A Consumer’s Guide to Assisted Living Services and Regulations

Department for Aging and Independent Living
Cabinet for Health and Family Services
Assisted Living in Kentucky – An Overview

Assisted Living in Kentucky differs from almost every other US state in that the Commonwealth’s Assisted Living communities follow a strict social model rather than a medical model. Assisted Living communities in Kentucky provide no health services, other than initial first aid as needed. Kentucky’s Assisted Living communities are certified to provide assistance with activities of daily living (bathing, dressing, grooming... (KRS 194A.700 (1)) and instrumental activities of daily living (housekeeping, shopping, laundry... (KRS 194A.700 (7)). Three meals and snacks are made available each day as well as activities that meet the general preferences of clients, and assistance with self-administration of medication. It is important to note that self-administration of medication means that clients must always have access to their medication and administer their own medication with simple reminders and minimal assistance as outlined in KRS 194A.700 - 194A.729. Staff may not measure dosages, pour pills from a bottle, place pills in client’s hands, administer (“give”) eye drops, give injections or make judgments regarding sliding scale insulin or any other health care or medical matters.

Clients may contract outside of the assisted living community for medical services, which can include but are not limited to physical therapy, occupational therapy, and nursing services. However, clients must always be able to meet the basic qualifying functional criteria to be appropriate for assisted living in Kentucky. Individuals who are eligible to live in assisted living in Kentucky must be ambulatory, or mobile nonambulatory, meaning that clients must be able to walk, or provide for their own mobility using an assistive device such as a walker, wheelchair, or motorized chair (KRS 194A.711 (1)). Clients must also not be a danger to themselves or others (KRS 194A.711 (2)). Eligibility exceptions are temporary health conditions that affect a client’s mobility, but recovery is expected (910 KAR 1:240 Section 1 (10) (a)), or clients whose mobility is affected, without the expectation of recovery, but who are receiving Hospice or other end of life services (910 KAR 1:240 Section 1 (10) (b)). A client receiving Hospice or other end of life services must continue to meet the criteria for assisted-living in that he/she must not be a danger to him/herself or others.

The Department for Aging and Independent Living (DAIL) certifies each assisted living on an annual basis. Certification is distinguished from “licensure” in that since health services are not provided in assisted living in Kentucky, neither professional licensure nor certification is required of any staff member of an assisted living.

Kentucky Revised Statutes (KRS), or Kentucky’s laws, and Kentucky Administrative Regulations (KAR), procedures for carrying out the laws, both have sections that concern assisted living. These laws and regulations provide the guidelines by which assisted living communities operate, and DAIL provides oversight. The assisted living laws in Kentucky are written to meet the crucial needs of a portion of the population. Assisted Living is an important living alternative between total independence and higher levels of residential care. Higher levels of residential care are available for Kentuckians who have additional care needs that can be met in Personal Care Homes, Skilled Nursing Facilities, and Nursing Homes.
The laws primarily addressing assisted living in Kentucky are KRS 194A.700 to 194A.729. Also relevant are KRS 216.595, KRS 216B.015, KRS 216.785, KRS 216.789, KRS 216.793, and KRS 209.030. KRS 194A.700 to 194A.729 define the services allowable in assisted living in Kentucky, and establish requirements including but not limited to living space, criteria to be met by clients, lease agreements, and staff training. KRS 216.595 addresses requirements for those assisted-living communities that offer special programming for persons with Alzheimer’s or related disorders. KRS 216B.015 defines health services that staff in assisted-living communities in Kentucky are not permitted to perform. KRS 216.785, KRS 216.789, and KRS 216.793 refer to criminal records checks of assisted-living employees. Lastly, KRS 209.030 dictates the reporting of suspected abuse, neglect, or exploitation of an adult.

**KRS 194A.700**

**Definitions for 194A.700 – 194A.729**

As used in KRS 194A.700 to 194A.729:

1. “Activities of daily living” means normal daily activities, including bathing, dressing, grooming, transferring, toileting, and eating;
2. “Assistance with self-administration of medication” means:
   a. Reminding the client to take medications;
   b. Reading the medication’s label
   c. Confirming that medication is being taken by the client for whom it is prescribed;
   d. Opening the dosage packaging or medication container, but not removing or handling the actual medication;
   e. Storing the medication in a manner accessible to the client; and
   f. Making available the means of communicating with the client’s physician and pharmacy for prescriptions by telephone, facsimile, or other electronic device;
3. “Assisted-living community” means a series of living units on the same site, operated as one (1) business entity, and certified under KRS 194A.707 to provide services for five (5) or more adult persons not related within the third degree of consanguinity to the owner or manager;
4. “Client” means an adult person who has entered into a lease agreement with an assisted-living community;
5. “Danger” means physical harm or threat of physical harm to one’s self or others;
6. “Health services” has the same meaning as in KRS 216B.015;
7. “Instrumental activities of daily living” means activities to support independent living including but not limited to housekeeping, shopping, laundry, chores, transportation, and clerical assistance;
8. “Living unit” means a portion of an assisted-living community occupied as the living quarters of a client under a lease agreement;
9. “Mobile nonambulatory” means unable to walk without assistance, but able to move from place to place with the use of a device including but not limited to a walker, crutches, or wheelchair; and
10. “Department” means the Department for Aging and Independent Living.

**KRS 194A.703**

**Requirements for living units**

1. Each living unit in an assisted-living community shall:
   a. Be at least two hundred (200) square feet for single occupancy, or for double occupancy if the room is shared with a spouse or another individual by mutual agreement;
   b. Include at least one (1) unfurnished room with a lockable door, private bathroom with a tub or shower, provisions for emergency response,
KRS 194A.703
Requirements for living units (cont’d)

window to the outdoors, and a telephone jack;
(c) Have an individual thermostat control if the assisted-living community has more than twenty (20) units; and
(d) Have temperatures that are not under a client’s direct control at a minimum of seventy-one (71) degrees Fahrenheit in winter conditions and a maximum of eighty-one (81) degrees Fahrenheit in summer conditions if the assisted-living community has twenty (20) or fewer units.

(2) Each client shall be provided access to central dining, a laundry facility, and a central living room.

(3) Each assisted-living community shall comply with applicable building and life safety codes.

KRS 194A.705
Services to be provided to assisted-living community clients

(1) The assisted-living community shall provide each client with the following services according to the lease agreement:
(a) Assistance with activities of daily living and instrumental activities of daily living;
(b) Three (3) meals and snacks made available each day;
(c) Scheduled daily social activities that address the general preferences of clients; and
(d) Assistance with self-administration of medication.

(2) Clients of an assisted-living community may arrange for additional services under direct contract or arrangement with an outside agent, professional, provider, or other individual designated by the client if permitted by the policies of the assisted-living community.

(3) Upon entering into a lease agreement, an assisted-living community shall inform the client in writing about policies relating to the contracting or arranging for additional services.

(4) Each assisted-living community shall assist each client upon a move-out notice to find appropriate living arrangements. Each assisted-living community shall share information provided from the department regarding options for alternative living arrangements at the time a move-out notice is given to the client.

KRS 194A.707
Certification – Administrative regulations – Accreditation by other organizations – Fees – Compliance

(1) The Cabinet for Health and Family Services shall establish by the promulgation of administrative regulation under KRS Chapter 13A, an initial and annual certification review process for assisted-living communities that shall include an on-site visit. This administrative regulation shall establish procedures related to applying for, reviewing, and approving, denying, or revoking certification, as well as the conduct of hearings upon appeals as governed by KRS Chapter 13B.

(2) No assisted-living community shall operate unless its owner or manager has:
(a) Filed a current application for the assisted-living community to be certified by the department; or
(b) Received certification of the assisted-living community from the department.

(3) No business shall market its services as an assisted-living community unless its owner or manager has:
(a) Filed a current application for the assisted-living community to be certified by the department; or
(b) Received certification of the assisted-living community from the department.

(4) The department shall determine the feasibility of recognizing accreditation by other organizations in lieu of certification from the department.

(5) Individuals designated by the department to conduct certification reviews shall have the skills, training, experience, and ongoing education to perform certification reviews.

(6) Upon conducting a certification review, the department shall assess an assisted-living community certification fee in the amount of twenty dollars ($20) per living unit that in the aggregate for each assisted-living community is no less than three hundred dollars ($300) and no more than one thousand six hundred
KRS 194A.707
Certification – Administrative regulations – Accreditation by other organizations – Fees – Compliance (cont’d)

dollars ($1,600). The department shall submit to the Legislative Research Commission, by June 30 of each year, a breakdown of fees assessed and costs incurred for conducting certification reviews.

(7) Notwithstanding any provision of law to the contrary, the department may request any additional information from an assisted-living community or conduct additional on-site visits to ensure compliance with the provisions of KRS 194A.700 to 194A.729.

KRS 194A.709
Delivery of health services by staff – Abuse, neglect, and exploitation of clients, policies and reporting

(1) The department shall report to the Division of Health Care Facilities and Services any alleged or actual cases of health services being delivered by the staff of an assisted-living community.

(2) An assisted-living community shall have written policies on reporting and recordkeeping of alleged or actual cases of abuse, neglect, or exploitation of an adult under KRS 209.030.

(3) Any assisted-living community staff member who has reasonable cause to suspect that a client has suffered abuse, neglect, or exploitation shall report the abuse, neglect, or exploitation under KRS 209.030.

KRS 194A.711
Criteria to be met by clients

A client shall meet the following criteria:

(1) Be ambulatory or mobile nonambulatory, unless due to a temporary health condition for which health services are being provided in accordance with KRS 194A.705 (2) and (3); and

(2) Not be a danger.

KRS 194A.713
Contents of lease agreement

A lease agreement, in no smaller type than twelve (12)-point font, shall be executed by the client and the assisted-living community and shall include:

(1) Client data, for the purpose of providing service, to include:

(a) A functional needs assessment pertaining to the client's ability to perform activities of daily living and instrumental activities of daily living;

(b) Emergency contact person's name;

(c) Name of responsible party or legal guardian, if applicable;

(d) Attending physician's name;

(e) Information regarding personal preferences and social factors;

(f) Advance directive under KRS 311.621 to 311.643, if desired by the client; and

(g) Optional information helpful to identify services that meet the client's needs.

(2) Assisted-living community's policy regarding termination of the lease agreement;

(3) Terms of occupancy;

(4) General services and fee structure;

(5) Information regarding specific services provided, description of the living unit, and associated fees;

(6) Provisions for modifying client services and fees;

(7) Minimum thirty (30) day notice provision for a change in the community's fee structure;

(8) Minimum thirty (30) day move-out notice provision for client nonpayment, subject to applicable landlord or tenant laws;

(9) Provisions for assisting any client that has received a move-out notice to find appropriate living arrangements prior to the actual move-out date;

(10) Refund and cancellation policies;

(11) Description of any special programming, staffing, or training if an assisted-living community is marketed as providing special programming, staffing, or training on behalf of clients with particular needs or conditions;

(12) Other community rights, policies, practices, and procedures;
### KRS 194A.713
**Contents of lease agreement (cont’d)**

(13) Other client rights and responsibilities, including compliance with KRS 194A.705(2) and (3); and

(14) Grievance policies that minimally address issues related to confidentiality of complaints and the process for resolving grievances between the client and the assisted-living community.

### KRS 194A.715
**Duty of assisted-living community to provide consumer information to interested persons**

(1) An assisted-living community shall provide any interested person with a:
   (a) Consumer publication, as approved by the department, that contains a thorough description of Kentucky laws and regulations governing assisted-living communities;
   (b) Standard consumer checklist provided by the department; and
   (c) Description of any special programming, staffing, or training if the assisted-living community markets itself as providing special programming, staffing, or training on behalf of clients with particular needs or conditions.

(2) An assisted-living community may refer a request for information required in subsection (1) (a) of this section to the department.

### KRS 194A.717
**Staffing requirements – Probation against employing staff member with active communicable disease**

(1) Staffing in an assisted-living community shall be sufficient in number and qualification to meet the twenty-four (24) hour scheduled and unscheduled needs of its clients and the services provided.

(2) One (1) awake staff member shall be on site at all times.

(3) An assisted-living community shall have a designated manager who is at least twenty-one (21) years of age, has at least a high school diploma or a General Educational Development diploma, and has demonstrated management or administrative ability to maintain the daily operations.

(4) No employee who has an active communicable disease reportable to the Department for Public Health shall be permitted to work in an assisted-living community if the employee is a danger to the clients or other employees.

### KRS 194A.719
**In-service education for staff and management**

Assisted-living community staff and management shall receive orientation and in-service education on the following topics as applicable to the employee's assigned duties:

1. Client rights;
2. Community policies;
3. Adult first aid;
4. Cardiopulmonary resuscitation;
5. Adult abuse and neglect;
6. Alzheimer's disease and other types of dementia;
7. Emergency procedures;
8. Aging process;
9. Assistance with activities of daily living and instrumental activities of daily living;
10. Particular needs or conditions if the assisted-living community markets itself as providing special programming, staffing, or training on behalf of clients with particular needs or conditions; and
11. Assistance with self-administration of medication.

### KRS 194A.721
**Exemptions from space and bathing facilities requirements for living units of certain assisted-living communities**

(1) Any assisted-living community that was open or under construction on or before July 14, 2000, shall be exempt from the requirement that each living unit have a bathtub or shower.

(2) Any assisted-living community that was open or under construction on or before July 14, 2000, shall have a minimum of one (1) bathtub or shower for each five (5) clients.
KRS 194A.721
Exemptions from space and bathing facilities requirements for living units of certain assisted-living communities (cont’d)

(3) Any assisted-living community that was open or under construction on or before July 14, 2000, shall be exempt from the requirement that each living unit shall be at least two hundred (200) square feet for single occupancy, or for double occupancy if the room is shared with a spouse or another individual by mutual agreement.

KRS 194A.723
Penalties for operating without certification

(1) Any assisted-living community that provides services without filing a current application with the department or receiving certification by the department may be fined up to five hundred dollars ($500) per day.

(2) Any business that markets its services as an assisted-living community without filing a current application with the department or receiving certification by the department may be fined up to five hundred dollars ($500) per day.

KRS 194A.725
Religious orders exempt from KRS 194A.700 to 194A.729

Religious orders providing assistance with activities of daily living, instrumental activities of daily living, and self-administration of medication to vowed members residing in the order's retirement housing shall not be required to comply with the provisions of KRS 194A.700 to 194A.729.

KRS 194A.727
Ineligibility for certification of businesses not in full compliance with KRS 194A.700 to 194A.729

Any business, not licensed or certified in another capacity, that complies with some provisions of KRS 194A.700 to 194A.729 but does not provide assistance with any activities of daily living or assistance with self-administration of medication shall not be eligible for certification as an assisted-living community under KRS 194A.700 to 194A.729.

KRS 194A.729
Requirement for division to provide information to lending institutions relative to financing for assisted-living community projects – Fee

If a person or business seeks financing for an assisted-living community project, the department shall provide written correspondence to the lender, upon request, to denote whether the architectural drawings and lease agreement conditionally comply with the provisions of KRS 194A.700 to 194A.729. The department may charge a fee of no more than two hundred fifty dollars ($250) for the written correspondence to the lender.

KRS 216.595
Requirements for assisted-living communities and long-term care facilities claiming to provide special care for persons with Alzheimer's disease or related disorders

(1) (a) Any assisted-living community as defined by KRS 194A.700, long-term care facility as defined in KRS 216.535, or long-term care facility constructed under KRS 216B.071 that claims to provide special care for persons with a medical diagnosis of Alzheimer's disease or other related disorders shall maintain a written and current manual that contains the information specified in subsection (2) of this section. This manual shall be maintained in the office of the community's or facility's director and shall be made available for inspection upon request of any person. The community or facility shall make a copy of any program or service information contained in the manual for a person who requests information about programs or services, at no cost to the person making the request.

(b) Any advertisement of the community or facility shall contain the following statement: "Written information
KRS 216.595
Requirements for assisted-living communities and long-term care facilities claiming to provide special care for persons with Alzheimer’s disease or related disorders (cont’d)

relating to this community's or facility's services and policies is available upon request."
(c) The community or facility shall post a statement in its entrance or lobby as follows: "Written information relating to this community's or facility's services and policies is available upon request."

(2) The community or facility shall maintain and update written information on the following:

(a) The assisted-living community's or long-term care facility's mission or philosophy statement concerning the needs of residents with Alzheimer's disease or related disorders;
(b) The process and criteria the assisted-living community or long-term care facility uses to determine placement into services for persons with Alzheimer's disease or related disorders;
(c) The process and criteria the assisted-living community or long-term care facility uses to transfer or discharge persons from special services for Alzheimer's or related disorders;
(d) The supervision provided for residents with a medical diagnosis of Alzheimer's disease or related disorders;
(e) The family's role in care;
(f) The process for assessing, planning, implementing, and evaluating the plan of care for persons with Alzheimer's disease or related disorders;
(g) A description of any special care services for persons with Alzheimer's disease or other related disorders;
(h) Any costs associated with specialized services for Alzheimer's disease or related disorders; and
(i) A description of dementia-specific staff training that is provided, including but not limited to the content of the training, the number of offered and required hours of training,

KRS 216B.015
Definitions for chapter

Except as otherwise provided, for purposes of this chapter, the following definitions shall apply:
(13) "Health services" means clinically related services provided within the Commonwealth to two (2) or more persons, including, but not limited to, diagnostic, treatment, or rehabilitative services, and includes alcohol, drug abuse, and mental health services;

KRS 216.785
Definitions for KRS 216.785 to 216.793

As used in KRS 216.785 to 216.793, unless the context otherwise requires:
(1) "Assisted-living community" shall have the same meaning as in KRS 194A.700.
(2) "Crime" means a conviction of or a plea of guilty to a felony offense related to theft; abuse or sale of illegal drugs; abuse, neglect, or exploitation of an adult; or the commission of a sex crime. Conviction of or a plea of guilty to an offense committed outside the Commonwealth of Kentucky is a crime if the offense would have been a felony in Kentucky if committed in Kentucky.
(3) "Direct service" means personal or group interaction between the employee and the nursing facility resident or the senior citizen.
(4) "Nursing pool" means any person, firm, corporation, partnership, or association engaged for hire in the business of providing or procuring temporary employment in nursing facilities for medical personnel including, but not limited to, nurses, nursing assistants, nurses' aides, and orderlies.
(5) "Senior citizen" means a person sixty (60) years of age or older.
KRS 216.789
Prohibition against employing certain felons at long-term care facilities, in nursing pools providing staff to nursing facilities, or in assisted-living communities – Preemployment check with Justice and Public Safety Cabinet – Temporary employment

(1) No long-term care facility as defined by KRS 216.535(1), nursing pool providing staff to a nursing facility, or assisted-living community shall knowingly employ a person in a position which involves providing direct services to a resident or client if that person has been convicted of a felony offense related to theft; abuse or sale of illegal drugs; abuse, neglect, or exploitation of an adult; or a sexual crime.

(2) A nursing facility, nursing pool providing staff to a nursing facility, or assisted-living community may employ persons convicted of or pleading guilty to an offense classified as a misdemeanor if the crime is not related to abuse, neglect, or exploitation of an adult.

(3) Each long-term care facility as defined by KRS 216.535(1), nursing pool providing staff to a nursing facility, or assisted-living community shall request all conviction information from the Justice and Public Safety Cabinet for any applicant for employment pursuant to KRS 216.793.

(4) The long-term care facility, nursing pool providing staff to a nursing facility, or assisted-living community may temporarily employ an applicant pending the receipt of the conviction information.

KRS 216.793
Notice on application form of criminal record check – Form of request – Fee

(1) Each application form provided by the employer, or each application form provided by a facility either contracted or operated by the Department for Mental Health and Mental Retardation Services of the Cabinet for Health and Family Services, to the applicant for initial employment in an assisted-living community nursing facility, or nursing pool providing staff to a nursing facility, or

in a position funded by the Department for Community Based Services of the Cabinet for Health and Family Services or the Department for Aging and Independent Living of the Cabinet for Health and Family Services and which involves providing direct services to senior citizens shall conspicuously state the following: "FOR THIS TYPE OF EMPLOYMENT STATE LAW REQUIRES A CRIMINAL RECORD CHECK AS A CONDITION OF EMPLOYMENT."

(2) Any request for criminal records of an applicant as provided under subsection (1) of this section shall be on a form or through a process approved by the Justice and Public Safety Cabinet or the Administrative Office of the Courts. The Justice and Public Safety Cabinet or the Administrative Office of the Courts may charge a fee to be paid by the applicant or state agency in an amount no greater than the actual cost of processing the request.

KRS 209.030 Administrative regulations – Reports of adult abuse, neglect, or exploitation – Cabinet actions – Status and disposition reports

(1) The secretary may promulgate administrative regulations in accordance with KRS Chapter 13A to effect the purposes of this chapter. While the cabinet shall continue to have primary responsibility for investigation and the provision of protective services under this chapter, nothing in this chapter shall restrict the powers of another authorized agency to act under its statutory authority.

(2) Any person, including but not limited to physician, law enforcement officer, nurse, social worker, cabinet personnel, coroner, medical examiner, alternate care facility employee, or caretaker, having reasonable cause to suspect that an adult has suffered abuse, neglect, or exploitation, shall report or cause reports to be made in accordance with the provisions of this chapter. Death of the adult does not relieve one of the responsibility for reporting the circumstances surrounding the death.

(3) An oral or written report shall be made immediately to the cabinet upon
knowledge of suspected abuse, neglect, or exploitation of an adult.

(4) Any person making such a report shall provide the following information, if known:
   (a) The name and address of the adult, or of any other person responsible for his care;
   (b) The age of the adult;
   (c) The nature and extent of the abuse, neglect, or exploitation, including any evidence of previous abuse, neglect, or exploitation;
   (d) The identity of the perpetrator, if known;
   (e) The identity of the complainant, if possible; and
   (f) Any other information that the person believes might be helpful in establishing the cause of abuse, neglect, or exploitation.

(5) Upon receipt of the report, the cabinet shall conduct an initial assessment and take the following action:
   (a) Notify within twenty-four (24) hours of the receipt of the report the appropriate law enforcement agency. If information is gained through assessment or investigation relating to emergency circumstances or a potential crime, the cabinet shall immediately notify and document notification to the appropriate law enforcement agency;
   (b) Notify each appropriate authorized agency. The cabinet shall develop standardized procedures for notifying each appropriate authorized agency when an investigation begins and when conditions justify notification during the pendency of an investigation;
   (c) Initiate an investigation of the complaint; and
   (d) Make a written report of the initial findings together with a recommendation for further action, if indicated.

(6) (a) The cabinet shall, to the extent practicable, coordinate its investigation with the appropriate law enforcement agency and, if indicated, any appropriate authorized agency or agencies.

   (b) The cabinet shall, to the extent practicable, support specialized multidisciplinary teams to investigate reports made under this chapter. This team may include law enforcement officers, social workers, Commonwealth's attorneys and county attorneys, representatives from other authorized agencies, medical professionals, and other related professionals with investigative responsibilities, as necessary.

(7) Any representative of the cabinet may enter any health facility or health service licensed by the cabinet at any reasonable time to carry out the cabinet's responsibilities under this chapter. Any representative of the cabinet actively involved in the conduct of an abuse, neglect, or exploitation investigation under this chapter shall also be allowed access to financial records and the mental and physical health records of the adult which are in the possession of any hospital, firm, financial institution, corporation, or other facility if necessary to complete the investigation mandated by this chapter. These records shall not be disclosed for any purpose other than the purpose for which they have been obtained.

(8) Any representative of the cabinet may with consent of the adult or caretaker enter any private premises where any adult alleged to be abused, neglected, or exploited is found in order to investigate the need for protective services for the purpose of carrying out the provisions of this chapter. If the adult or caretaker does not consent to the investigation, a search warrant may be issued upon a showing of probable cause that an adult is being abused, neglected, or exploited, to enable a representative of the cabinet to proceed with the investigation.

(9) If a determination has been made that protective services are necessary when indicated by the investigation, the cabinet shall provide such services within budgetary limitations, except in such cases where an adult chooses to refuse such services.
In the event the adult elects to accept the protective services to be provided by the cabinet, the caretaker shall not interfere with the cabinet when rendering such services.

The cabinet shall consult with local agencies and advocacy groups, including but not limited to long-term care ombudsmen, law enforcement agencies, bankers, attorneys, providers of nonemergency transportation services, and charitable and faith-based organizations, to encourage the sharing of information, provision of training, and promotion of awareness of adult abuse, neglect, and exploitation, crimes against the elderly, and adult protective services.

(a) By November 1 of each year and in accordance with state and federal confidentiality and open records laws, each authorized agency that receives a report of adult abuse, neglect, or exploitation shall submit a written report to the cabinet that provides the current status or disposition of each case referred to that agency by the cabinet under this chapter during the preceding year. The Elder Abuse Committee established in KRS 209.005 may recommend practices and procedures in its model protocol for reporting to the cabinet under this section.

(b) By December 30 of each year, the cabinet shall provide a written report to the Governor and the Legislative Research Commission that summarizes the status of and actions taken on all reports received from authorized agencies and specific departments within the cabinet under this subsection. The cabinet shall identify any report required under paragraph (a) of this subsection that is not received by the cabinet. Identifying information about individuals who are the subject of a report of suspected adult abuse, neglect, or exploitation shall not be included in the report under this paragraph. The report shall also include recommendations, as appropriate, to improve the coordination of investigations and the provision of protective services. The cabinet shall make the report available to community human services organizations and others upon request.

**Kentucky Administrative Regulation for Assisted Living**

**910 KAR 1:240**

Certification of assisted-living communities

RELATES TO: KRS Chapter 13B, 17.165(1), (2), 194A.060(1), 194A.700-729, 209.030, 216.300(1), 216.595, 216.789, 216.793

STATUTORY AUTHORITY: KRS 194A.050 (1), 194A.707 (1)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 194A.707 (1) requires the cabinet to promulgate an administrative regulation establishing an initial and annual certification review process for assisted-living communities that shall include an on-site visit and procedures related to applying for, reviewing, and approving, denying, or revoking certification, as well as the conduct of hearings.
This administrative regulation establishes the certification process for assisted-living communities.

### Section 1
**Definitions**

1. "Applicant" means the owner or manager who represents a business seeking initial or annual certification as an assisted-living community.
2. "Activities of daily living" is defined by KRS 194A.700 (1).
3. "Assisted-living community" is defined by KRS 194A.700 (3).
4. "Client" is defined by KRS 194A.700 (4).
5. "Certification review" means the process of reviewing applications and issuing certification for an assisted-living community.
6. "Danger" is defined by KRS 194A.700 (5).
7. "Functional needs assessment" means the client data required by KRS 194A.713 (1) to be in a lease agreement.
8. "Instrumental activities of daily living" is defined by 194A.700 (7).
9. "Living unit" is defined by KRS 194A.700 (8).
10. "Temporary health condition" means a condition that affects a client and for which health services are being provided as referred to in KRS 194A.711; and
    (a) The client loses mobility either before or after entering a lease agreement with the assisted-living community but is expected to regain mobility; or
    (b) The client loses mobility after entering a lease agreement and is not expected to recover and the provided health services are hospice or similar end-of-life services.

### Section 2
**Application for Initial Certification Review**

1. For initial certification an applicant shall, within at least sixty (60) days prior to a planned opening, file with the department:
   (a) A completed DAIL-ALC-1, Assisted-Living Community Certification Application;
   (b) A copy of a blank lease agreement and any documentation incorporated by reference into the lease agreement;
   (c) A copy of written material used to market the proposed assisted-living community, including material that markets offered special programming, staffing, or training in accordance with KRS 194A.715(1)(c);
   (d) The floor plan of the proposed assisted-living community identifying the:
      1. Living units, including features that meet the requirements of KRS 194A.703(1);
      2. Central dining area;
      3. Laundry facility; and
      4. Central living room; and
   (e) A nonrefundable certification fee:
      1. Assessed by the department in accordance with KRS 194A.707(6);
      2. Made payable to the Kentucky State Treasurer; and
      3. Mailed to the Department for Aging and Independent Living, 275 East Main Street, Frankfort, Kentucky 40621.

2. If an initial certification becomes effective on a date other than July 1, the certification fee shall be prorated by:
   (a) Calculating the fee for a year by computing twenty (20) dollars per living unit or the $300 minimum set forth in KRS 194A.707(6), whichever is greater, but no more than the $1600 maximum set forth in KRS 194A.707(6);
   (b) Dividing the yearly fee by twelve (12) to obtain a monthly fee; and
   (c) Multiplying the monthly fee by the number of months remaining until the annual renewal on July 1.

### Section 3
**Application for Annual Certification Review**

1. The department shall renew a certification if an assisted-living community:
   (a) Has obtained its initial certification in accordance with Section 5 of this administrative regulation; and
Section 3
Application for Annual Certification
Review (cont’d)

(b) Submits to the department annually by July 1:
1. A completed DAIL-ALC-1, Assisted-Living Community Certification Application;
2. The documentation required by Section 2 (1) (a) through (d) of this administrative regulation, if changes have occurred since the previous certification; and
3. The nonrefundable certification fee required by Section 2(e) of this administrative regulation.

(2) If an annual certification is due after the effective date of this administrative regulation and before or after the required annual certification date, the certification fee shall be prorated as specified in Section 2 (2) (a) and (b) of this administrative regulation.

Section 4
Change in an Assisted-Living Community

(1) If there is an increase in the number of living units, an assisted-living community shall reapply for certification with the department:
(a) In accordance with Section 2(1) of this administrative regulation; and
(b) Not less than sixty (60) days prior to the increase.

(2) If the increase in units occurs before or after the required annual certification date, the certification fee shall be twenty (20) dollars per each additional unit prorated in accordance with Section 2(2) of this administrative regulation.

(3) If there is a decrease in the number of living units, an assisted-living community shall notify the department within sixty (60) days of the decrease.

(4) If there is a change of more than fifty (50) percent interest in ownership of an assisted-living community, the new owner shall apply for certification:
(a) By following the procedures in Section 3 of this administrative regulation; and
(b) Within thirty (30) days of the change of owners.

(5) An assisted-living community shall:
(a) Notify the department in writing:
1. Within thirty (30) days of a name or mailing address change for the assisted-living community or the applicant; or
2. At least sixty (60) days prior to termination of operation; and
(b) Notify a client of termination of operation sixty (60) days prior to closure unless there is sudden termination due to:
1. Fire;
2. Natural disaster; or
3. Closure by local, state, or federal agency.

Section 5
Initial Certification of an Assisted-Living Community

If department staff determines that an applicant for initial certification meets the application requirements specified in Section 2 (1) of this administrative regulation, the department shall:
(1) Consider the application process complete;
(2) Notify the applicant of operation status within ten (10) business days of receipt of the completed DAIL-ALC-1, Assisted-Living Community Certification Application; and
(3) Conduct an on-site review.

Section 6
Annual Certification of an Assisted-Living Community

If department staff determines that an applicant for annual certification meets the application requirements specified in Section 3(1) of this administrative regulation, the department shall:
(1) Consider the application process complete; and
(2) Conduct an unannounced on-site review within one (1) year of receipt of the DAIL-ALC-1, Assisted-Living Community Certification Application.
Section 7
On-Site Review of an Assisted-Living Community

(1) (a) A representative of the department conducting a certification review shall not disclose information made confidential by KRS 194A.060 (1).  
(b) A confidential interview with a client or access to a client’s living unit shall be subject to the client’s oral or written consent.

(2) The on-site review shall consist of:
(a) Review of employment records including:
   1. An employment application that shall contain a criminal record check notice pursuant to KRS 216.793(1);  
   2. A criminal records check that shall be:
      a. Requested in accordance with KRS 216.789(3); and  
      b. Applied for within seven (7) days from date of an employee’s hire;  
   3. Verification that an employee reads and agrees to the policy and procedures of the assisted-living community regarding communicable disease pursuant to KRS 194A.717(4); and  
   4. Documentation of:
      a. Completion of employee orientation within ninety (90) days of the date of hire; and  
      b. In-service education:
         (i) Pursuant to KRS 194A.719; and  
         (ii) Provided on an annual basis;  
(b) Verification of compliance with KRS 194A.703;  
(c) Review of client records including:
   1. A completed client functional needs assessment to ensure that the client met the eligibility requirements for assisted-living pursuant to KRS 194A.711 prior to finalizing a lease agreement;  
   2. A functional needs assessment that reflects a client’s ongoing ability pursuant to KRS 194A.711 to perform activities of daily living and instrumental activities of daily living;  
   3. Current personal preferences and social factors; and  
   4. A signed lease with all attachments;  
(d) Review of an assisted-living community’s policies and procedures for compliance with KRS 194A.700 through 194A.729 using a DAIL-ALC-2, Assisted-Living Community Certification Checklist;  
(e) Review of an assisted-living community’s written service provision and practices related to:
   1. Provisions of KRS 194A.705;  
   2. Health services, delivered by assisted-living staff, which shall be reported in compliance with KRS 194A.709(1);  
   3. Documentation in a client's file:
      a. From a licensed health care professional defined by KRS 216.300(1) or entity providing the health service pursuant to KRS 194A.711:
         (i) Requested of the client by the assisted-living community; and  
         (ii) That states the client has a temporary health condition pursuant to KRS 194A.711(1); and  
      b. From the assisted-living community to ensure that the client is not a danger, including if hospice or similar end-of-life services are provided; and  
   4. Compliance with KRS 194A.713(11), 194A.715(1)(c), 194A.719(10), and 216.595 regarding special programming, staffing, or training that may be provided to a client of an assisted-living community provided the assisted-living community:
      a. Ensures a client’s functional needs assessment that:
         (i) Reflects the client’s ongoing abilities as specified in paragraph (c)2 of
Section 7
On-Site Review of an Assisted-Living Community (cont’d)

this subsection; and
(ii) Shall be updated at least annually; and
b. Complies with the requirements of KRS 216.595; and
(f) Review of any documentation or records to ensure compliance pursuant to KRS 194A.707 (7).

(3) The department may, pursuant to KRS 194A.707 (7), request additional information to ensure an assisted-living community complies with KRS 194A.700-729 and 216.789(1).

(4) Prior to completion of the on-site visit at the assisted-living community, a department representative shall hold a meeting with the assisted-living community manager or designee to discuss the preliminary results of the on-site visit.

Section 8
Assisted-living On-Site Review Findings

(1) The department shall:
(a) Document any noncompliance with KRS 194A.700 through 194A.729 or this administrative regulation found during an on-site review on the DAIL-ALC-2, Assisted-Living Community Certification Checklist; and
(b) Submit the finding of noncompliance to the applicant:
   1. On a statement of noncompliance located on the DAIL-ALC-3, Statement of Noncompliance and Plan of Correction; and
   2. Unless the finding is due to a client being a danger pursuant to subsection (9) of this section, within fifteen (15) business days upon completion of the on-site review.

(2) The assisted-living community shall complete a plan of correction on the DAIL-ALC-3, Statement of Noncompliance and Plan of Correction and submit the form to the department within fifteen (15) business days of receipt of the notice of noncompliance.
(b) The assisted-living community shall specify in the plan the dates by which the noncompliance shall be corrected.

(3) The department shall notify the applicant in writing within fifteen (15) business days of receipt of the plan of correction:
(a) Whether the plan of correction is approved or not approved; and
(b) The reasons for the department’s decision.

(4) (a) If the plan of correction is approved and the department determines a follow-up on-site review is unnecessary, the department shall issue a certification certificate.
(b) The assisted-living community shall post the certificate in a public area.

(5) If the plan of correction is not approved, the applicant shall submit to the department an amended plan of correction within fifteen (15) business days of receipt of notice the plan was not approved.

(6) If the department determines after reviewing the amended plan of correction that certification may be denied or revoked, the department shall notify the assisted-living community within ten (10) business days of the determination and with the:
(a) Opportunity for an informal dispute resolution meeting:
   1. Between the:
      a. Department; and
      b. The assisted-living community;
   2. To be held within fifteen (15) days of the assisted-living community’s receipt of the notice; and
   3. To address a dispute, including the provision of additional documentation or support materials; and
(b) Appeal rights as specified in Section 11 of this administrative regulation if:
   1. An informal dispute is not requested; or
   2. A dispute is not resolved with the informal dispute resolution.

(7) If an applicant meets all the requirements on the DAIL-ALC-2, Assisted-Living Community Certification Checklist, the
### Section 8

**Assisted-living On-Site Review Findings (cont’d)**

- The department shall issue a certification certificate verifying its status.
- The assisted-living community shall post the certification certificate in a public area.
- If the department finds during a complaint or certification review that a client is a danger, the department shall:
  - **(a)** Immediately notify the assisted-living community as established in Section 7(4) of this administrative regulation; and
  - **(b)** Provide the DAIL-ALC-4, Statement of Danger to the assisted-living community.
- Within forty eight (48) hours, unless issued on a Friday and then by 4:30 p.m. eastern standard time of the next business day, of receiving the DAIL-ALC-4, Statement of Danger, the assisted-living community shall begin to implement a plan to correct the danger in accordance with Section 9(2)(e)1 or 2 of this administrative regulation.
- The department shall make a report of suspected abuse, neglect, or exploitation to Adult Protective Services in accordance with KRS 209.030 (3).
- The department may conduct additional on-site visits pursuant to KRS 194A.707(7).

### Section 9

**Denial and Revocation of Certification**

- Certification shall be denied or revoked if:
  - **(a)** The department determines upon a complaint or certification review that an assisted-living community knowingly employs any individual convicted of an offense prohibited by KRS 216.789(1) or 216.789(2) as disclosed by the individual’s employment application or a criminal records check and if the assisted-living community fails to immediately terminate the employment upon the department’s finding; or
  - **(b)** An assisted-living community or applicant fails to submit a plan of correction to the department as specified in Section 8(2) through (7) of this administrative regulation.
- Certification may be denied or revoked if an assisted-living community:
  - **(a)** Fails to apply for certification as specified in Sections 2(1), 3(1), or 4(1) of this administrative regulation; and
  - **(b)** Submits a completed DAIL-ALC-1, Assisted-Living Community Certification Application more than fifteen (15) days late for two (2) consecutive years;
  - **(c)** Fails to submit a completed DAIL-ALC-1, Assisted-Living Community Certification Application within thirty (30) days of July 1 annually;
  - **(d)** Fails to implement its most recent approved plan of correction:
    - **1.** Under current ownership; and
    - **2.** Within the plan of correction’s specified timeframe on the DAIL-ALC-3, Assisted-Living Community Statement of Noncompliance and Plan of Correction;
  - **(e)** Fails to comply with one (1) of the following requirements if the department finds that a client is a danger and the department initially verifies those findings in writing pursuant to Section 8(9) of this administrative regulation:
    - **1.** Within forty eight (48) hours, unless issued on a Friday and then by 4:30 p.m. eastern standard time of the next business day, of receiving the DAIL-ALC-4, Statement of Danger, the assisted-living community shall submit a written response to the department that confirms how the danger has been eliminated or why the danger is disputed, with submission occurring via:
      - a. Email;
      - b. Facsimile transmission;
Section 9
Denial and Revocation of Certification (cont’d)

c. Delivery to the department by hand;
d. United States mail; or
e. Courier service; or

2. Within forty eight (48), unless issued on a Friday and then by 4:30 p.m. eastern standard time of the next business day, of receiving the DAIL-ALC-4, Statement of Danger, the assisted-living community shall:
   a. Initiate a move-out notice and begin the process of assisting the client to find appropriate living arrangements pursuant to KRS 194A.705(4); and
   
   b. Submit a written response to the department that confirms the assisted-living community took the required action, with submission occurring via:
      (i) Email;
      (ii) Facsimile transmission;
      (iii) Delivery to the department by hand;
      (iv) United States mail; or
      (v) Courier service; or

(f) Except as provided in subsection (3) of this section, fails to initiate the requirements of paragraph (e)2 of this subsection, if the department:
   1. Notifies the assisted-living community in writing that the client remains a danger; and
   2. Does not accept the assisted-living community’s written response pursuant to paragraph (e)1 of this subsection.

(3) If, after reviewing the assisted-living community’s written response pursuant to subsection (2)(e)1 of this section, the department determines the client remains a danger, the department shall notify the assisted-living community in writing that:

(a) Certification may be denied or revoked;
(b) The assisted-living community has the right to an informal dispute resolution meeting:
   1. Between the department and the assisted-living community;
   2. For the purpose of attempting to resolve a dispute, including the provision of additional documentation or support materials; and
   3. To be requested by the assisted-living community in writing within three (3) business days of receiving the department’s written notice; and

(c) It has appeal rights pursuant to Section 11 of this administrative regulation if:
   1. An informal dispute resolution meeting is not requested; or
   2. A dispute is not resolved with the informal dispute resolution meeting.

(4) The department shall issue a written notice to the assisted-living community if the department determines:

(a) 1. A danger is unsubstantiated; or
    2. The danger has been eliminated; or

(b) To deny or revoke certification following an informal dispute resolution meeting pursuant to subsection (3)(b) of this section.

(5) (a) If an assisted-living community continues to operate after its certification is revoked and fails to request an informal dispute resolution meeting or an administrative hearing pursuant to Section 11 of this administrative regulation to resolve a danger dispute, the assisted-living community may be fined in accordance with KRS 194A.723(1).

(b) The fine shall be paid as specified in Section 10(1) of this administrative regulation.

Section 10
Collection of Fees and Fines

(1) An entity or business found to be in violation of KRS 194A.723 and assessed a penalty shall make a check payable to the
Section 10
Collection of Fees and Fines (cont’d)

Kentucky State Treasurer and mail it to the Department for Aging and Independent Living, 275 East Main Street, Frankfort, Kentucky 40621.

(2) A party aggrieved by a determination of the department may appeal the determination or the fine in accordance with KRS Chapter 13B.

(3) The fee established for the notification of conditional compliance to a lender after review of the architectural drawings and lease agreement, pursuant to KRS 194A.729, shall be $250.

Section 11
Right to Appeal Decision and Hearings

(1) If the department determines that a certification shall be denied or revoked, the applicant shall be notified of the right to appeal the determination:
   (a) By certified mail; and
   (b) Within ten (10) days of determination.

(2) To request an administrative hearing, an applicant shall send a written request to the department within thirty (30) days of receipt of a written notice of:
   (a) Nonapproval of the amended plan of correction; or
   (b) Denial or revocation of certification.

(3) After receipt of the request for a hearing, the cabinet shall conduct a hearing pursuant to KRS Chapter 13B.

(4) The denial or revocation of certification shall be effective upon the final decision of the secretary pursuant to KRS Chapter 13B.

(5) If the denial or revocation is upheld by the secretary, the assisted-living community shall cease to operate and the assisted-living community shall:
   (a) Assist clients in locating alternate living arrangements pursuant to KRS 194A.705(4); and
   (b) Ensure that all clients are relocated within thirty (30) days of final notice of revocation or denial.

(6) The commissioner of the department shall have the authority to extend the time limit specified in subsection 5(b) of this section, not to exceed an additional fifteen (15) days.

Section 12
Incorporated by Reference

(1) The following material is incorporated by reference:
   (a) "DAIL-ALC-1, Assisted-Living Community Certification Application", edition 11/07;
   (b) "DAIL-ALC-2, Assisted-Living Community Certification Check List", edition 2/09;
   (c) "DAIL-ALC-3, Assisted-Living Community Statement of Noncompliance and Plan of Correction", edition 2/09; and
   (d) "DAIL-ALC-4, Statement of Danger, edition 2/09.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Department for Aging and Independent Living, 275 East Main Street, Frankfort, Kentucky 40621, Monday through Friday, 8 a.m. to 4:30 p.m.
Can someone help me take my medication?
Yes, to an extent. If you ask, employees can assist you in taking your medication. They can remind you to take your medication, read the labels, help open your medication containers, and help store your medication. However, employees cannot touch or give you the actual pills or liquid, give injections, or provide advice about your medication. You must arrange with an outside agency or person for those services, i.e., a pharmacist, doctor, home health agency, another health professional or another qualified person of your choice.

Do Medicare and/or Medicaid pay for services in an Assisted Living Community in Kentucky?
No. Assisted Living Communities in Kentucky are social models and do not provide health services. However, you might qualify for Medicare and/or Medicaid coverage for health care services you are receiving from an outside licensed health care agency.

Do long-term care insurance policies pay for services in Assisted Living Communities?
Some long-term care insurance policies provide coverage for services in Assisted Living Communities. However, because coverage provisions vary, carefully read and compare policies before purchase. For more information, you may contact the Kentucky Department of Insurance at (502)564-6088 to request a copy of their guide for selecting a long-term care insurance policy, or contact the Kentucky Assisted Living Facilities Association (KALFA) at (502)225-5201 or toll free at 1-877-905-2001.

Can someone with Alzheimer’s, Dementia or Parkinson’s disease live in an Assisted Living Community?  
Yes. Some Assisted Living Communities have special program units that accommodate the needs of clients with Alzheimer’s, Dementia or Parkinson’s. However, individuals would need to meet the client criteria for assisted living. In addition, Assisted Living Communities are required to ensure staff receives specialized training when these services are marketed to the public.

How much assistance can the staff of an Assisted Living Community (ALC) provide with Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs)?
In an Assisted Living Community, clients are expected to assist with their own ADLs and IADLs. Staff can provide assistance but not total care. For example, assistance with transferring may entail one staff person supporting the client by her elbow as she moves from chair to bed. It would not entail a weight-bearing lift.

What is considered a “temporary health condition” in Assisted Living?
Assisted Living Communities only document temporary health conditions when they affect mobility. A client in an ALC is expected to be ambulatory or mobile nonambulatory as part of the criteria to live in an ALC community. For example, if a client breaks a hip and is temporarily immobile, the client would temporarily not meet the criteria. However, if the client presents documentation from a medical provider that he or she is expected to regain mobility, and a safety plan around
emergency evacuations is put into place and documented in the client’s file, the client could remain in the ALC and receive rehabilitation services from an outside provider.

What does “Not be a danger” mean as part of the eligibility criteria?
“A danger” may be interpreted in several ways. A client who becomes combative or abusive toward staff or other clients would pose a danger to others. Another interpretation of danger might center on a client putting herself or others at-risk due to an inability to self-evacuate in the event of a fire, tornado, or other emergency. A third example may be a client with mild dementia who would put himself at risk due to a tendency to wander off the premises and get lost. Any of these situations could call the “not be a danger” criteria into question and result in a move-out notice.

If I try living in Assisted Living but am not happy there, can I get my money back and move out?
This depends on your lease agreement. The lease is a binding contract. All ALC leases are required to state the terms of occupancy, as well as the refund and cancellation policies. Consumers are encouraged to read the complete lease and ask any questions prior to signing.
Consumer Checklist for Selecting an Assisted Living

Choosing an Assisted Living Community that fits your personal preferences and care needs can be a challenging and sometimes overwhelming process. This checklist was designed to assist you as a consumer in identifying a quality residence that meets not only the requirements but also “best practices” of an Assisted Living Community in Kentucky.

An asterisk follows a checklist item that addresses a requirement under Kentucky law or regulation (*).

ASSISTED LIVING COMMUNITY CERTIFICATION

☐ The Assisted Living Community has received or applied for Certification by the Department for Aging and Independent Living (DAIL) and information is available for my review*

SERVICES OFFERED BY THE ASSISTED LIVING COMMUNITY

☐ Assistance with activities of daily living including bathing, dressing, grooming, mobility assistance, toileting and eating*

☐ Assistance with instrumental activities of daily living which includes, but is not limited to, housekeeping, shopping, laundry, chores, transportation and clerical assistance*

☐ Three meals and snacks made available each day*

☐ Scheduled daily social activities that address my general preferences *

☐ Assistance with self-administration of medication*

ATMOSPHERE

☐ This is a convenient location

☐ The grounds and décor are attractive and well maintained

☐ The employees treat visitors, clients and other employees in a friendly manner

☐ Clients socialize with each other and appear happy

☐ Visitors are welcome in the Assisted Living Community

COMMUNITY FEATURES

☐ Individual living units (i.e. apartments) are at least 200 square feet (exceptions allowed)*

☐ Each living unit has a private bathroom (exceptions allowed)*

☐ Each living unit has a lockable door*

☐ There is a window to the outdoors in each living unit*

☐ A telephone jack is available in each living unit*

☐ There are provisions for emergency response in each living unit (i.e. pull cord, alarm, etc.)*

☐ Each living unit has thermostat control (exceptions allowed)*

☐ Access to a laundry facility is provided*

☐ Central dining is available*

☐ There is a common living room area*

☐ Doorways, hallways and living units accommodate wheelchairs and walkers

☐ Elevators are available if the Assisted Living Community has more than one story

☐ There is a kitchenette with a refrigerator, sink and microwave in each living unit

☐ Clients have access to individual snacks at their discretion

☐ There is good natural and artificial lighting

☐ It is easy to find my way around the community

☐ Clients can bring furniture and furnishings

☐ It is possible to share a room with a spouse or another individual under mutual agreement
LEASE AGREEMENT
The lease agreement is a contract between the client and the Assisted Living Community. It must be made available to the client for review before signing, and be printed in 12-point type.

Client information must include:
- An assessment of my ability to perform activities for daily living and instrumental activities of daily living*
- Emergency contact person’s name*
- Name of responsible party or legal guardian*
- Attending physician’s name*
- Personal and social preferences*
- Advance directive if I choose*
- Other information that would help meet my needs*

Other information required:
- Policy regarding termination of the lease agreement*
- Terms of occupancy*
- General services and fee structure*
- Information about specific services provided, description of the living unit and fees*
- Minimum 30-day notice for a change in fees*
- Minimum 30-day move-out notice for nonpayment*
- Assistance in finding appropriate living arrangements prior to actual move-out date*
- Refund and cancellation policies*
- Description of any special programming, staffing or training*
- Other community rights, policies, practices and procedures*
- Written policies about contracting or arranging to receive additional services from an outside agency or individual*
- Grievance policies related to complaints*

EMPLOYEE QUALIFICATIONS AND REQUIREMENTS
- The Assisted Living Community has a designated manager with management or administrative ability*
- There is sufficient staff to meet the 24-hour scheduled and unscheduled needs of clients*
- Criminal records checks are applied for within seven days of hire on all employees*
- Employee orientation and in-service education is completed within 90 days of employment*
- No employee who has an active communicable disease is permitted to work*

FOOD SERVICES
- Three meals and snacks are made available seven days a week*
- Meals and snacks should be nutritionally balanced
- Individual food requests are accommodated by the community
- The meal schedule and menus are posted

SOCIAL, RECREATIONAL & SPIRITUAL ACTIVITIES
- There is an activities program that addresses the general preferences of clients*
- Activities are posted in advance
- Volunteers and families are encouraged to participate in activities
- Clients have access to religious activities at their churches or within the Assisted Living Community
Contact:

DEPARTMENT FOR AGING AND INDEPENDENT LIVING
CABINET FOR HEALTH AND FAMILY SERVICES

275 E. MAIN ST., 3 E-E
FRANKFORT, KY 40621

PHONE: (502) 564-6930
FAX: (502) 564-4595

http://chfs.ky.gov/dail/ALC.htm