



## Assisted Living Regulation Overview – Questions and Answers

### Administrator Training

Q. Are current assisted living facility administrators required to take an assisted living administrator training?

A. Assisted Living providers are required to take assisted living administrator training. The department has indicated they will look at waiver exceptions that are looked at on a case by case basis.

Waiver exceptions include:

- Licensed Nursing Home Administrators – in good standing
  - Current license
  - Inactive license
  - Revoked or expired licenses are not eligible for waiver

There will be no other license types considered. The similarity between NHA and ALF is great and an NHA license is issued for a higher level of care therefore is assumed to meet or exceed the requirements of the ALF training.

- Current Assisted Living Administrator with a clean survey history who has passed a state approved competency test and has practiced in NM for more than two years.

Q. Is there a requirement for assisted living facility administrators to obtain continuing education hours and recertify?

A. There is not a requirement in the regulations for continuing education or annual renewal of the ALF administrator license. We do hope that everyone recognizes the need to seek information pertaining to your residents and business.

Q. Where can facilities find an Administrator training program?

A. NMHCA/NMCAL will submit a program for state approval next week. The program will available on-line immediately upon approval.

## Medication Assistance

Q. Our facility uses licensed nurses 24/7. Can they inject insulin?

A. This is a scope of practice issue for the licensed nurses and questions pertaining to what licensed nurses are allowed to do should be directed to the Board of Nursing.

Q. Can facilities admit insulin dependent diabetics?

A. In cases where current or potential residents are insulin dependent, a facility may admit them IF they are capable of self administration. If assistance in administration is required, a facility must have licensed staff to administer the insulin.

Licensed staff includes nurses and certified medication aides (CMA) who have completed the CMA II training and have successfully completed the Board of Nursing certification exam. As of this date the CMA II certification exam is not available. *\*Please note that the CMA and CMA II are regulated by the Board of Nursing and facilities must be approved by the BoN to utilize a CMA or CMA II in their building.*

Q. What title should be used for staff that assist with self administration of medications?

A. This is a very tricky question and the recommendation of NMHCA/NMCAL is that a title is not necessary. Training is required for staff to assist but the regulations require training for dietary purposes, transportation, resident rights, first aide, etc and titles are not usually assigned for each type training the caregiver receives.

The typical terms for these care givers are med techs and med aides. Both of these terms should be avoided by facilities as they imply a higher level of training than staff receive which has caused problems for providers in the past. Please remember that the staff that are assisting with medications are merely trained in what they are allowed to do and not do and receive very basic training. Medication aides receive between 80 and 100 hours of training in pharmacology, body systems, etc. and have passed a certification exam. Med Techs is also a dangerous term as this is confused with Medical Technologist. These “med techs” typically work in acute care settings performing analyses of human blood, urine, and other body fluids or tissues.

The best way to be clear about who is assisting your residents is to simply state “our caregivers have received training in assisting a resident with self administration.”

Ruby Munholland specifically urges facilities to use caution. Surveyors have written deficiencies for using that are confusing and considered misleading to the residents and families.

Q. The regulations state *Training shall be provided at orientation and at least twelve (12) hours annually, the orientation, training and proof of competency shall include: (1) – (10)...*

(11) medication assistance, including the certificate of training for staff that assist with medication delivery; and... Does this require you re-take the full assisting with medication training each year?

- A. According to Ruby Munholland of licensing and certification, the annual in-service trainings should include at least an hour from each topic of updates and therefore does not require retraining each year. Assisting with medications training should address information pertinent to your facility and residents.

## Food Service

Q. Do food temperatures need to be recorded for every meal served?

- A. Food temperatures should be taken during preparation and immediately before serving to ensure food is at the correct temperature. It is not necessary to record the temperature of every plate.

Q. Do food temperatures need to be recorded in a log when the food is located in the resident's room?

- A. No. The temperature logs are only required in the public areas.

## Staffing

Q. A. If your facility is on the same property as another, i.e. nursing home, can you count one of their staff as an available person on-site? B. If the 2 facilities are under one roof, can you count staff as available person on-site?

- A. A. No. The person on-site needs to be immediately available. If the person is in another facility / building then they would not be immediately available to assist with residents. B. The department clarified that mingling staff between facilities types is not recommended for a number of reasons. Federal Surveyors have stated that federal dollars should not be used in any capacity for private pay residents in an assisted living facility. A recent survey revealed that one facility had different residents mingled together and David Rodriguez, Division Director, stated that under no circumstances should this occur.

Q. Will the state issue variances for the 2<sup>nd</sup> caregiver on the night shift for 16 bed facilities?

- A. Waivers can be applied for and will be considered on a case by case basis.

Q. Is first aide required for all caregivers if a licensed nurse is available 24/7?

- A. Yes, it is important for all caregivers to be trained in first aide.

- Q. If we currently have residents with an ostomy, will they have to be discharged if we have already trained staff to care for them? What about if the resident is a hospice patient?
- A. Is the person caring for them licensed to do so? If so, you should have no problem. Hospice residents should have a plan of care which details all involved and what care they will provide for the resident. Trainings should begin after the 180 day grace period.
- Q. Can I count my nurse as the third staff member for the 1 to 15 ratio, if they are assigned direct care duties?
- A. If nurse is doing direct care she can be counted.
- Q. What constitutes waking hours?
- A. This is dependent on each facility and when the residents are awake.

**Miscellaneous Questions:**

- Q. Please define Self Preservation
- A. Resident has to be able to get them self out of the building without any assistance