1	State of Arkansas	A Bill		
2	85th General Assembly	ADIII	HOUSE DILL 2577	
3	Regular Session, 2005		HOUSE BILL 2577	
4	Dry Damesantativa Deadford			
5 6	By: Representative Bradford			
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8		For An Act To Be Entitled		
9	AN ACT TO AMEND THE MINIMUM STAFFING STANDARDS			
10	FOR NURSING FACILITIES; TO ENSURE RESIDENTS CARE			
11		O CLARIFY PENALTIES; AND FOR OTH		
12	PURPOSES			
13				
14		Subtitle		
15	TO AM	END THE MINIMUM STAFFING		
16	REQUI	REMENTS FOR LONG-TERM CARE		
17	FACIL	ITIES.		
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20	BE IT ENACTED BY THE G	ENERAL ASSEMBLY OF THE STATE OF A	ARKANSAS:	
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22		nsas Code § 20-10-1401 is amended	d to read as follows:	
23	20-10-1401. Def			
24	For purposes of	-	0.00	
25		shift" means the period of 7:00 a	_	
26		irect-care staff" means any licer		
27 28		de or licensed nurse who provides sidents in a nursing facility.	s direct, nands-on care	
29	(B)	"Direct-care staff" shall not in	nalude therapy	
30		listed in § 20-10-1404;	nciude therapy	
31		ing shift" means the period of 3:	:00 p.m. to 11:00 p.m.:	
32		ight census" means the number of	-	
33		nursing facility at midnight of		
34	_	t shift" means the period of ll:	•	
35	and	-	·	
36	(6) "Nurs	e aide" means any person who meet	ts the requirements	

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     according to regulations adopted pursuant to (42 C.F.R. § 483.75(e)), as it
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     existed on January 1, 2005; and
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                 (6)(A)(7)(A) "Nursing facility or nursing home" means any
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     buildings, structure, agency, institution, or other place for the reception,
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     accommodation, board, care, or treatment of more than three (3) unrelated
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     individuals, who, because of physical or mental infirmity, are unable to
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     sufficiently or properly care for themselves, and for which reception,
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     accommodation, board, care, and treatment a charge is made.
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                       (B) Provided, the term However, "nursing facility or
     nursing home" shall not include:
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                             (i) the The offices of private physicians and
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     surgeons,;
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                             (ii) boarding Boarding homes,;
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                             (iii) residential Residential care facilities;
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                             (iv) intermediate Intermediate care facilities for
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     the mentally retarded;
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                             (v) hospitals Hospitals;
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                             (v) institutions Institutions operated by the
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     federal government or licensed by the Division of Developmental Disabilities
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     Services; or
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                             (v) any Any facility which that is conducted by and
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     for those who rely exclusively upon treatment by prayer alone for healing in
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     accordance with the tenets or practices of any recognized religious
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     denomination.
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           SECTION 2. Arkansas Code § 20-10-1402 is amended to read as follows:
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           20-10-1402. Standard of care Staffing standards.
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           (a) The Department of Human Services shall not issue or renew a
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     license of a nursing facility or nursing home unless that facility employs
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     the nursing personnel direct-care staff needed to provide continuous twenty-
     four-hour nursing care and service to meet the needs of each resident in of
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     the nursing facility or nursing home and the standard of care as staffing
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     standards required by all state and federal regulations.
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           (b) The staffing standard of care required by this subchapter shall be
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     the minimum standard of care number of direct-care staff required by nursing
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     facilities or nursing homes and shall be adjusted upward to meet the care
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needs of residents. 2 (c) If a facility varies shift hours from the shift hours listed in § 3 20-10-1401, the facility shall meet the staffing requirements for the shift 4 listed in § 20-10-1403. 5 6 SECTION 3. Arkansas Code § 20-10-1403 is amended to read as follows: 7 20-10-1403. Ratio of staff to residents. 8 (a) Effective July 1, 2001, through June 30, 2002, all nursing 9 facilities shall maintain the following minimum direct-care staff-to-resident 10 ratios: 11 (1) One (1) direct care staff to every seven (7) residents for 12 the day shift. Of this direct care staff, there shall be one (1) licensed nurse to every forty (40) residents; 13 (2) One (1) direct-care staff to every ten (10) residents for 14 15 the evening shift. Of this direct-care staff, there shall be one (1) licensed 16 nurse to every forty (40) residents; and 17 (3) One (1) direct-care staff to every sixteen (16) residents for the night shift. Of this direct-care staff, there shall be one (1) 18 19 licensed nurse to every eighty (80) residents. (b) Effective July 1, 2002, through June 30, 2003, all nursing 20 21 facilities shall maintain the following minimum direct-care staffing-to-22 resident ratios: 2.3 (1) One (1) direct care staff to every seven (7) residents for 24 the day shift. Of this direct care staff, there shall be one (1) licensed 25 nurse to every forty (40) residents; 26 (2) One (1) direct-care staff to every nine (9) residents for 27 the evening shift. Of this direct-care staff, there shall be one (1) licensed 28 nurse to every forty (40) residents; and 29 (3) One (1) direct-care staff to every fourteen (14) residents 30 for the night shift. Of this direct-care staff, there shall be one (1) licensed nurse to every eighty (80) residents. 31 32 (e)(a) Effective July 1 October 1, 2003, all nursing facilities shall 33 maintain the following minimum direct-care staffing to resident ratios: 34 (1) One (1) direct-care staff to every six (6) residents for the 35 day shift. Of this direct-care staff, there shall be at least one (1) 36 licensed nurse to every forty (40) residents;

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- 1 (2) One (1) direct-care staff to every nine (9) residents for 2 the evening shift. Of this direct-care staff, there shall be <u>at least</u> one (1) 3 licensed nurse to every forty (40) residents; and
- 4 (3) One (1) direct-care staff to every fourteen (14) residents 5 for the night shift. Of this direct-care staff, there shall be <u>at least</u> one 6 (1) licensed nurse to every eighty (80) residents.
- 7 (b)(1) Licensed direct-care staff shall not be excluded from the
 8 computation of direct-care staff to resident ratios while serving in a
 9 staffing capacity that requires less education and training than is
 10 commensurate with their professional licensure.
- 11 (2) Licensed direct-care staff who serve in a staffing capacity
 12 that requires less education and training than is commensurate with their
 13 professional licensure shall not be restricted from providing direct-care
 14 services within the scope of their professional licensure in order to be
 15 included in the computation of direct-care staff to resident ratios.
- 16 (d)(c) Nursing facilities shall provide in-services training to its
 17 their licensed and certified direct-care staff pursuant to regulations
 18 promulgated by the Office of Long-Term Care.
- (e)(d) Upon any expansion of resident census by the facility, the
 facility shall be exempt from any corresponding increase in staffing ratios
 for a period of nine (9) consecutive shifts from the date of the next day of
 business after the expansion of resident census.
- 23 $\frac{(f)(1)(e)(1)}{(e)(1)}$ The computation of the direct-care minimum staffing 24 ratios shall be carried to the hundredth place.
- 25 (2) If the application of the ratios listed in subsections (a),
 26 (b), and (c) of this section results in other than a whole number of
 27 personnel direct-care staff for a shift or shifts, the number of required
 28 personnel direct-care staff shall be rounded to the next higher whole number
 29 when the resulting ratio, carried to the hundredth place, is fifty-one
 30 hundredths (.51) or higher.
- 31 (3) In no event shall a facility have fewer than one (1) 32 licensed personnel nurse per shift for direct-care staff.
- $\frac{(g)}{(4)}$ All computations shall be based on the midnight census 34 for the day in which the shift or shifts begin.
- 35 <u>(f)(1) Facilities may vary the starting hour and the ending hour for</u> 36 up to twenty-five percent (25%) of the minimum direct-care staff of the day

1	shift, the evening shift, or both, to meet resident care needs.		
2	(2) Before varying the starting hour and the ending hour of		
3	direct-care staff of the day shift or the evening shift, the facility shall		
4	inform the office in writing of:		
5	(A) The resident care needs to be met by the change in		
6	starting and ending times of the shift;		
7	(B) The number of direct-care staff to whom the changes		
8	will apply;		
9	(C) The starting hour and ending hour of the shift for the		
10	direct-care staff to whom the change will apply; and		
11	(D) The length of time the variations will be used if		
12	known.		
13	(3)(A) The facility shall receive written approval from the		
14	office before the facility may vary the starting hour and ending hour of a		
15	shift for selected direct-care staff.		
16	(B) The office may deny approval upon determination that:		
17	(i) The reason for the request to vary the starting		
18	and ending time of a shift for selected direct-care staff does not meet		
19	resident care needs;		
20	(ii) The facility was in a pattern of failure for		
21	any month in the three (3) months immediately preceding the request; or		
22	(iii) The variation will result in a period of more		
23	than two (2) hours in which there is less than the minimum required number of		
24	direct-care staff under § 20-10-1403(a).		
25	(C) The office may revoke approval to vary the starting		
26	and ending time of a shift for selected direct-care staff if the office		
27	determines that:		
28	(i) The approval has resulted in resident care needs		
29	being unmet; or		
30	(ii) The facility is in a pattern of failure.		
31	(4) If a facility varies the starting and ending times for		
32	direct-care staff of the day shift or the evening shift, or both, the		
33	facility shall be deemed to have met minimum staffing requirements for that		
34	shift if the number of direct-care staff whose starting and ending times are		
35	varied and the numbers of direct-care staff whose starting and ending times		
36	are not varied together equal the number of direct-care staff required for		

1	the shift.
2	che shirt.
3	SECTION 4. Arkansas Code § 20-10-1405 is amended to read as follows:
4	20-10-1405. Services provided.
5	(a) An employee designated as a member of the nursing staff shall not
6	be required to provide services such as food preparation, housekeeping,
7	laundry, or maintenance services except as necessary to maintain a safe and
8	sanitary environment.
9	(b) Persons employed to provide the additional services, such as food
10	preparation, housekeeping, laundry, or maintenance services, shall not be
11	counted in determining the staffing ratios required by this subchapter unless
12	the persons are qualified to serve as and specifically scheduled in a direct-
13	care capacity.
14	(c) A person employed to provide additional services shall count
15	toward the direct-care staffing ratios only for the time in which the
16	facility can document that the person provides direct-care services.
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18	SECTION 5. Arkansas Code § 20-10-1406 is amended to read as follows:
19	20-10-1406. Posting of personnel numbers.
20	(a) Each nursing facility or nursing home shall post on each hall,
21	wing, or corridor the number of licensed and unlicensed personnel <u>direct-care</u>
22	staff on duty at each shift. The posting shall consist of a sign-in sheet to
23	be signed by each staff member as the staff member reports to work, and the
24	staff member shall indicate on the sheet the time of departure.
25	(b) The current number of residents on that unit shall be posted at
26	the same place as the staffing report and filed with the staffing report for
27	the same time period.
28	(c) This information shall be posted in a conspicuous place and in a
29	manner which is visible and accessible to all residents, their families,
30	caregivers, and visitors. These records shall be filed and saved by the
31	nursing facility or nursing home until the next survey, and these records
32	shall be available for review by any interested person upon a written

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request.

SECTION 6. Arkansas Code § 20-10-1407 is amended to read as follows: 36 20-10-1407. Report.

(a)(1) By the fifth day of each month, each nursing facility $\frac{\partial F}{\partial F}$ nursing home shall submit a written report of all shifts which failed to meet the minimum staffing requirements of this subchapter during the preceding month to the Office of Long-Term Care.

- (2) Upon determination by the office that a pattern of failure to comply with the provisions of this subchapter has occurred, the nursing facility or nursing home, in addition to the requirements set forth in subdivision (a)(1) of this section, shall submit to the office on a monthly basis a report stating the nursing staff-to-resident ratios for each shift.
- (3) Each nursing facility shall also submit copies of all daily staffing logs for the same months for any reports required under subdivision (a)(1) or subsection (b) of this section.
- (b) If the office has found the nursing facility or nursing home to be out of compliance with § 20-10-1401 et seq., the office, in addition to any other penalties or sanctions imposed, shall prohibit the facility from admitting new residents until the facility is in compliance, pursuant to § 20-10-1408 The failure of a direct-care staff member or members to sign the posted sign-in sheet in accordance with § 20-10-1406 shall not be considered a violation of the staff-resident ratios set forth in § 20-10-1403 if the facility has other documentation that the staff member or members provided direct-care services for the dates and times stated by the facility.
- (c) The failure to meet the requirement regarding the posting of current staff-resident ratios set forth in § 20-10-1406 or the failure to provide staffing reports, logs, or other documentation directly related to minimum staffing standards to the office or the Division of Medical Services is a Class C violation in accordance with § 20-10-206.
- (d) "Pattern of failure" means that a facility did not meet the minimum staffing requirements of this subchapter for more than twenty percent (20%) of the total number of shifts for any one (1) month.
- 30 (e) A facility may regain compliance after a pattern of failure by
 31 establishing that the facility met the minimum staffing requirements of this
 32 subchapter for at least eighty percent (80%) of the shifts during the
 33 preceding month.
 - $\frac{(f)(1)}{(e)(1)}$ The division is authorized to perform <u>staffing</u> audits, including random <u>staffing</u> audits, of nursing facilities or nursing homes to determine and ensure compliance with the requirements of this subchapter.

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                 (2) Facilities shall provide staffing reports, logs, or other
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     documentation directly related to minimum staffing standards upon request of
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     the division.
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           SECTION 7. Arkansas Code § 20-10-1408(a), concerning penalties for a
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     pattern of failure of a nursing facility is amended to read as follows:
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           (a) Upon a determination of a pattern of failure of a facility by the
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     Office of Long-Term Care, the following penalties shall be applied to the
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     facility:
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                 (1) When the pattern of failure is more than twenty percent
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     (20%) but less than twenty-five percent (25%) of the total number of shifts
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     for any one (1) month, the facility shall be assessed a fine of two thousand
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     five hundred dollars ($2,500);
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                 (2) When the pattern of failure is twenty-five percent (25%) or
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     higher, but less than thirty percent (30%) of the total number of shifts for
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     any one (1) month, the facility:
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                       (A) Shall be assessed a fine of five thousand dollars
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     (\$5,000); and
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                       (B)(i) Shall be prohibited from admitting new residents
     beginning the first day of the month following identification of the pattern
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     of failure by the office and continuing until the first day of the month
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     after the office determines that the facility has regained compliance for at
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     least a period of two (2) weeks beginning the next business day after
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     notification by the Office of Long-Term Care to the facility of the pattern
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     of failure and continuing until the next business day after the facility
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     submits a report establishing that the facility was not in a pattern of
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     failure for the time during which the facility was prohibited from admitting
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     new residents.
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                             (ii) If the office subsequently determines that the
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     facility did not meet the minimum staffing standards requirements as alleged
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     in the report from the facility, the office shall prohibit the facility from
     admitting new residents for a period of at least two (2) weeks, and
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     continuing until the next business day after the facility submits a new
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     report establishing that the facility was not in a pattern of failure for the
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     time in which the facility was prohibited from admitting new residents;
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                 (3) When the pattern of failure is thirty percent (30%) or
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1 higher of the total number of shifts for any one (1) month in a three (3) 2 month reporting period, the facility: 3 (A) Shall be assessed a fine of seven thousand five 4 hundred dollars (\$7,500); and 5 (B)(i) Shall be prohibited from admitting new residents 6 beginning the first day of the month following identification of the pattern 7 of failure by the office and continuing until the first day of the month 8 after the office determines that the facility has regained compliance for at 9 least a period of two (2) weeks beginning the next business day after notification by the Office of Long-Term Care to the facility of the pattern 10 11 of failure and continuing until the next business day after the facility 12 submits a report establishing that the facility was not in a pattern of failure for the time during which the facility was prohibited from admitting 13 14 new residents. 15 (ii) If the office subsequently determines that the 16 facility did not meet the minimum staffing standards requirements as alleged 17 in the report from the facility, the office shall prohibit the facility from admitting new residents for a period of at least two (2) weeks, and 18 continuing until the next business day after the facility submits a new 19 20 report establishing that the facility was not in a pattern of failure for the 21 time in which the facility was prohibited from admitting new residents; and 22 (4) If, after five (5) days notice from the office of the 23 imposition of a denial of new admissions, a facility admits new residents 24 during a period in which the facility is prohibited from admitting new 25 residents, the facility shall be assessed a fine of twenty-five thousand 26 dollars (\$25,000) per new resident admitted. 27 28 SECTION 8. Arkansas Code § 20-10-1409(b)(2), concerning staffing 29 standards in nursing facilities, is amended to read as follows: 30 (2) If the Director of the Office of Long-Term Care determines that the minimum staffing standards under §§ 20-10-1403 or 20-10-1404 have at 31 32 any time become insufficient to ensure the health, safety, or welfare of 33 nursing facility or nursing home residents, the office, by regulation, may 34 increase minimum staffing standards or otherwise promulgate regulations to ensure the health, safety, or welfare of the nursing facility or nursing home 35 36 residents.