b) The restraint is used to treat medical or behavioral conditions and is not used for the purpose of convenience.