ST - N000 - Initial Comments

<table>
<thead>
<tr>
<th>Title</th>
<th>Initial Comments</th>
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<tbody>
<tr>
<td>Rule</td>
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<td>Type</td>
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</table>

**Regulation Definition**

**Interpretive Guideline**

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ST - N100 - Background Check

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<tr>
<th>Title</th>
<th>Background Check</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 10.900(b)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
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</tbody>
</table>

**Regulation Definition**

Background Check - (b) The provisions of 7 AAC 10.900 - 7 AAC 10.990 apply to an entity or individual service provider seeking licensure, certification, approval, or a finding of eligibility to receive payments from the department. Each individual who is to be associated with the entity or provider in a manner described in this subsection must have a valid criminal history check conducted under 7 AAC 10.900 - 7 AAC 10.990 if that individual is 16 years of age or older and will be associated with the entity or provider as

1. an administrator or operator;
2. an individual service provider;
3. an employee, an independent contractor, an unsupervised volunteer, or a board member if that individual has
   (A) regular contact with recipients of services;
   (B) access to personal or financial records maintained by the entity or provider regarding recipients of services; or
   (C) control over or impact on the financial well-being of
recipients of services, unless the only recipient whose financial well-being is affected is a
  (i) relative of the individual who has authorized that individual to make financial decisions for that relative;
  (ii) recipient who has executed a power of attorney for that individual to make financial decisions for that recipient;
  or
  (iii) recipient for whom a court has authorized that individual to make financial decisions;
(4) an officer, director, partner, member, or principal of the business organization that owns an entity, if that individual has
  (A) regular contact with recipients of services;
  (B) access to personal or financial records maintained by the entity or provider regarding recipients of services; or
  (C) control over or impact on the financial well-being of recipients of services, unless the only recipient whose financial well-being is affected is a
  (i) relative of the individual who has authorized that individual to make financial decisions for that relative;
  (ii) recipient who has executed a power of attorney for that individual to make financial decisions for that recipient;
  or
  (iii) recipient for whom a court has authorized that individual to make financial decisions;
(5) except as provided in (c) and (d)(10) of this section, an individual who resides in a part of an entity, including a residence if services are provided in the residence, if the individual remains, or intends to remain, in the entity for 45 days or more, in total, in a 12-month period; or
(6) except as provided in (c) and (d) of this section, any other individual who is present in the entity and would have regular contact with recipients of services.
### ST - N101 - Background Check

**Title** Background Check  
**Rule** 7 AAC 10.900(c)  
**Type** Rule  

**Regulation Definition**  
Background Check - (c) A criminal history check under 7 AAC 10.900 - 7 AAC 10.990 is not required for a recipient of services, unless that individual is also associated with the entity or individual service provider in any manner described in (b)(1) - (4) of this section.

**Interpretive Guideline**

### ST - N102 - Background Check

**Title** Background Check  
**Rule** 7 AAC 10.900(d)  
**Type** Rule  

**Regulation Definition**  
Background Check - (d) A criminal history check under 7 AAC 10.900 - 7 AAC 10.990 is not required for the following individuals, if supervised access is provided in accordance with (e) of this section:  
(1) a relative of a recipient of services, unless that relative is also associated with the entity or provider in any manner described in (b)(1) - (5) of this section;  
(2) a visitor of a recipient of services, unless that visitor is also associated with the entity or provider in any manner described in (b)(1) - (4) of this section;  
(3) an individual for whom the entity or provider submits evidence to the department of a fingerprint-based background check.
(A) conducted and implemented under a process that meets or exceeds the standards of 7 AAC 10.900 - 7 AAC 10.990; and

(B) that is required
   (i) as a condition for obtaining a professional license or certification under AS 08;
   (ii) by federal law for an entity or individual service provider described in AS 47.05.300; or
   (iii) as a condition of employment or association that is imposed by an entity or individual service provider described in AS 47.05.300;

(4) an employee, independent contractor, unsupervised volunteer, board member, officer, director, partner, member, or principal of the business organization that owns an entity if that individual is not associated with the entity or an individual service provider in any manner described in (b)(1) - (4) of this section;

(5) an approved relative provider under 7 AAC 41.200(e);

(6) a personal physician, an infant learning teacher, an attendant for a child with special needs as described in 7 AAC 57.940, a licensor, a fire marshal, a food services sponsor, or another similar individual who
   (A) is not associated with the entity or provider under (b) of this section; and
   (B) provides support services to the entity or provider or to a recipient of services;

(7) an individual who is a vendor or an industry representative, or who provides delivery, installation, maintenance, or repair services;

(8) an individual who resides in any part of an entity, including a residence if services are provided in the residence, if the individual remains in the entity or residence for less than 45 days, in total, in a 12-month period;

(9) a parent's designee to drop off and pick up a child in care, unless the designee is also associated in a manner described in
(b) of this section with the entity providing child care;

(10) a parent who receives money from the department for purposes of paying an approved in-home child care provider under 7 AAC 41.370, and any other individual who resides in that parent's household; however, the exemption in this paragraph does not apply to an approved in-home child care provider who resides in the household;

(11) an occasional guest of the administrator or operator of an entity or of a provider.

**ST - N103 - Background Check**

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<tr>
<th>Title</th>
<th>Background Check</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 10.900 (e-f)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Background Check - (e) An entity or individual service provider must provide supervised access for an individual exempted under (d) of this section if the individual is present in the entity during hours of operation. Supervised access is not required in a residence where in-home child care is provided under 7 AAC 41.370.

(f) For purposes of (b)(5) and (d)(8) of this section, "individual who resides in any part of an entity" means an individual who dwells continuously in, or legally occupies, the premises housing the entity or provider, as evidenced by:

1. the individual's address on the individual's permanent fund dividend received under AS 43.23, driver's license, fishing or hunting license, or other official record; or

2. observation by another individual of the individual occupying the premises. (Eff. 2/9/2007, Register 181)

**Interpretive Guideline**
### Title
Background Check

### Rule
7 AAC 10.910(a)

### Type
Rule

#### Regulation Definition
Background Check - Request for criminal History Check. (a) An entity or individual service provider that is subject to AS 47.05.300 - 47.05.390 and 7 AAC 10.900 - 7 AAC 10.990 must request a criminal history check under this section, or provide proof of a valid fingerprint-based criminal history check, for each individual to be associated, or to remain associated, with the entity or provider in a manner described in 7 AAC 10.900(b). An entity or individual must request a criminal history check.

1. when the entity or provider submits an initial application for a license, certification, approval, or finding of eligibility to receive payments from the department;
2. for a new owner, officer, director, partner, member, or principal of the business organization if there is a change in ownership of the business organization, or if an officer, director, partner, member, or principal of the business organization is replaced; the criminal history check must be completed before the individual begins association unless the department issues notice of a provisional valid criminal history check under 7 AAC 10.920;
3. except as provided otherwise in this section, if the entity or provider wishes to hire or retain an employee, independent contractor, or unsupervised volunteer described in 7 AAC 10.900(b)(3); the criminal history check must be completed before hiring unless the department issues notice of a provisional valid criminal history check under 7 AAC 10.920;
4. for an individual 16 years of age or older who is not a recipient of services, and who wishes to reside in the entity or

#### Interpretive Guideline
to be present as described in 7 AAC 10.900(b)(5) or (6); the
criminal history check must be completed before the
individual begins association unless
   (A) the department issues notice of a provisional valid
criminal history check under 7 AAC 10.920; or
   (B) the individual is residing in the entity before that
individual's 16th birthday; for an individual described in this
subparagraph, the entity or provider must submit the
information required under (b) of this section within 30 days
before the individual's 16th birthday;
(5) at any time requested by the department
   (A) to show compliance with 7 AAC 10.900 - 7 AAC
10.990 during inspection, monitoring, or investigation; or
   (B) for an individual if the department has good cause to
believe that the individual’s criminal history has changed; or
(6) on or before April 10, 2007, for each individual who is
associated with an entity or provider operating under a current
license, certification, approval, or finding of eligibility to
receive payments, and who
   (A) does not have a valid criminal history check; or
   (B) passed a criminal history check conducted before
February 9, 2007 that
      (i) was not fingerprint-based; or
      (ii) was fingerprint-based and conducted more than six
years before February 9, 2007.

ST - N105 - Background Check

Title  Background Check

Rule  7 AAC 10.910(c)

Type  Rule

<table>
<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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<tbody>
<tr>
<td>Background Check - Request for criminal History Check. (c) Unless a more frequent fingerprint-based criminal history check is required under federal law, or for certain entities and</td>
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</table>
providers under (f) of this section, a fingerprint-based criminal history check is valid for six years from the date the check became valid under (h) of this section for an individual who
(1) remains associated with an entity or provider in a manner described in 7 AAC 10.900(b), subject to verification under (d) of this section;
(2) becomes re-associated with the same entity or provider in a manner described in 7 AAC 10.900(b) within 100 days after terminating association with that entity or provider, subject to verification under (e) of this section; or
(3) becomes associated with another entity or provider in a manner described in 7 AAC 10.900(b) within 100 days after terminating association with a previous entity or provider, subject to verification under (e) of this section.

Title Background Check
Rule 7 AAC 10.910(d)
Type Rule

Regulation Definition
Background Check - Request for criminal History Check. (d) Upon renewal of a license, certification, or approval, or when a finding is made for continued eligibility to receive payments, an entity or individual service provider must provide to the department proof that an individual described in (c)(1) of this section has a valid criminal history check. If the department determines that the criminal history check is not valid, the department will notify the entity or provider that a request for a new criminal history check must be submitted under this section.
Criminal history check - (f) Except as provided otherwise in this subsection, and unless the department granted a variance under 7 AAC 10.935, a new criminal history check is not required if a person associated with an entity or provider in a manner described in 7 AAC 10.900(b) is transferred from one site operated by the entity or provider to another site operated by that entity or provider, if all sites are identified in the request for a criminal history check. Before October 1, 2007, an entity or provider must submit the items required under (b) of this section for an individual described in the following list, each time that individual changes employment, regardless of what entities or providers were listed on the request for a criminal history check:

1. an individual associated with
   A. a nursing facility;
   B. a hospital that provides swing-bed services or that is reimbursed under 7 AAC 43 for treatment described in the definition of "swing-bed day" set out in 7 AAC 43.709; for purposes of this subparagraph,
      i. "hospital that provides swing-bed services" has the meaning given "swing-bed hospital" in 42 C.F.R. 413.114(b); and
      ii. the definition of "swing-bed hospital" in 42 C.F.R. 413.114(b), as revised as of October 1, 2006, is adopted by reference;
   C. an intermediate care facility for the mentally retarded or persons with related conditions;
   D. an assisted living home;
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(E) a hospice agency;
(F) a home and community-based services provider as defined in 7 AAC 43.1110;
(G) a home health agency; or
(H) a personal care agency enrolled under 7 AAC 43.786 or 7 AAC 43.787;
(2) an individual providing care coordination, case management, adult day services, or respite care services.

ST - N108 - Criminal history check

Title Criminal history check
Rule 7 AAC 10.915 (f - h)
Type Rule

Regulation Definition

(f) Except as provided otherwise in this subsection, an entity or provider must, within 24 hours after receiving notification under (d) or (e) of this section, terminate association with the individual in accordance with 7 AAC 10.960. If the entity or provider requests a variance under 7 AAC 10.930, or if the individual requests reconsideration under 7 AAC 10.950, the individual may remain associated with the entity or provider, pending a decision on the request, if
(1) the individual is removed from direct contact with recipients of services; and
(2) the entity or provider ensures that the individual is provided with direct supervision if the individual is present in any area where services are provided, during hours of operation.

(g) If an individual remains out of association with an entity or provider for 100 days or longer, the department will revoke a valid criminal history check without prior notice. A new criminal history check is required if the individual wishes to become associated with any entity or provider in a manner described in 7 AAC 10.900(b).
### Regulation Definition

Monitoring and notification requirements. (a) An entity or provider shall monitor to ensure that all individuals associated with the entity or provider in a manner described in 7 AAC 10.900(b) continue to meet the applicable requirements of AS 47.05.300 - 47.05.390 and 7 AAC 10.900 - 7 AAC 10.990. The entity or provider shall require each individual for whom a criminal history check is required to report to the entity or provider within 24 hours, or the next business day if the individual is:

1. charged with, convicted of, found not guilty by reason of insanity for, or adjudicated as a delinquent for, a barrier crime listed in 7 AAC 10.905; or
2. is the subject of a matter that must be reported under 7 AAC 10.955(c) for the centralized registry.

(b) In addition to the reporting requirements of 7 AAC 10.955(c) for the centralized registry, the entity or provider shall notify the department by telephone, by electronic mail, by facsimile, by letter, or in person within:

1. 24 hours, or the next business day, after the entity or provider has knowledge that an individual associated with the

### Interpretive Guideline
entity or provider has been
  (A) arrested for, charged with, convicted of, found not
guilty by reason of insanity for, or adjudicated as a delinquent
for, a barrier crime listed in 7 AAC 10.905; or
  (B) is the subject of a matter that must be reported under
7 AAC 10.955(c) for the centralized registry; or
(2) 14 days after any change in association with the entity or
provider for an individual who has a valid criminal history
check or is the subject of a provisional valid criminal history
check, including a change that involves an individual
  (A) whose association described in 7 AAC 10.900(b) has
been terminated; or
  (B) who has not been associated with the entity or
provider for 61 days or more, but becomes re-associated
within 100 days.

ST - N110 - Posting of Varience Decision

Title  Posting of Varience Decision
Rule  7 AAC 10.925(c)
Type  Rule

**Regulation Definition**

Monitoring and notification requirements.  (c) Failure to
notify the department as required under this section may result
in an enforcement action, including suspension or revocation
of the license, certification, approval, or finding of eligibility
to receive payments.  (Eff. 2/9/2007, Register 181)

**Interpretive Guideline**

ST - N111 - Request for variance

Title  Request for variance
Rule  7 AAC 10.930(d - e)
Type  Rule
Request for variance - (d) If the department granted a variance for an offense revealed in a fingerprint-based criminal history check conducted six or more years before February 9, 2007, and if the offense for which the variance was granted is not a permanent barrier under 7 AAC 10.905, the entity or provider must submit a new request for a variance, if allowed under this section, at the time of application for renewal of that entity's current license, certification, approval, or finding of eligibility to receive payments. Except as provided in (h) and (i) of this section, if the offense for which the department granted the variance is a permanent barrier under 7 AAC 10.905, the variance is void and the entity must terminate association with the individual in accordance with 7 AAC 10.960.

(e) If the department granted a variance for a barrier condition described in 7 AAC 10.955 six or more years before February 9, 2007, the entity or provider must submit a new request for a variance at the time of application for renewal of that entity's current license, certification, approval, or finding of eligibility to receive payments.

ST - N112 - Posting of variance decision required

Title  Posting of variance decision required

Rule  7 AAC 10.940

Type  Rule

Posting of variance decision required - If the department grants a variance under 7 AAC 10.935, the entity or individual service provider shall post a copy of the variance decision with the copy of the license, certification, approval, or finding of eligibility to receive payments that was issued by the
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department, in a conspicuous place where the copy of the variance can be readily viewed by persons interested in obtaining the services offered by the entity or provider. (Eff. 2/9/2007, Register 181)

<table>
<thead>
<tr>
<th>Title</th>
<th>Termination of Association</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 10.960(a)</td>
</tr>
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<td>Type</td>
<td>Rule</td>
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</tbody>
</table>

**Regulation Definition**

Termination of Association - (a) Except as provided in (b) and (c) of this section, if an entity or provider is required to terminate association with an individual, the entity or provider shall

1. notify the individual that the individual's employment, volunteer services, or other association with the entity or provider under 7 AAC 10.900(b) is ended, effective immediately, unless the entity or provider takes immediate action under (2) of this subsection; the entity or provider must notify the individual under this paragraph
   - (A) immediately, if the individual is present at the entity or premises where the provider is providing services; or
   - (B) before or upon the individual's next arrival at the entity; or
2. if the entity or provider intends to request a variance under 7 AAC 10.930, immediately reassign the duties and responsibilities of that individual so that the individual
   - (A) does not have contact with recipients of services;
   - (B) cannot access personal or financial records maintained by the entity or provider regarding recipients of services;
   - (C) has no control over or impact on the financial well-being of a recipient of services, unless the only recipient whose financial well-being is affected is a

**Interpretive Guideline**
(i) relative of the individual who has authorized that individual to make financial decisions for that relative;
(ii) recipient who has executed a power of attorney for that individual to make financial decisions for that recipient; or
(iii) recipient for whom a court has authorized that individual to make financial decisions; and
(D) is provided with direct supervision if present in the entity or premises where the provider is providing services during hours of operation.

### ST - N114 - Termination of Association

**Title**  Termination of Association  
**Rule**  7 AAC 10.960(b)  
**Type**  Rule  

**Regulation Definition**

Termination of Association - (b) If the entity or provider is required to terminate association with an individual who is subject to a union agreement or employment contract that requires more notice than allowed under (a) of this section, the entity or provider shall, within 24 hours after receiving notice to terminate association, deliver a copy of the relevant language of the agreement or contract to the department. The entity or provider shall cooperate with the department in developing an appropriate termination plan for the individual that includes the measures set out in (a)(2)(A) - (D) of this section during the notice period mandated by the agreement or contract.
### ST - N115 - Termination of Association

**Title**  Termination of Association  
**Rule**  7 AAC 10.960(c)  
**Type**  Rule  

#### Regulation Definition

Termination of Association - (c) If the individual for whom termination of association is required is a relative of the operator, administrator, or provider, and resides in the entity or premises where services are provided, termination of association must occur within 24 hours, and the entity or provider shall ensure that the individual  

1. does not have contact with recipients of services; and  
2. is provided with direct supervision if, during that 24-hour period, the individual is present in the entity or premises where the provider is providing services during hours of operation.  

(Eff. 2/9/2007, Register 181)

### ST - N116 - Variance Review

**Title**  Variance Review  
**Rule**  7 AAC 10.9525(b)  
**Type**  Standard  

#### Regulation Definition

Variance Review - (b) Grant or denial of a general variance  
Subject to (c) of this section, the department may grant a general variance, for a period that does not exceed one year, if the department determines that the entity  

1. is unable to comply with the requirement from which the variance is sought;  
2. has an effective plan for achieving compliance during the

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term of the variance; and
(3) is able to adequately provide for the health, safety, and
welfare of recipients of services during the term of the
variance.

ST - N117 - Variance Review

**Title**  Variance Review

**Rule**  7 AAC 10.9525(c)

**Type**  Rule

**Regulation Definition**

Variance Review - (c) The department may grant a general
variance for a longer period than allowed under (b) of this
section if the department determines
(1) that
   (A) strict compliance with the requirement from which the
   variance is sought cannot be accomplished without a
   substantial economic, technological, programmatic, legal, or
   medical hardship; or
   (B) the variance will maintain or improve the quality of
   services for recipients of services; and
(2) that the entity has an effective plan for meeting the goal of
the requirement from which the variance is sought, and that
the plan adequately protects the health, safety, and welfare of
recipients of services and otherwise meets all applicable
statutory or regulatory standards.

ST - N118 - Posting of a general variance

**Title**  Posting of a general variance

**Rule**  7 AAC 10.9530(a)

**Type**  Rule
Regulation Definition

Posting of a general variance - (a) If the department grants a request for a general variance, the entity shall post a copy of the general variance decision in a conspicuous place, with the entity's license as required by AS 47.32.080, during the period the variance is in effect, and shall make it available to any person who wishes to review it. A general variance remains in effect for the duration stated, unless the department revokes the variance under (b) of this section.

Interpretive Guideline

ST - N119 - General variance

Title General variance
Rule 7 AAC 10.9530(b)

Type Rule

Regulation Definition

General variance - (b) The department will revoke a general variance if the department finds that the entity is not following its plan for achieving compliance, or is no longer able to adequately provide for the health, safety, and welfare of recipients of services during the term of the variance. If the department decides to revoke a variance, it will provide written notice of revocation to the entity, setting out the reasons for the department's decision. The department will advise the entity of its right to request reconsideration under 7 AAC 10.9535. A notice of revocation issued under this subsection is effective 30 days after it is received by the entity unless a request for reconsideration is submitted. Nothing in this subsection precludes the department from issuing a notice of immediate revocation if the department finds that the life, health, safety, or welfare of recipients of services is threatened.
ST - N123 - Plan of Correction

Title  Plan of Correction

Rule  7 AAC 10.9610(a)(1 - 4)

Type  Rule

Regulation Definition

Plan of correction - (a) The plan of correction required under AS 47.32.140 (b) must contain the following information for each violation identified in the report issued under AS 47.32.120 (a):
(1) each action that will be taken to correct the violation  (2) each measure that will be taken or change that will made to ensure the violation does not recur; (3) how the entity will monitor each corrective action to ensure the violation is cured and will not recur; (4) the date on or before which the violation will be cured.

ST - N124 - Plan of Correction

Title  Plan of Correction

Rule  7 AAC 10.9610(b)

Type  Level A

Regulation Definition

Plan of correction - (b) The plan of correction must be signed by the administrator or another person responsible for operation of the entity.
<table>
<thead>
<tr>
<th>Title</th>
<th>Plan of Correction</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 10.9610(c)(1 - 2)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
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</table>

**Regulation Definition**

Plan of correction - (c) If the department determines that any recipients of services were affected by a violation, the department may also require the entity to describe (1) each corrective action that will be taken with regard to those recipients; and (2) how the entity will identify other recipients of services who might be affected by the violation, and what corrective action will be taken.

<table>
<thead>
<tr>
<th>Title</th>
<th>Plan of Correction</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 10.9610(d)</td>
</tr>
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<td>Type</td>
<td>Rule</td>
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**Regulation Definition**

Plan of correction - (d) The entity may request that the plan of correction also act as the allegation of compliance required under 7 AAC 10.9615 if each violation listed in the report has been corrected before submission of the plan of correction.

<table>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 10.9610(c)</td>
</tr>
<tr>
<td>Type</td>
<td>Level A</td>
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Plan of correction - (e) The department will review a plan of correction submitted under (a) - (d) of this section to determine whether the plan is acceptable. If the department determines that the plan is unacceptable, the department may (1) request additional information regarding one or more corrective actions described in the plan; (2) require the entity to amend the plan as directed by the department; (3) require the entity to comply with a plan of correction developed by the department under (g) of this section.

Plan of Correction - (f) If the department finds that an entity has failed to correct a violation of an applicable statute or regulation within the time specified by the department under AS 47.32.140 (a), has failed to submit a plan of correction for department approval under AS 47.32.140 (b), or has submitted an unacceptable plan, the department may require the entity to participate in a plan of correction developed by the department under (g) of this section.
Plan of Correction - (i) The entity shall keep on the premises a copy of each inspection document described in AS 47.32.180 (b) for at least three years from the date of inspection and shall make each document available to any interested person upon request.

Allegation of compliance. An allegation of compliance required under AS 47.32.140 (c) must describe each action that was taken by the entity to correct each violation, and must include the date the violation was corrected. The allegation must be signed by the administrator or another person responsible for operation of the entity. The department will review the allegation to determine whether it provides enough detail to establish that each violation was corrected by any applicable deadline. The department may also conduct a follow-up inspection to validate the allegation of compliance.

Criminal history check requirements

Title Criminal history check requirements
Rule 7 AAC 12.605
Type Rule
Criminal history check requirements - An entity listed in AS 47.32.010(b) that is required to be licensed under AS 47.32 and this chapter must also comply with the applicable requirements of AS 47.05.300 - 47.05.390 and 7 AAC 10.900 - 7 AAC 10.990 (Barrier Crimes, Criminal History Checks, and Centralized Registry).

Title Scope

Scope. A facility that is not an acute care hospital and that provides nursing care and related medical services over a period of 24 hours each day to individuals admitted because of illness, disease, or physical infirmity is a nursing facility, and must comply with 7 AAC 12.250 - 7 AAC 12.290.

Title Services required

Services required. A nursing facility must provide nursing, pharmaceutical, either physical or occupational therapy, social work services, therapeutic recreational activities, dietetic, central supply, laundry, housekeeping, laboratory and radiological services.
ST - N146 - Admissions

Title Admissions
Rule 7 AAC 12.256
Type Rule

**Regulation Definition**

Admissions - The nursing facility must have written policies and procedures to ensure admissions of only those individuals whose needs can be met by the nursing facility directly or in cooperation with community resources.

**Interpretive Guideline**

ST - N150 - Resident Rights

Title Resident Rights
Rule 7 AAC 12.890(a) (1)
Type Rule

**Regulation Definition**

Rights of patients, clients, and residents. (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following: (1) to associate and communicate privately with persons of the patient's, client's, or resident's choice.

**Interpretive Guideline**

ST - N151 - Resident Rights

Title Resident Rights
Rule 7 AAC 12.890(a) (2)
Type Rule
### Aspen State Regulation Set: N 03.1 LTC - State Regulations

**Regulation Definition**

Rights of patients, clients, and residents. (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following:

(2) to have reasonable access to a telephone to make and receive confidential calls.

**Interpretive Guideline**

**ST - N152 - Resident Rights**

<table>
<thead>
<tr>
<th>Title</th>
<th>Resident Rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.890(a) (3)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Rights of patients, clients, and residents. (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following:

(3) to mail and receive unopened correspondence.

**Interpretive Guideline**

**ST - N153 - Resident Rights**

<table>
<thead>
<tr>
<th>Title</th>
<th>Resident Rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.890(a) (4)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Rights of patients, clients, and residents. (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following:

(4) to be informed of the facility's grievance procedure for handling complaints relating to patient, client, or resident care.
### ST - N154 - Resident Rights

<table>
<thead>
<tr>
<th>Title</th>
<th>Resident Rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.890(a) (5)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

#### Regulation Definition

Rights of patients, clients, and residents. (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following:

(5) to be free from physical or chemical restraints except as specified in AS 47.30.825 or 7 AAC 12.258.

#### Interpretive Guideline

### ST - N155 - Resident Rights

<table>
<thead>
<tr>
<th>Title</th>
<th>Resident Rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.890(a) (6)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

#### Regulation Definition

Rights of patients, clients, and residents. (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following:

(6) to be treated with consideration and recognition of the patient's, client's, or resident's dignity and individuality.

#### Interpretive Guideline

### ST - N156 - Resident Rights

<table>
<thead>
<tr>
<th>Title</th>
<th>Resident Rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.890(a) (7)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>
Rights of patients, clients, and residents. (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following:

(7) to confidentiality of the patient's, client's, or resident's medical records and treatment.

(8) to be free from unnecessary or excessive medications.

(9) to private visits by the patient's, client's, or resident's spouse, and to share a room if both spouses are patients, clients, or residents in the facility, unless medical reasons or space problems require separation.
### ST - N159 - Resident Rights

**Title**  Resident Rights  
**Rule**  7 AAC 12.890(a) (10)  
**Type**  Rule

**Regulation Definition**

Rights of patients, clients, and residents. (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following:  
(10) to be informed in a language that the patient, client, or resident understands, before or at the time of admission and during the stay, of services that are available in the facility and their cost, including any costs for services or personal care items not covered by the facility's basic per diem rate or not covered under 42 U.S.C. 1395 - 1396v (Titles XVIII or XIX of the Social Security Act).

**Interpretive Guideline**

### ST - N160 - Resident Rights

**Title**  Resident Rights  
**Rule**  7 AAC 12.890(a) (11)  
**Type**  Rule

**Regulation Definition**

Rights of patients, clients, and residents. (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following:  
(11) to be informed, in a language that the patient, client, or resident understands, of the patient's, client's, or resident's medical condition by the practitioner responsible for treatment.
Title  Resident Rights
Rule  7 AAC 12.890(a) (12)

Rights of patients, clients, and residents.  (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following:
(12) to refuse to participate in experimental research, psychosurgery, lobotomy, electroconvulsive therapy, or aversive conditioning.

Title  Resident Rights
Rule  7 AAC 12.890(a) (13)

Rights of patients, clients, and residents.  (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following:
(13) to participate in the development of a plan of care, or discharge plan, and to receive instructions for self-care and treatment that include explanation of adverse symptoms and necessary precautions, as appropriate.
### Title: Resident Rights

#### Rule 7 AAC 12.890(a) (14)

**Type** Rule

<table>
<thead>
<tr>
<th><strong>Regulation Definition</strong></th>
<th><strong>Interpretive Guideline</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Rights of patients, clients, and residents. (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following: (14) to be informed, in a language that the patient, client, or resident understands, of the rights listed in this subsection and of all the rules and regulations governing patient, client, or resident conduct and responsibility.</td>
<td></td>
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</tbody>
</table>

### Title: Resident Rights

#### Rule 7 AAC 12.890(a) (15)

**Type** Rule

<table>
<thead>
<tr>
<th><strong>Regulation Definition</strong></th>
<th><strong>Interpretive Guideline</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Rights of patients, clients, and residents. (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following: (15) to be informed of the professional training and experience of the practitioner responsible for treatment.</td>
<td></td>
</tr>
</tbody>
</table>
ST - N165 - Resident Rights

Title  Resident Rights
Rule  7 AAC 12.890(a) (16)
Type  Rule

**Regulation Definition**

Rights of patients, clients, and residents.  (a) Except as otherwise provided in AS 47.30.825, a patient, client, or a nursing facility resident has rights that include the following: (16) to be informed by a practitioner of different options to the treatment recommended by the practitioner responsible for treatment, including the risks and benefits of each option.

**Interpretive Guideline**

ST - N166 - Posting of Resident Rights

Title  Posting of Resident Rights
Rule  7 AAC 12.890(b)
Type  Rule

**Regulation Definition**

Patients' or residents' rights - (b) A written notice that sets out the rights listed in (a) of this section must be posted in a conspicuous location, and a copy must be given to a patient, a client, a resident, a family member, or the legal representative of the patient, client, or resident and, at cost, to a member of the public.
<table>
<thead>
<tr>
<th>Title</th>
<th>Written Notice of Resident Rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.890(c)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Patients' or residents' rights - (b) A written notice that sets out the rights listed in (a) of this section must be posted in a conspicuous location, and a copy must be given to a patient, a client, a resident, a family member, or the legal representative of the patient, client, or resident and, at cost, to a member of the public.

<table>
<thead>
<tr>
<th>Title</th>
<th>Written Procedures of Resident Rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.890(d)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Patients' or residents' rights - (d) A facility must establish written procedures to assure delivery of complaints by patients, clients, or residents to the facility's administration. The administration shall acknowledge receipt of a patient's, client's, or resident's complaint, and take appropriate action.

<table>
<thead>
<tr>
<th>Title</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.285</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>
Activity program. A nursing facility must provide an activity program that is available to all residents and encourages each resident to attain and maintain function at the highest practicable level. The program must address the intellectual, social, spiritual, creative, cultural, and physical needs, capabilities, and interests of each resident.

The program must encourage self-determination and well-being of the residents. If a physician finds a resident as medically able to participate in an activity program, that finding and any conditions of the resident's participation or contra-indications to that participation must be noted in the resident's record at the nursing facility.

The activity program coordinator, with an interdisciplinary team, shall develop the resident's individual activity program. The activity program coordinator shall consult as necessary with an occupational or recreational therapist, unless the
activity program coordinator meets the requirements of 42 C.F.R. 483.15(f)(2), revised as of October 1, 1991.

ST - N245 - Social Work

Title Social Work
Rule 7 AAC 12.700(a)
Type Rule

**Regulation Definition**

Social work service - (a) A facility that provides social work services must retain a social worker licensed under AS 08.95 as an employee or consultant of the facility.

**Interpretive Guideline**

ST - N246 - Social Work

Title Social Work
Rule 7 AAC 12.700(a) (1-6)
Type Rule

**Regulation Definition**

Social work service - The social worker shall

1. regularly assess the social service needs for each patient, resident, or client, implementing the plan of care to meet those needs, and reevaluating those needs as appropriate;
2. link each patient, resident, or client and that individual's family with applicable community resources as necessary to assist in meeting ongoing social, emotional, and economic needs;
3. assist the physician, any interdisciplinary team, and other staff in understanding the social and emotional factors related to the health of each patient, resident, or client;
4. prepare clinical and progress notes;
5. participate in in-service training; and
(6) plan, supervise, and delegate any services furnished by a social services specialist as provided in (c) of this section.

**ST - N247 - Social Work**

<table>
<thead>
<tr>
<th>Title</th>
<th>Social Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.700(b)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Social work service - A facility that provides social work services must identify and provide interventions in response to the medically-related mental, behavioral, psychosocial, and advocacy needs of a patient. Social work services must assist staff, patients, and patients' families to understand and cope with emotional and social problems associated with health care.

**ST - N248 - Social Worker Education**

<table>
<thead>
<tr>
<th>Title</th>
<th>Social Worker Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.700 (c-d)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Social Worker Education - (c) A social services specialist must have a baccalaureate degree in social work or in a human service field, and at least one year of social work experience in a health care setting. A social services specialist shall act as an assistant to the social worker and shall

1. perform services delegated by the social worker, in accordance with the plan of care;
2. assist in preparing clinical progress notes;
3. participate in the interdisciplinary team meetings; and
(4) participate in in-service training.

(d) In this section, "human service field" means sociology, special education, rehabilitation counseling, psychology, or another field related to social work.

**ST - N250 - Laundry**

<table>
<thead>
<tr>
<th>Title</th>
<th>Laundry</th>
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</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.740(a)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Laundry - (a) Each facility, with the exception of home health agencies, frontier extended stay clinics, and intermediate care facilities for the mentally retarded, must provide a laundry service.

**ST - N251 - Laundry**

<table>
<thead>
<tr>
<th>Title</th>
<th>Laundry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.740(b)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Laundry - (b) A facility must develop and implement written procedures for handling, processing, storage, and transportation of linen in a manner that will prevent the spread of infection and will assure the maintenance of clean linen.
### ST - N252 - Laundry

**Title**  Laundry  
**Rule**  7 AAC 12.740(c) (1-5)  
**Type**  Rule

<table>
<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laundry - (c) If a facility operates its own laundry, it must be</td>
<td></td>
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<tr>
<td>(1) located so that steam, odors, lint, and objectionable noises do not reach</td>
<td></td>
</tr>
<tr>
<td>patient or personnel areas;</td>
<td></td>
</tr>
<tr>
<td>(2) well-lighted, ventilated, and adequate in size for the needs of the facility;</td>
<td></td>
</tr>
<tr>
<td>(3) maintained in a sanitary manner and in good repair;</td>
<td></td>
</tr>
<tr>
<td>(4) separate from any storage area; and</td>
<td></td>
</tr>
<tr>
<td>(5) organized so that clean and soiled functions are physically separated.</td>
<td></td>
</tr>
</tbody>
</table>

### ST - N253 - Laundry

**Title**  Laundry  
**Rule**  7 AAC 12.740(d)  
**Type**  Rule

<table>
<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laundry - (d) A facility must have laundry equipment that provides hot water at a</td>
<td></td>
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<tr>
<td>temperature of 160 degrees Fahrenheit unless the facility uses an alternative</td>
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<tr>
<td>disinfectant measure, including ozonized water, bleach, or a bleach byproduct, at a</td>
<td></td>
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<tr>
<td>lower temperature recommended by the product manufacturer. If the facility uses an</td>
<td></td>
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<tr>
<td>alternative disinfectant measure, the facility must develop a written policy and</td>
<td></td>
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<tr>
<td>procedure for use of the product and must maintain documentation of the manufacturer's minimum recommended water temperature.</td>
<td></td>
</tr>
</tbody>
</table>
### ST - N254 - Laundry

<table>
<thead>
<tr>
<th>Title</th>
<th>Laundry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.740(e)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Laundry - (e) Hand-washing and toilet facilities for laundry personnel must be provided at a location convenient to the laundry.

**Interpretive Guideline**


### ST - N255 - Laundry

<table>
<thead>
<tr>
<th>Title</th>
<th>Laundry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.740(f)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Laundry - (f) Separate covered carts must be used for transporting soiled and clean linen. The carts must be clearly labeled and equipped with washable covers that are laundered or suitably cleaned daily.

**Interpretive Guideline**


### ST - N256 - Laundry

<table>
<thead>
<tr>
<th>Title</th>
<th>Laundry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.740(g)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
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</tbody>
</table>

**Regulation Definition**

Laundry - (g) If laundry service is provided by an outside

**Interpretive Guideline**


Aspen State Regulation Set: N 03.1 LTC - State Regulations

laundry service establishment, the facility must choose an establishment that meets the requirements of this section.

ST - N260 - Housekeeping

Title  Housekeeping
Rule  7 AAC 12.750(a)
Type  Rule

**Regulation Definition**
Housekeeping service - (a) Each facility, with the exception of home health agencies and intermediate care facilities for the mentally retarded, must provide a housekeeping service.

**Interpretive Guideline**

ST - N261 - Housekeeping

Title  Housekeeping
Rule  7 AAC 12.750(b)
Type  Rule

**Regulation Definition**
Housekeeping service - (b) A facility must have routine cleaning procedures for furniture, floors, walls, ceilings, supply and exhaust grills, and lighting fixtures.

**Interpretive Guideline**

ST - N262 - Housekeeping

Title  Housekeeping
Rule  7 AAC 12.750(c)
Type  Rule
<table>
<thead>
<tr>
<th>Title</th>
<th>Housekeeping</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.750(d)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Housekeeping service - (c) A facility must have written procedures for cleaning all areas of the facility, including cleaning of a patient unit following discharge of a patient.

**Interpretive Guideline**

ST - N263 - Housekeeping

<table>
<thead>
<tr>
<th>Title</th>
<th>Housekeeping</th>
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</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.750(d)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Housekeeping service - (d) Housekeeping personnel must wear clean cap, mask, and gown when cleaning a surgical or delivery suite.

**Interpretive Guideline**

ST - N264 - Housekeeping

<table>
<thead>
<tr>
<th>Title</th>
<th>Housekeeping</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.750(e)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Housekeeping service - (e) A facility must maintain sufficient housekeeping cleaning supplies and equipment. Separate equipment must be provided, as applicable, for operating rooms, delivery rooms, the nursery, and the dietary area. Housekeeping equipment and cleaning supplies, other than those in bulk, must be stored in designated housekeeping supply rooms. A detergent germicide must be used for all cleaning and dusting purposes. Mop heads must be removable and must be changed at least daily.
Aspen State Regulation Set: N 03.1 LTC - State Regulations

ST - N265 - Housekeeping

Title  Housekeeping
Rule  7 AAC 12.750(f)
Type  Rule

Regulation Definition
Housekeeping service - (f) Each facility must provide a sufficient housekeeping service to maintain the interior of the facility in a safe, clean, orderly and attractive manner and free from offensive odors.

Interpretive Guideline

ST - N310 - Staff Duties

Title  Staff Duties
Rule  7 AAC 12.270(a)
Type  Rule

Regulation Definition
Staff duties. (a) The nursing facility staff shall encourage and assist residents to achieve and maintain their highest level of self-care and independence. A registered nurse, in conjunction with an interdisciplinary team, shall, within 14 days of admission of a resident, ensure completion of the comprehensive resident assessment instrument approved by the department. The assessment shall be reviewed by the nurse and interdisciplinary team no less frequently than quarterly and the plan of care revised as necessary. A reassessment shall be completed, by the nurse and interdisciplinary team, after any major permanent change in condition of the resident, but no less frequently than annually.

Interpretive Guideline
### ST - N311 - Staff Duties

**Title**  
Staff Duties

**Rule**  
7 AAC 12.270(b)

**Type**  
Rule

<table>
<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff Duties - (b) The nursing facility staff shall give residents the necessary care to prevent pressure ulcers, contractures, and deformities.</td>
<td></td>
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</tbody>
</table>

### ST - N312 - Staff Duties

**Title**  
Staff Duties

**Rule**  
7 AAC 12.270(c) (1)

**Type**  
Rule

<table>
<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff Duties - (c) The nursing facility staff shall implement procedures to prevent and reduce incontinence of residents. These procedures must include (1) a written assessment by a registered nurse within two weeks after admission of an incontinent resident's ability to participate in a bowel or bladder training program.</td>
<td></td>
</tr>
</tbody>
</table>

### ST - N313 - Staff Duties

**Title**  
Staff Duties

**Rule**  
7 AAC 12.270(c) (2)

**Type**  
Rule
Regulation Definition

Staff Duties - (c) The nursing facility staff shall implement procedures to prevent and reduce incontinence of residents. These procedures must include
(2) an individualized bowel or bladder training plan for each resident, as appropriate.

Interpretive Guideline

ST - N314 - Staff Duties

Title  Staff Duties
Rule  7 AAC 12.270(c) (3)
Type  Rule

Regulation Definition

Staff Duties - (c) The nursing facility staff shall implement procedures to prevent and reduce incontinence of residents. These procedures must include
(3) a monthly written summary of a resident's performance in the training program.

Interpretive Guideline

ST - N315 - Staff Duties

Title  Staff Duties
Rule  7 AAC 12.270(d)
Type  Rule

Regulation Definition

Staff Duties - (d) The nursing facility staff shall observe the hydration status of residents, and shall record deviations from the normal status and report the deviations to the charge nurse.

Interpretive Guideline
#### ST - N330 - Use of Restraints or Psychoactive Drugs

<table>
<thead>
<tr>
<th>Title</th>
<th>Use of Restraints or Psychoactive Drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.258(a)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Use of restraints or psychoactive drugs - (a) In addition to the rights of patients specified in 7 AAC 12.890, residents of nursing facilities have the right to be free from physical restraints imposed or psychoactive drugs administered for purposes of discipline or convenience and that are not required to treat the resident's medical symptoms.

**Interpretive Guideline**


#### ST - N331 - Use of Restraints or Psychoactive Drugs

<table>
<thead>
<tr>
<th>Title</th>
<th>Use of Restraints or Psychoactive Drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.258(b)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Use of restraints or psychoactive drugs - (b) A resident's medical records must contain evidence of consultation with appropriate health professionals, such as occupational or physical therapists, in the use of less restrictive supportive devices before using physical restraints. The record must also contain evidence of an interdisciplinary team's identification of less restrictive approaches to be used before or in conjunction with the use of psychoactive drugs.

**Interpretive Guideline**
Use of Restraints or Psychoactive Drugs -  (c) If, after a trial period of less restrictive measures, a nursing facility decides that a physical restraint or psychoactive drug would enable and promote greater functional or social independence, the nursing facility must explain the use of the restraint or psychoactive drug to the resident, before its use. If the resident has a legal representative, the explanation must also be given to the resident's legal representative, before its use. The explanation must include a description of the risks and benefits of the use of the restraint or drug.

Use of Restraints or Psychoactive Drugs -  (d) Approval of the use of a restraint or psychoactive drug by a resident, or legal representative must precede its use, except in the case of a medical emergency in which there is a risk of harm to the resident or others. The approval, or the circumstances of the emergency, must be documented in the resident's medical records at the nursing facility.
### ST - N334 - Use of Restraints or Psychoactive Drugs

**Title** Use of Restraints or Psychoactive Drugs  
**Rule** 7 AAC 12.258(e)  
**Type** Rule

<table>
<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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</thead>
<tbody>
<tr>
<td>Use of Restraints or Psychoactive Drugs - (e) A resident's medical records must contain evidence of an interdisciplinary team's periodic reassessment of the restraint or psychoactive drug to determine its effectiveness and appropriateness for continued use.</td>
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</table>

### ST - N335 - Use of Restraints or Psychoactive Drugs

**Title** Use of Restraints or Psychoactive Drugs  
**Rule** 7 AAC 12.258(f)  
**Type** Rule

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<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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</thead>
<tbody>
<tr>
<td>Use of Restraints or Psychoactive Drugs - (f) A nursing home must also meet the requirements at 42 C.F.R. 483.10, 483.12, 483.13, and 483.15, as amended July 1, 1991, regardless of whether the nursing home is certified to receive medicaid payments under 7 AAC 43.170.</td>
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</table>

### ST - N350 - Nursing and Medical Services

**Title** Nursing and Medical Services  
**Rule** 7 AAC 12.275(a)  
**Type** Rule
### Regulation Definition

**Aspen State Regulation Set: N 03.1 LTC - State Regulations**

Except as otherwise specified in this section, a nursing facility must have a registered nurse on duty seven days a week on the day shift and five days a week on the evening shift. A licensed practical nurse must be on duty during all shifts when a registered nurse is not present. A nursing facility must have telephone access to at least one registered nurse at all times and must post the names and phone numbers of those registered nurses at each nurse's station.

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<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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<tr>
<td>ST - N351 - Nursing and Medical Services</td>
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<tr>
<th>Title</th>
<th>Nursing and Medical Services</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.275(b)</td>
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<tr>
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</table>

A nursing facility with more than 60 occupied beds must have two registered nurses on duty during the day shift and one registered nurse on duty during other shifts.

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<th>Regulation Definition</th>
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<tr>
<td>ST - N352 - Nursing and Medical Services</td>
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<th>Title</th>
<th>Nursing and Medical Services</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.275(c)</td>
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<td>Type</td>
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</table>

A nursing facility that shares the same building as a hospital must have a registered nurse on duty in the nursing facility seven days a week on the
day shift. On the evening and night shift, a licensed practical nurse may serve as charge nurse. However, an on-duty registered nurse from the hospital must be available to make rounds at the nursing facility and to be otherwise available as needed during the evening and night shifts when a licensed practical nurse is serving as charge nurse. A nursing facility with 14 or fewer occupied beds may use an on-duty registered nurse from the hospital to meet the night shift nursing requirement set out in this subsection.

### ST - N353 - Nursing and Medical Services

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<tr>
<th>Title</th>
<th>Nursing and Medical Services</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.275(d)</td>
</tr>
<tr>
<td>Type</td>
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</table>

#### Regulation Definition

Nursing and Medical Services - (d) A nursing facility must have a contract for diagnostic services with a laboratory and x-ray provider approved by the department.

### ST - N354 - Nursing and Medical Services

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<thead>
<tr>
<th>Title</th>
<th>Nursing and Medical Services</th>
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</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.275(e)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
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</table>

#### Regulation Definition

Nursing and Medical Services - (e) A nursing facility must have a contract with a licensed dentist to provide consultation and necessary dental services to residents.
Aspen State Regulation Set: N 03.1 LTC - State Regulations

ST - N355 - Nursing and Medical Services

Title Nursing and Medical Services
Rule 7 AAC 12.275(f)
Type Rule

Regulation Definition
Nursing and Medical Services - (f) In addition to the requirements of this section, a governing body of a facility must provide resources and personnel as necessary to meet resident needs under 7 AAC 12.630(b) (6).

Interpretive Guideline

ST - N356 - Nursing Service

Title Nursing Service
Rule 7 AAC 12.670(a)
Type Rule

Regulation Definition
Nursing Service - (a) A licensed nurse shall write a patient care plan for each patient in consultation with other patient care personnel and the patient.

Interpretive Guideline

ST - N357 - Nursing Service

Title Nursing Service
Rule 7 AAC 12.670(b)
Type Rule

Regulation Definition
Nursing Service - (b) The patient care plan must reflect
Aspen State Regulation Set: N 03.1 LTC - State Regulations

analysis of patient problems and needs, treatment goals, medication prescribed and, upon discharge, instructions given to the patient and the patient's family regarding medication management, including any risks, side effects, and benefits expected, and including any recommended activities and diet.

### ST - N358 - Nursing Service

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<thead>
<tr>
<th>Title</th>
<th>Nursing Service</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.670(c)(1 - 2)</td>
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<tr>
<td>Type</td>
<td>Rule</td>
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</table>

**Regulation Definition**

Nursing Service - (c) Each facility must have a registered nurse as the director for nursing services. The director shall perform the following duties:

1. assure that all nurses comply with the requirements of (a) of this section;
2. provide a sufficient number of registered nurses to meet patient needs.

**Interpretive Guideline**

### ST - N359 - Nursing Service

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<thead>
<tr>
<th>Title</th>
<th>Nursing Service</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.670(c)(3)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
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</table>

**Regulation Definition**

Nursing Service - (c) Each facility must have a registered nurse as the director for nursing services. The director shall perform the following duties:

1. write an annual evaluation on the performance of each nurse.
<table>
<thead>
<tr>
<th>Title</th>
<th>Nursing Service</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.670(c)(4 - 5)</td>
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<tr>
<td>Type</td>
<td>Rule</td>
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<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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<tbody>
<tr>
<td>Nursing Service - (c) Each facility must have a registered nurse as the director for nursing services. The director shall perform the following duties: (4) maintain records on the number of nurses employed and the hours and weeks of employment; (5) delegate to a registered nurse the responsibility to plan, assign, supervise, and evaluate the nursing care for each patient.</td>
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<th>Title</th>
<th>Nursing Service</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.670(6)</td>
</tr>
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<td>Type</td>
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<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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<tbody>
<tr>
<td>Nursing Service - (c) Each facility must have a registered nurse as the director for nursing services. The director shall perform the following duties: (6) select and promote nursing personnel based on their qualifications and terminate employees when necessary.</td>
<td></td>
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</tbody>
</table>
### ST - N362 - Nursing Service

**Title**  Nursing Service  
**Rule**  7 AAC 12.670(7)  
**Type**  Rule

<table>
<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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</thead>
<tbody>
<tr>
<td>Nursing Service - (c) Each facility must have a registered nurse as the director for nursing services. The director shall perform the following duties: (7) establish and implement a standard procedure for the safe administration of medications.</td>
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</table>

### ST - N363 - Nursing Service

**Title**  Nursing Service  
**Rule**  7 AAC 12.670(d)  
**Type**  Rule

<table>
<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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</thead>
<tbody>
<tr>
<td>Nursing Service - (d) Only a registered nurse who has been appropriately trained may perform a blood transfusion. All other nursing services may be performed only under the direction of a registered nurse. A licensed practical nurse may administer medications, or perform limited infusion therapy functions, if (1) the licensed practical nurse is authorized under AS 08 to perform these services; (2) these services are authorized in the facility program standards; and (3) the program standards have been approved by the hospital administrator and the pharmacist.</td>
<td></td>
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</tbody>
</table>
### Title

Nursing Service

### Rule

7 AAC 12.670(e)

### Type

Rule

**Regulation Definition**

Nursing Service - (e) Licensed nursing personnel who meet the requirements under (d) of this section to administer medications, and who have been authorized in writing by the hospital administrator and the pharmacist, may perform the following services if a pharmacist is not available:

1. inventory and restocking of emergency drugs at least every 30 days; and
2. removal of a single dose of a prescribed drug for a patient or any drug packaged by a pharmacist from the licensed pharmacy or drug room.

**Interpretive Guideline**

### Title

Nursing Service

### Rule

7 AAC 12.670(f)

### Type

Rule

**Regulation Definition**

Nursing Service - (f) If licensed nursing personnel perform a service described in (e)(2) of this section, a pharmacy or drug room record must be kept and signed by the licensed nurse showing the name, strength and amount of the drug, the date and time taken, and the patient to whom the drug is administered.

**Interpretive Guideline**
### ST - N366 - Nursing Service

<table>
<thead>
<tr>
<th>Title</th>
<th>Nursing Service</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.670(g - h)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
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</table>

**Regulation Definition**

Nursing Service - (g) Except as provided in (i) of this section for a critical access hospital or 7 AAC 12.275 for a nursing facility, a facility that provides a nursing service must have a registered nurse on duty at all times.

(h) The nursing staff shall hold regular meetings to review and evaluate ways of improving nursing care. Minutes of the meetings must be made available to staff members.

### ST - N370 - Dietetic Service

<table>
<thead>
<tr>
<th>Title</th>
<th>Dietetic Service</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.720(b)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
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</tbody>
</table>

**Regulation Definition**

Dietetic service - (b) Except as provided in (q) of this section, a facility must employ

(1) a full-time dietitian who is registered by the American Dietetic Association; or

(2) a full-time dietetic service supervisor to supervise the dietetic service and a registered dietitian on a consulting basis.
### ST - N371 - Dietetic Service

**Title** Dietetic Service  
**Rule** 7 AAC 12.720(c)  
**Type** Rule

<table>
<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dietetic service - (c) A registered dietitian must be available not less than once every three months to provide advice to the administrator and medical staff, and guidance to the supervisor and staff of the dietetic service, and shall participate in the development or revision of dietetic policies and procedures.</td>
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</table>

### ST - N372 - Dietetic Service

**Title** Dietetic Service  
**Rule** 7 AAC 12.720(d)  
**Type** Rule

<table>
<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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</thead>
<tbody>
<tr>
<td>Dietetic service - (d) The dietetic service must provide food of the quality and quantity to meet the patient's needs in accordance with physician's orders and, to the extent medically possible, to meet the National Research Council's Recommended Dietary Allowances, 10th edition (1989), adopted by reference. If food is provided by an outside food service establishment, the facility shall ensure that the requirements of this subsection are met.</td>
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</tbody>
</table>
Dietetic service - (e) A facility that provides dietetic services must comply with 18 AAC 31. The facility shall retain written reports of the inspections performed under 18 AAC 31.900 on file, with notation of corrective actions in response to citations, if any.

Dietetic service - (f) A facility must maintain adequate space, equipment, and staple food supplies to provide food service to patients in emergencies.

Dietetic service - (g) A facility must provide food to patients in emergencies.
### Aspen State Regulation Set: N 03.1 LTC - State Regulations

**Regulation Definition**

Dietetic service - (g) If a facility provides dietetic services, it must maintain a current profile card for each patient indicating prescribed diet, likes and dislikes, and other pertinent information concerning the patient's dietary needs.

**Interpretive Guideline**

ST - N376 - Dietetic Service

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<th>Title</th>
<th>Dietetic Service</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.720(h)</td>
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<td>Type</td>
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</table>

**Regulation Definition**

Dietetic service - (h) The facility must maintain lavatories for handwashing, with hot and cold running water, soap, and disposable towels, conveniently located in the service area used by persons who handle food.

**Interpretive Guideline**

ST - N377 - Dietetic Service

<table>
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<tr>
<th>Title</th>
<th>Dietetic Service</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.720(i)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
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</table>

**Regulation Definition**

Dietetic service - (i) A current manual for therapeutic diets, approved by the dietitian, must be available in the dietetic service area.

**Interpretive Guideline**
ST - N378 - Dietetic Service

Title  Dietetic Service  
Rule  7 AAC 12.720(j)  
Type  Rule  

Regulation Definition  
Dietetic service - (j) A copy of the menus, with menu substitutions, must be retained for at least 60 days.

Interpretive Guideline

ST - N379 - Dietetic Service

Title  Dietetic Service  
Rule  7 AAC 12.720(k)  
Type  Rule  

Regulation Definition  
Dietetic service - (k) Records of food purchased, showing dates of purchases, quantity, and itemized cost, must be retained on file for at least one year.

Interpretive Guideline

ST - N380 - Dietetic Service

Title  Dietetic Service  
Rule  7 AAC 12.720(l)  
Type  Rule  

Regulation Definition  
Dietetic service - (l) Standardized recipes must be maintained and used exclusively in food preparation.

Interpretive Guideline
### ST - N381 - Dietetic Service

**Title** Dietetic Service  
**Rule** 7 AAC 12.720(m)  
**Type** Rule  

**Regulation Definition**

Dietetic service - (m) Current work schedules by job titles and weekly duty schedules for dietetic service personnel must be posted in the dietetic service area and retained for at least three months.

**Interpretive Guideline**

### ST - N382 - Dietetic Service

**Title** Dietetic Service  
**Rule** 7 AAC 12.720(n)  
**Type** Rule  

**Regulation Definition**

Dietetic service - (n) Routine cleaning schedules must be posted and records of cleaning must be maintained on file for at least three months.

**Interpretive Guideline**

### ST - N383 - Dietetic Service

**Title** Dietetic Service  
**Rule** 7 AAC 12.720(o)  
**Type** Rule  

**Regulation Definition**

Dietetic service - (o) In this section, a "dietetic service
supervisor” means a person who
(1) is a graduate of a dietetic technician or dietetic manager training program, corresponding or classroom, approved by the American Dietetic Association;
(2) is a graduate of a course approved by the department that provided 90 or more hours of classroom instruction in food service supervision, and who has a minimum of two years of experience as a supervisor in a health care institution with consultation from a dietitian;
(3) has training and experience in food service supervision and management in a military service equivalent in content to the programs in (1) or (2) of this subsection;
(4) has completed all nutrition and related coursework necessary to take the registration examination required to become a registered dietitian by the American Dietetic Association;
(5) is certified by the Certifying Board for Dietary Managers of the Dietary Managers Association;
(6) has completed a dietary manager course curriculum approved by the American Dietary Manager Association, is registered by the American Dietetic Association, and is qualified to take the examination required to become certified by the certifying board for dietary managers of the Dietary Managers Association; or
(7) has at least three years of experience in institutional dietary management, 200 or more documented contact hours with a dietitian registered by the American Dietetic Association, and 30 or more continuing education credits that
   (A) have been approved by the American Dietetic Association or Dietary Managers Association; and
   (B) directly relate to food service management and clinical nutrition.
**ST - N384 - Dietetic Service**

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<th>Title</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.720(q)</td>
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</table>

### Regulation Definition

Dietetic service - (q) A nursing home that is licensed separately under this chapter, but that is part of a licensed critical access hospital under 7 AAC 12.104, must employ a qualified dietitian either full time, part time, or on a consultant basis to plan, manage, and implement dietary service activities to assure that the residents receive adequate nutrition and that the dietary department of the nursing home is functioning properly. If a qualified dietitian is not employed full time, the facility is subject to the following requirements:

1. the facility must designate a person to serve as the
   - (A) dietetic service supervisor; or
   - (B) manager of food service; a manager of food service is exempt from the requirements of (o) of this section.

### Interpretive Guideline


**ST - N385 - Dietetic Service**

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<tr>
<td>Rule</td>
<td>7 AAC 12.720(q)</td>
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</table>

### Regulation Definition

Dietetic service - (2) the facility shall ensure that the dietitian

- (A) makes frequently scheduled onsite consultation visits to the facility;
- (B) functions collaboratively with the dietetic service supervisor or manager of food service in meeting the...
Aspen State Regulation Set: N 03.1 LTC - State Regulations

nutritional needs of the residents;
(C) provides supervision for dietary department functions;
(D) develops and implements continuing education programs
for dietary services and nursing personnel; and
(E) participates in interdisciplinary care planning.

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<tr>
<th>Title</th>
<th>Medical Director</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.260(1)</td>
</tr>
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<td>Type</td>
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**Regulation Definition**

Medical Director - A medical director who is employed by or is a consultant to the nursing facility shall
(1) place a resident under the care of a physician.

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<tr>
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<th>Medical Director</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.260(2)</td>
</tr>
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</tbody>
</table>

**Regulation Definition**

Medical Director - A medical director who is employed by or is a consultant to the nursing facility shall
(2) ensure that the use of an investigational drug is properly supervised by a member of the medical staff, that an informed consent form provided by the sponsoring company or agency is used, and that complete records on the drug, including protocol and side effects, are maintained.
**ST - N393 - Medical Director**

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<th>Title</th>
<th>Medical Director</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.260(3)</td>
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</table>

**Regulation Definition**

Medical Director - A medical director who is employed by or is a consultant to the nursing facility shall (3) supervise the infection control and employee health programs.

**ST - N394 - Physician Services**

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<th>Title</th>
<th>Physician Services</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.265(a)</td>
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</table>

**Regulation Definition**

Physician Services - (a) Physicians shall review, recap, and sign orders for nursing facility residents at least once every 60 days.

**ST - N395 - Physician Services**

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<th>Title</th>
<th>Physician Services</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.265(b) - (f)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
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</table>

(b) A physician shall visit nursing facility residents and make
a notation in each resident's medical record of the resident's status every 30 days for the first 90 days, and after that, every 60 days. If the condition of a resident warrants more frequent visits, a physician shall visit a resident as often as necessary.

(c) A nursing facility shall ensure that a physician personally approves a recommendation in writing that an individual be admitted. Each resident shall remain under the care of a physician and shall be provided care that is consistent with the plan of care, comprehensive assessment, and needs of the resident.

(d) A nursing facility shall ensure that

(1) the medical care of each resident is supervised by a physician who assumes the principal obligation and responsibility to manage the resident's medical condition and who agrees to visit the resident as often as necessary to address the resident's medical care needs;

(2) another physician will supervise the medical care of the resident when the resident's attending physician is unavailable; and

(3) the medical director is informed of the results of all department surveys related to medical service deficiencies and is involved in resolving such problems.

(e) A nursing facility shall ensure that the responsible physician

(1) participates as a member of the interdisciplinary care team in the development and review of the resident's comprehensive care plan, with the understanding that the minimum level of physician participation in interdisciplinary development and review of the care plan must be a person-to-person conference with the registered nurse who has principal responsibility for development and implementation of the resident's care plan;
(2) reviews the resident's total program of care, including medications and treatments, at each regularly scheduled visit;
(3) prepares, authenticates, and dates progress notes at each visit;
(4) authenticates and dates all orders; and
(5) provides for scheduled visits after the initial visit; the responsible physician may alternate between in-person visits and visits by a physician assistant or advanced nurse practitioner in accordance with (f) of this section.

(f) A nursing facility may permit a physician to delegate tasks to a physician assistant who is acting within the scope of practice set out under AS 08.64 and 12 AAC 40, or to an advanced nurse practitioner who is acting under the scope of practice set out under AS 08.68 and 12 AAC 44. The nursing facility may not permit a physician to delegate a task if state or federal statutes or regulations prohibit the delegation, or if the nursing facility's own policies prohibit the delegation.

ST - N400 - Rehabilitation Services

Title Rehabilitation Services
Rule 7 AAC 12.280(a)
Type Rule

Regulation Definition
Rehabilitation Services - (a) A nursing facility must provide a program of rehabilitative nursing care that assists each resident to achieve and maintain an optimal level of self-care and independence, as an integral part of the nursing service.
<table>
<thead>
<tr>
<th>ST - N401 - Rehabilitation Services</th>
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<tbody>
<tr>
<td><strong>Title</strong> Rehabilitation Services</td>
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<tr>
<td><strong>Rule</strong> 7 AAC 12.280(b)</td>
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<td><strong>Type</strong> Rule</td>
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<tr>
<td><strong>Regulation Definition</strong></td>
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<tr>
<td>Rehabilitation Services - (b) A nursing facility must provide physical, occupational, or speech rehabilitative services for a resident on a full-time, part-time, or consultant basis in accordance with the needs of the resident.</td>
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<tr>
<td><strong>Interpretive Guideline</strong></td>
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<thead>
<tr>
<th>ST - N402 - Rehabilitation Services</th>
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</thead>
<tbody>
<tr>
<td><strong>Title</strong> Rehabilitation Services</td>
</tr>
<tr>
<td><strong>Rule</strong> 7 AAC 12.280(c)</td>
</tr>
<tr>
<td><strong>Type</strong> Rule</td>
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<tr>
<td><strong>Regulation Definition</strong></td>
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<tr>
<td>Rehabilitation Services - (c) A therapist shall evaluate a resident in accordance with a physician's order. The therapist shall then establish an appropriate treatment program in coordination with medical, nursing, and other rehabilitative personnel.</td>
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<td><strong>Interpretive Guideline</strong></td>
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<tr>
<th>ST - N403 - Rehabilitation Services</th>
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<tr>
<td><strong>Title</strong> Rehabilitation Services</td>
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<tr>
<td><strong>Rule</strong> 7 AAC 12.280(d)</td>
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<td><strong>Type</strong> Rule</td>
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</table>
Rehabilitation Services - (d) The therapist shall report on the resident's progress to the attending physician within two weeks after initiation of rehabilitative services. After that report, the therapist shall reevaluate and note in the resident's medical record the resident's status and treatment plan every 30 days in the case of a resident receiving active rehabilitation and at least every 90 days for other residents.

ST - N404 - Physical Therapy Service

Title  Physical Therapy Service
Rule  7 AAC 12.690(a)

Regulation Definition
Physical Therapy Service - (a) A facility that provides physical therapy services must retain, as an employee or under contract as a consultant of the facility, a physical therapist licensed under AS 08.84. If treatment is to be rendered by a physical therapy assistant, the physical therapy assistant must be licensed under AS 08.84, and the treatment must be planned, delegated, and supervised by the physical therapist.

ST - N405 - Physical Therapy Service

Title  Physical Therapy Service
Rule  7 AAC 12.690(b)

Regulation Definition
Physical Therapy Service - (b) A physical therapist may evaluate a patient and establish a treatment program only upon
written or verbal instructions from the treating physician. A treatment program and any modification to it must be approved by the referring physician. A physical therapist may accept a verbal order of a physician.

### ST - N406 - Physical Therapy Service

**Title** Physical Therapy Service  
**Rule** 7 AAC 12.690(c)  
**Type** Rule

#### Regulation Definition

Physical Therapy Service - (c) A physical therapist shall perform the following duties or, if one or more of these duties is delegated to a physical therapy assistant, the physical therapist shall ensure that the duties are properly performed:  
1. enter each treatment into the patient's medical record;  
2. prepare clinical progress notes;  
3. prepare summaries of care.

#### Interpretive Guideline

### ST - N407 - Occupational Therapy Service

**Title** Occupational Therapy Service  
**Rule** 7 AAC 12.710(a)  
**Type** Rule

#### Regulation Definition

Occupational Therapy Service - (a) A facility which provides occupational therapy services must retain an occupational therapist as an employee or consultant of the facility.
### ST - N408 - Occupational Therapy Service

**Title** Occupational Therapy Service  
**Rule** 7 AAC 12.710(c)  
**Type** Rule

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<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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<tbody>
<tr>
<td>Occupational Therapy Service - (c) An occupational therapist shall directly supervise assistants.</td>
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</table>

### ST - N420 - Drug Regimen Review

**Title** Drug Regimen Review  
**Rule** 7 AAC 12.290  
**Type** Rule

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<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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<tr>
<td>7 AAC 12.290, DRUG REGIMEN REVIEW. (a) A pharmacist must review each resident's prescribed drug regimen once every 30 days, make recommendations, note the possibilities or absence of problems, irregularities, or clinically significant risks or consequences with the prescribed drug regimen, and report potential problems and concerns to the physician and the director of nursing. Reports of potential problems and concerns shall be acted upon promptly. The nursing facility shall provide for more frequent drug regimen reviews by a pharmacist, if a resident's condition required them. (b) A potential problem or concern reported under (a) of this section shall be reviewed in accordance with the risk management program under 7 AAC 12.860.</td>
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</table>
Aspen State Regulation Set: N 03.1 LTC - State Regulations

ST - N421 - Pharmaceutical Service

Title  Pharmaceutical Service

Rule  7 AAC 12.680(a) (1-3)

Type  Rule

**Regulation Definition**

Pharmaceutical Service - (a) A facility which dispenses drugs must employ a pharmacist on a regular or consultant basis. The pharmacist shall perform the following duties:
(1) procure, label, and maintain a sufficient quantity of drugs to meet patient needs at all times;
(2) inventory emergency drugs every 30 days and restock, as necessary;
(3) dispose of drugs that have been discontinued or have expired

**Interpretive Guideline**

ST - N422 - Pharmaceutical Service

Title  Pharmaceutical Service

Rule  7 AAC 12.680(a) (4-6)

Type  Rule

**Regulation Definition**

Pharmaceutical Service - (a) A facility which dispenses drugs must employ a pharmacist on a regular or consultant basis. The pharmacist shall perform the following duties:
(4) dispose of scheduled drugs that have been discontinued or have expired which are listed in schedules I - V of the Federal Comprehensive Drug Abuse Prevention and Control Act of 1970 as amended, 21 U.S.C. 801 et seq.;
(5) assure that there is no more than one person on each shift who is performing the duties under 7 AAC 12.670(e), or is a...
physician, who has access to the pharmacy stock of drugs or controlled substances;
(6) assure that drugs, chemicals, and biologicals are properly labeled regarding their content and strength.

ST - N423 - Pharmaceutical Service

Title  Pharmaceutical Service
Rule  7 AAC 12.680(a) (7-8)
Type  Rule

Regulation Definition
Pharmaceutical Service - (a) A facility which dispenses drugs must employ a pharmacist on a regular or consultant basis. The pharmacist shall perform the following duties:
(7) if a consultant pharmacist, provide a written quarterly report to the administrator on the status of the pharmaceutical service; and
(8) document and evaluate medication errors to prevent reoccurrence and to ensure the accuracy and adequacy of the medication distribution system.

Interpretive Guideline

ST - N424 - Pharmaceutical Service

Title  Pharmaceutical Service
Rule  7 AAC 12.680(b)
Type  Rule

Regulation Definition
Pharmaceutical Service - (b) When a pharmacist dispenses drugs by written prescription, the prescription must be an original or a carbon copy of the original and must be kept on file in the pharmacy. A pharmacist may dispense drugs based on a written order by a person authorized by law to prescribe.
Pharmaceutical Service - (c) A facility that dispenses drugs must have a pharmacy and therapeutics committee that is composed of:

1. a physician or the physician's representative;
2. a pharmacist or the pharmacist's representative;
3. a registered nurse or the registered nurse's representative; and
4. an administrator or the administrator's representative;

and is responsible for:

1. development and maintenance of a formulary of drugs;
2. development and implementation of procedures for safe and effective control, storage, dispensing, and administration of medications; those procedures must ensure that:
   1. drugs and biologicals are stored in secure areas; and
   2. drugs listed in schedules II, III, IV, and V under 21 U.S.C. 801 - 904 (Comprehensive Drug Abuse Prevention and Control Act of 1970) are kept locked within a secure area; and
3. development and implementation of policies limiting the duration of drug therapy and for determining the stock of poison antidotes.
Aspen State Regulation Set: N 03.1 LTC - State Regulations

ST - N426 - Pharmaceutical Service

Title  Pharmaceutical Service  
Rule  7 AAC 12.680(d)  
Type  Rule  

**Regulation Definition**

Pharmaceutical Service - (d) A verbal order for a drug may be given only to a licensed nurse or pharmacist by a person lawfully authorized to prescribe medication, and must be recorded promptly in the patient's medical record, identifying the name of the person who prescribed the order, and the signature of the person receiving the order.

**Interpretive Guideline**

ST - N427 - Pharmaceutical Service

Title  Pharmaceutical Service  
Rule  7 AAC 12.680(e)  
Type  Rule  

**Regulation Definition**

Pharmaceutical Service - (e) A standing order for a drug must specify the circumstances for drug administration, dosage, route, duration, and frequency of administration. The order must be reviewed annually and, if necessary, renewed. When a standing order is implemented for a specific patient, it must be entered into the patient's record, dated, and signed by the person who prescribed the order within 24 hours.
Title Pharmaceutical Service
Rule 7 AAC 12.680(f)
Type Rule

**Regulation Definition**

Pharmaceutical Service - (f) If the facility permits bedside storage of medications, written policies and procedures must be established for dispensing, storage, and maintenance of records for use of these medications.

Title Pharmaceutical Service
Rule 7 AAC 12.680(g)
Type Rule

**Regulation Definition**

Pharmaceutical Service - (g) An investigational drug may be used only under supervision of a principal investigator who is a member of the medical staff. Basic information concerning the dosage, route of administration, strength, actions, uses, side effects, interactions and symptoms of toxicity of an investigational drug must be available at the nursing station where an investigational drug is being administered and in the pharmacy. The pharmacist shall be responsible for the proper labeling, storage, and distribution of such drugs in accordance with the written order of the investigator.
Aspen State Regulation Set: N 03.1 LTC - State Regulations

ST - N430 - Pharmaceutical Service

Title  Pharmaceutical Service
Rule  7 AAC 12.680(h)
Type  Rule

**Regulation Definition**
Pharmaceutical Service - (h) A drug supplied by a facility may not be taken from the facility unless the medication has been properly labeled and prepared by the pharmacist in accordance with state and federal law for use outside of the facility.

**Interpretive Guideline**

ST - N440 - Infection Control

Title  Infection Control
Rule  7 AAC 12.760(a)
Type  Rule

**Regulation Definition**
Infection Control - (a) Each facility, with the exception of home health agencies, must have an infection control committee.

**Interpretive Guideline**

ST - N441 - Infection Control

Title  Infection Control
Rule  7 AAC 12.760(b)
Type  Rule
Aspen State Regulation Set: N 03.1 LTC - State Regulations

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<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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<tbody>
<tr>
<td>Infection Control - (b) The administrator or medical staff shall appoint an infection control committee composed of representatives of the medical staff, administration, nursing, and other services, that is responsible for maintenance and supervision of an infection control program.</td>
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ST - N442 - Infection Control

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<th>Title</th>
<th>Infection Control</th>
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<tr>
<td>Rule</td>
<td>7 AAC 12.760(c)</td>
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<tr>
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<tr>
<td>Infection Control - (c) The infection control committee shall establish and maintain, as part of the infection control program, (1) specific procedures for diagnosing, reporting, investigating, reviewing, and maintaining records of infection of residents and personnel, such as the procedures set out in the federal Centers for Disease Control guidelines; (2) written procedures for all departments incorporating principles or practices that reduce the risk of infection in all patient care services and areas; (3) a system for reporting communicable diseases in accordance with 7 AAC 27.005 - 7 AAC 27.010; and (4) written isolation and body substance isolation techniques for known or suspected communicable diseases or infections.</td>
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</tbody>
</table>
### Regulation Definition

**Infection Control - (d)** The infection control committee shall meet not less than quarterly, and shall retain written minutes of all meetings for at least three years.

**Infection Control - (e)** Infectious wastes must be disposed of in an incinerator which provides complete combustion.

**Infection Control - (f)** The infection control committee shall approve proposed disinfectant-detergent formulations and policies and procedures for their use.
Aspen State Regulation Set: N 03.1 LTC - State Regulations

ST - N450 - Physical Plant

Title  Physical Plant
Rule  7 AAC 12.900(a-b)
Type  Rule

**Regulation Definition**

Physical Plant - (a) Each facility, with the exception of home health agencies, frontier extended stay clinics, and birth centers, must comply with the provisions of this section.
(b) Any renovation, expansion, or new construction must comply with
   (1) the requirements of Guidelines for Design and Construction of Hospital and Health Care Facilities, American Institute of Architects, 2001 edition, adopted by reference, that are applicable to the particular facility and services provided, as follows:
      (A) secs. 1 - 6 apply to all facilities;
      (B) sec. 7 applies to the general acute care hospitals, rural primary care hospitals, and critical access hospitals;
      (C) sec. 10 applies to rehabilitation hospitals;
      (D) sec. 8 applies to intermediate care facilities for the mentally retarded and to nursing facilities;
      (E) sec. 9 applies to ambulatory surgical facilities;
      (F) secs. 7.1; 7.2, except 7.2.B15 and 7.2.C; 7.6; 7.17 - 7.19; 7.21; 7.22; 7.25 - 7.30, except 7.28.A; 8.3; and Table 2 apply to substance abuse hospitals; and
      (G) sec. 11 applies to psychiatric hospitals.
   (2) 7 AAC 09.010 - 7 AAC 09.170;
   (3) AS 18.60.580 - 18.60.660;
   (4) AS 18.60.705 - 18.60.740;
   (5) the International Building Code, as adopted by reference in, and revised under, 13 AAC 50.020; and
   (6) the International Mechanical Code, as adopted by reference in, and revised under, 13 AAC 50.023.

**Interpretive Guideline**
### Regulation Definition

Physical Plant - (c) A facility must comply with municipal fire safety regulations, with 13 AAC 50 - 13 AAC 55, and with applicable National Fire Protection Association (NFPA) standards, including the following, which are adopted by reference:

5. NFPA 101: Life Safety Code, 2000 edition; if a waiver has been issued for a requirement of NFPA 101 under 42 C.F.R. 482.41 for a hospital, under 42 C.F.R. 485.623 for a critical access hospital, under 42 C.F.R. 483.70 for a nursing home, under 42 C.F.R. 483.470 for an intermediate care facility for the mentally retarded, or under 42 C.F.R. 416.44 for an ambulatory surgical center, the waiver will be considered a waiver of that requirement for purposes of this subsection.
Aspen State Regulation Set: N 03.1 LTC - State Regulations

ST - N452 - Physical Plant

Title  Physical Plant
Rule  7 AAC 12.900(d)
Type  Rule

Regulation Definition

Physical Plant - (d) A facility must specify in written procedures the maximum allowable water temperature at an outlet for patient bathing, showering, and washing, not to exceed requirements specified in (b)(1) of this section. The facility must have the capability to reduce water temperatures, and must specify in written procedures the safety factor expressed in minutes required to reduce water temperature for particular patient sensitivity due to illness or medication.

Interpretive Guideline

ST - N453 - Physical Plant

Title  Physical Plant
Rule  7 AAC 12.900(c)
Type  Rule

Regulation Definition

Physical Plant - (c) Bed capacity will be determined as follows:
(1) available bed space in determining bed capacity for licensure includes
   (A) bed space in all nursing units, including intensive care units and minimal or self care units;
   (B) isolation rooms;
   (C) pediatrics units, including pediatrics bassinets and incubators located in the pediatrics department;
   (D) observation units equipped and staffed for overnight

Interpretive Guideline
use;

(E) space designed for, and that contains adequate space and equipment as described in (F) of this paragraph for, inpatient bed care, even if currently closed or assigned to easily convertible, non-patient uses, offices, or classrooms; and

(F) space in areas which have the necessary fixed equipment adequate for patient care, including oxygen, suction, a lavatory with fixtures, and a patient closet, and which are accessible to a nurses' station which is exclusively staffed for inpatient bed care, even if originally designed for other purposes; (2) space which will not be counted in determining bed capacity includes

(A) nurseries for newborn in the maternity department;
(B) labor rooms;
(C) recovery rooms;
(D) emergency units;
(E) preparation or anesthesia induction rooms;
(F) rooms used for diagnostic or treatment procedures;
(G) hospital staff bed areas, including accommodations for on-call staff;
(H) corridors;
(I) solaria, waiting rooms, and similar areas which are not permanently set aside, equipped, and staffed exclusively for inpatient bed care; and
(J) unfinished space, which does not include an area which is finished except for movable equipment.

ST - N454 - Physical Plant

Title Physical Plant
Rule 7 AAC 12.900(f - g)
Type Rule
Physical Plant - (f) Bed space under construction on or after November 19, 1983, must contain,
   (1) for each patient, fixed available oxygen, suction, a bedlight, and a closet;
   (2) for every two patients, a lavatory with fixtures and adjacent toilet; and
   (3) for each bed in a multiple-bed room, cubical curtain tracks.

(g) Facilities in existence before January 1, 1995, will be allowed a variance of 10 square feet from the standards for square footage of patient rooms required by Guidelines for Design and Construction of Hospital and Health Care Facilities, adopted by reference in (b)(1) of this section.

Physical Plant - (h) Except as provided in 7 AAC 12.150(h), the department may waive compliance with, or grant a variance from, a requirement in this section if the commissioner determines that an equivalent alternative is provided and the safety and well-being of patients is assured. If a facility wishes to obtain a waiver or variance, its governing body must apply in writing to the commissioner and must include in the application
   (1) the justification for the waiver;
   (2) an explanation of the reasons why the particular requirement cannot be satisfied;
   (3) a description of the equivalent alternative proposed;
and
(4) if the application for waiver involves fire safety or
other municipal or state requirements, evidence that it has
been reviewed by the appropriate municipal or state
authorities.

ST - N460 - Central Service

Title Central Service
Rule 7 AAC 12.730(a)
Type Rule

Regulation Definition
Central Service - (a) If a facility processes sterilized
instruments and supplies, it must meet the requirements in this
section. If a facility receives sterilized instruments and
supplies from another entity through contract or agreement,
the facility must ensure the contractor meets the requirements
in this section.

Interpretive Guideline

ST - N461 - Central Service

Title Central Service
Rule 7 AAC 12.730(b)
Type Rule

Regulation Definition
Central Service - (b) A facility must maintain a separate area
for processing, decontamination, if necessary, and storage of
sterile supplies and materials.

Interpretive Guideline

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Aspen State Regulation Set: N 03.1 LTC - State Regulations

ST - N462 - Central Service

Title  Central Service
Rule  7 AAC 12.730(c)
Type  Rule

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<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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<tbody>
<tr>
<td>Central Service - (c) A facility must develop and implement written policies and procedures for the cleaning, antimicrobial processing, and storage of supplies and equipment to prevent the transmission of infection through their use.</td>
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ST - N463 - Central Service

Title  Central Service
Rule  7 AAC 12.730(d)
Type  Rule

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<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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<tbody>
<tr>
<td>Central Service - (d) Traffic in an area designated for processing, decontamination, and storage of supplies must be restricted to properly attired authorized personnel. Birth centers, frontier extended stay clinics, and nursing homes are not required to comply with this subsection.</td>
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</table>

ST - N464 - Central Service

Title  Central Service
Rule  7 AAC 12.730(e)
Type  Rule
### Regulation Definition

Central Service - Shipping cartons may not be stored with sterile products.

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<tr>
<th>Regulation</th>
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<tr>
<td>ST - N465</td>
<td>Central Service</td>
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<tr>
<td>Rule 7 AAC 12.730(f)</td>
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### Regulation Definition

Central Service - A facility must retain records of bacteriological efficiency monitoring of autoclaves at recommended frequency for three years.

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<th>Regulation</th>
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<tr>
<td>ST - N466</td>
<td>Central Service</td>
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<tr>
<td>Rule 7 AAC 12.730(g)</td>
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### Regulation Definition

Central Service - Instructions for the operation of autoclaves must be posted near the equipment.

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<td>Central Service</td>
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<tr>
<td>Rule 7 AAC 12.730(h)</td>
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</table>
### Regulation Definition

Central Service - Each facility must maintain a retrieval system for supplies whose sterility is questionable.

### Interpretive Guideline

**ST - N470 - Governing Body**

*Title* Governing Body

*Rule* 7 AAC 12.630(a)

*Type* Rule

**Regulation Definition**

Governing Body - Each facility, with the exception of birth centers and intermediate care facilities for the mentally retarded, must have a governing body that assumes responsibility for implementing and monitoring policies that govern the facility's operation and for ensuring that those policies are administered in a manner that provides quality health care in a safe environment. The facility must provide to the department the name, title, and mailing address for:

1. each owner of the facility;
2. each person who is principally responsible for directing facility operations; and
3. the person responsible for medical direction.

### Interpretive Guideline

**ST - N471 - Governing Body**

*Title* Governing Body

*Rule* 7 AAC 12.630(b)(1)

*Type* Rule

**Regulation Definition**

Governing Body - The governing body shall

1. adopt, and revise when necessary, written bylaws
Aspen State Regulation Set: N 03.1 LTC - State Regulations

providing for
   (A) election or appointment of officers and committees;
   (B) appointment of a local advisory board if the governing
body is outside the state; and
   (C) frequency of meetings.

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<th>ST - N472 - Governing Body</th>
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<tr>
<td>Governing Body - (2) appoint an administrator, in accordance with written criteria</td>
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<th>ST - N473 - Governing Body</th>
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<tbody>
<tr>
<td>Governing Body - (3) maintain written records on the appointment of members to the medical staff, and the granting of privileges based on the recommendations of the medical staff.</td>
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Regulation Definition

Governing Body - (4) require medical staff to sign an agreement to follow the bylaws of the medical staff.

Interpretive Guideline

ST - N475 - Governing Body

Title Governing Body

Rule 7 AAC 12.630(b) (5)

Type Rule

Regulation Definition

Governing Body - (5) establish appeal procedures for applicants for and members of the medical staff.

Interpretive Guideline

ST - N476 - Governing Body

Title Governing Body

Rule 7 AAC 12.630(b) (6)

Type Rule

Regulation Definition

Governing Body - (6) provide resources and personnel as necessary to meet patient needs.

Interpretive Guideline

ST - N477 - Governing Body

Title Governing Body

Rule 7 AAC 12.630(b) (7)

Type Rule
Aspen State Regulation Set: N 03.1 LTC - State Regulations

Regulation Definition

Governing Body - (7) provide adequate equipment and supplies for the facility.

Interpretive Guideline

ST - N480 - Administration

Title  Administration
Rule  7 AAC 12.640(b)
Type  Rule

Regulation Definition

Administration - A facility must have an administrator, who is directly responsible to the governing body. The administrator shall
(1) coordinate staff services;
(2) provide liaison between the governing body and facility staff;
(3) report to the governing body regularly and at least annually on facility operations;
(4) provide written notice to medical staff of initial and annual appointments, or, if approved by the governing body, biennial appointments;
(5) evaluate for implementation recommendations of the facility's committees and consultants;
(6) ensure that the facility complies with program standards; and
(7) delineate responsibility and accountability of each service component of the facility to the administration.

ST - N481 - Administration

Title  Administration
Rule  7 AAC 12.640(c)
Type  Rule
Aspen State Regulation Set: N 03.1 LTC - State Regulations

**Regulation Definition**

Administration - Each facility must have an institutional budget plan which includes an annual operating budget and a capital expenditure plan for a projected three-year period. A committee comprised of representatives of the governing body and administrative staff shall prepare the plan.

**Rule 7 AAC 12.650(a) (1)**

Title Employee Health

**Regulation Definition**

Employee health program - Each facility must have an employee health program that (1) requires each employee to be evaluated within the first two weeks of employment and, except as provided otherwise in this paragraph, annually after that, to detect active cases of pulmonary tuberculosis.

**Rule 7 AAC 12.650(a) (1) (A)**

Title Employee Health

**Regulation Definition**

Employee health program - (A) an employee who has never had a positive tuberculin skin test result shall obtain a tuberculin Mantoux skin test; if the tuberculin skin test result is negative, the employee does not need to have further annual tuberculosis evaluation under this paragraph if the employee's
Aspen State Regulation Set: N 03.1 LTC - State Regulations

duties never require him or her to be in a room where patients or residents might enter, and if the employee does not handle clinical specimens or other material from patients or from their rooms; an example of such an employee is an administrative person or research worker whose place of work is remote from patient or residential care areas and who does not come in contact with clinical specimens.

ST - N484 - Employee Health

Title  Employee Health
Rule  7 AAC 12.650(a) (1) (B) (i)
Type  Rule

<table>
<thead>
<tr>
<th>Regulation Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee health program - (B) an employee who has previously had a positive tuberculin skin test result, or an employee whose tuberculin skin test obtained under (A) of this paragraph has a positive result,</td>
</tr>
<tr>
<td>(i) shall have a health evaluation by a health care provider to identify symptoms suggesting that tuberculosis disease is present; the health evaluation must also include evaluation for the presence of any of the following risk factors: evidence of inadequately treated past tuberculosis disease, history of close exposure to a case of communicable pulmonary tuberculosis within the previous two years, history of a negative tuberculin test within the previous two years, diabetes mellitus (severe or poorly controlled), diseases associated with severe immunologic deficiencies, immunosuppressive therapy, silicosis, gastrectomy, excessive alcohol intake, or human immunodeficiency virus infection; if symptoms suggesting tuberculosis disease are present, or if any of the risk factors is present, a chest x-ray shall be obtained as part of the health evaluation and the health care provider shall report the case to the section of epidemiology, division of public health.</td>
</tr>
</tbody>
</table>
ST - N485 - Employee Health

Title Employee Health

Rule 7 AAC 12.650(a) (1) (B) (ii)

Type Rule

**Regulation Definition**

Employee Health Program - (ii) if the employee has previously received appropriate antituberculosis chemotherapy and has no symptoms suggesting that tuberculosis is present, the employee need not have further annual tuberculosis evaluation under this paragraph.

**Interpretive Guideline**

ST - N486 - Employee Health Program

Title Employee Health Program

Rule 7 AAC 12.650(a) (3)

Type Rule

**Regulation Definition**

Employee Health Program - (3) requires evidence of immunization against hepatitis B by

(A) a valid immunization certificate signed by a physician listing the date of vaccination; or

(B) a copy of a record from a clinic or health center showing the date of vaccination.

**Interpretive Guideline**

ST - N490 - Personnel

Title Personnel

Rule 7 AAC 12.660(a)

Type Rule
Personnel - A facility must plan and retain records of employee orientation, in-service training programs, and employee supervision. In addition, the facility must maintain for each employee a file that includes:

1. A current job description;
2. A copy of the employee's current license or certification, if a license or certification is required by statute for the employee's profession;
3. A summary of the employee's education, training, and experience;
4. Evidence of the employee's compliance with the employee health requirements of 7 AAC 12.650; and
5. Evidence of compliance with the applicable requirements of AS 47.05.300 - 47.05.390 and 7 AAC 10.900 - 7 AAC 10.990 (Barrier Crimes, Criminal History Checks, and Centralized Registry).

ST - N491 - Personnel

Title Personnel
Rule 7 AAC 12.660(b)
Type Rule

Personnel - If required by AS 08, patient care personnel must be currently licensed, certified, authorized, or registered in the state for the practice of their particular profession.
<table>
<thead>
<tr>
<th>Title</th>
<th>Personnel</th>
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</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.660(c)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Personnel - Physicians, licensed nurses, pharmacists, physical therapists, dietitians, and social workers must be involved in the orientation and in-service education program for patient care personnel.

<table>
<thead>
<tr>
<th>Title</th>
<th>Personnel</th>
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</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.660(d)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Personnel - (d) The facility shall
(1) document in personnel files that each employee has completed all required orientation, education, and training; and
(2) establish and implement personnel policies requiring an annual evaluation of each employee's performance.

<table>
<thead>
<tr>
<th>Title</th>
<th>Contracts</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.910(a)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>
Contracts - A facility may contract with another facility or agent to perform services or provide resources to the facility.

ST - N495 - Contracts

Title Contracts
Rule 7 AAC 12.910(b)
Type Rule

Contracts - Services regulated under this chapter which are provided by contract must meet the requirements of this chapter.

ST - N496 - Contracts

Title Contracts
Rule 7 AAC 12.910(c)
Type Rule

Contracts - (c) A contract for resources or services required by regulation and not provided directly by a facility must be in writing, must be dated and signed by both parties, and must
(1) specify the respective functions and responsibilities of the contractor and the facility, and the frequency of onsite consultation by the contractor;
(2) identify the type and frequency of services to be furnished;
(3) specify the qualifications of the personnel providing services;
(4) require documentation that services are provided in
accordance with the agreement;
(5) specify how and when communication will occur
between the facility and the contractor;
(6) specify the manner in which the care or services will
be controlled, coordinated, supervised, and evaluated by the
facility;
(7) identify the procedures for payment for services
furnished under the contract; and
(8) include the current license or registration number of
the contractor, if required by state statute or regulation.

ST - N497 - Contracts

Title Contracts
Rule 7 AAC 12.910(d)
Type Rule

Regulation Definition
Contracts - Birth centers, ambulatory surgical facilities,
specialized hospitals, rural primary care hospitals, critical
access hospitals, nursing homes, and intermediate care
facilities for the mentally retarded must have a signed
agreement with a general acute care hospital for transfer of
patients who require medical or emergency care beyond the
scope of the ability or license of the facility.

ST - N500 - Laboratory Service

Title Laboratory Service
Rule 7 AAC 12.790(a)
Type Rule

Regulation Definition
Laboratory Service - (a) A facility that provides laboratory
services must comply with 7 AAC 12.790 - 7 AAC 12.850 and
must meet the requirements of 42 C.F.R. Part 493, Laboratory
Requirements, as revised as of October 1, 2005, and adopted
by reference.

<table>
<thead>
<tr>
<th>Title</th>
<th>Laboratory Service</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.790(b)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
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</tbody>
</table>

**Regulation Definition**

Laboratory Service - (b) A facility must have and maintain
written procedures on the scope of onsite laboratory services
necessary to support the facility's emergency and patient care
services.

<table>
<thead>
<tr>
<th>Title</th>
<th>Laboratory Service</th>
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</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.790(b)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Laboratory Service - (b) For laboratory tests not performed
in the facility, the facility must make arrangements with an
approved laboratory to meet the requirements of this section.
Information specifying the laboratory tests performed at the
facility, and laboratory tests available under arrangement,
must be provided to the medical staff.
### ST - N503 - Laboratory Service

**Title** Laboratory Service  
**Rule** 7 AAC 12.790(c)  
**Type** Rule

#### Regulation Definition

<table>
<thead>
<tr>
<th>Interpretive Guideline</th>
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</thead>
<tbody>
<tr>
<td>Laboratory Service - (c) A laboratory that provides blood or blood products must (1) have those products onsite or readily available from another source; and (2) maintain storage areas for those products under adequate control and supervision.</td>
</tr>
</tbody>
</table>

### ST - N504 - Mailing of laboratory specimens

**Title** Mailing of laboratory specimens  
**Rule** 7 AAC 12.830  
**Type** Rule

#### Regulation Definition

<table>
<thead>
<tr>
<th>Interpretive Guideline</th>
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<tbody>
<tr>
<td>Laboratory Service - A laboratory specimen may be referred and mailed only to an approved laboratory. The mailing containers to be used must be provided by the laboratory to which the specimens are sent.</td>
</tr>
</tbody>
</table>

### ST - N505 - Supervision/direction of laboratory service

**Title** Supervision/direction of laboratory service  
**Rule** 7 AAC 12.840(a)  
**Type** Rule
<table>
<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
</tr>
</thead>
</table>
| Laboratory Service - (a) A laboratory must be under the supervision and direction of a physician, a laboratory specialist, or a medical technologist who  
  (1) meets the applicable qualification requirements of 42 C.F.R. Part 493, adopted by reference in 7 AAC 12.790; and  
  (2) is either employed by the laboratory or under contract to the laboratory. | |

**ST - N506 - Supervision/direction of laboratory service**

**Title** Supervision/direction of laboratory service  
**Rule** 7 AAC 12.840(b)  
**Type** Rule

<table>
<thead>
<tr>
<th>Regulation Definition</th>
<th>Interpretive Guideline</th>
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</thead>
<tbody>
<tr>
<td>Laboratory Service - (b) If a medical technologist supervises the laboratory under contract, a consulting physician or laboratory specialist supervising the laboratory under contract must make quarterly visits to the laboratory and prepare a written evaluation with recommendations to the administrator and medical staff of the facility after each visit. For a consulting physician, up to two of the required visits and evaluations each year may be made by the physician's representative, who must be a medical technologist competent in one or more laboratory specialties. If a medical technologist supervises a laboratory as an employee of the laboratory, a consulting physician or a laboratory specialist under contract must make at least biannual visits to the laboratory and prepare a written evaluation and recommendations after each visit.</td>
<td></td>
</tr>
</tbody>
</table>
ST - N507 - Supervision/direction of laboratory service

**Title** Supervision/direction of laboratory service  
**Rule** 7 AAC 12.840(c)  
**Type** Rule

**Regulation Definition**  
Laboratory Service - (c) In this section, "laboratory specialties" include microbiology, serology, chemistry, hematology, and immunohematology.

ST - N510 - Radiological Service

**Title** Radiological Service  
**Rule** 7 AAC 12.780(a-d)  
**Type** Rule

**Regulation Definition**  
Radiological Service - (a) A facility that provides radiological services, with the exception of frontier extended stay clinics, must comply with the requirements of this section.  
(b) If a facility which provides radiological services does not have a radiologist on its staff, a radiologist must provide consultation services to the facility at least twice a year to assure high quality of the diagnostic radiological service.  
(c) A physician or a radiologist must have clinical responsibility for the radiological services.  
(d) Radiological services may be performed only upon the order of a person lawfully authorized to diagnose and treat illness.
## ST - N511 - Radiological Service

**Title** Radiological Service  
**Rule** 7 AAC 12.780(c-f)  
**Type** Rule

### Regulation Definition

Radiological Service - (e) If an x-ray examination is to be provided to a patient, a request by the attending physician for the x-ray examination must contain a diagnosis or a tentative diagnosis, or a concise statement of the reasons for the x-ray examination.

(f) A report of a radiological examination must be filed in the patient's medical record and maintained in the radiology unit.

### Interpretive Guideline

## ST - N512 - Radiological Service

**Title** Radiological Service  
**Rule** 7 AAC 12.780(g-m)  
**Type** Rule

### Regulation Definition

Radiological Service - (g) Diagnostic x-ray film processing must conform to the time and temperature recommendations of the manufacturer.

(h) All individuals who are employed or involved in providing radiological services or who may be exposed to radiation shall wear devices that monitor radiation exposure.

(i) A facility must keep records identifying employees who have been exposed to radiation and the amount of exposure for each employee.

(j) A facility which provides nuclear medicine services must report the type of those services provided to the department.
and must conform, unless specifically excepted by law, to the applicable standards of the Nuclear Regulatory Commission, 10 C.F.R. Parts 0 - 170, as in effect April 30, 1983, and 18 AAC 85.

(k) Radiation therapy may be given only under the direction of a radiation therapist using equipment which is specifically designed for radiation therapy.

(l) A facility which uses x-ray equipment must conform to the radiation protection standards set out in 18 AAC 85.010 - 18 AAC 85.770.

(m) In this section, "nuclear medicine services" means medical procedures that use radio isotopes or other atomic entities in the treatment or diagnosis of illness or disease.

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**ST - N520 - Medical Record Service**

**Title** Medical Record Service  
**Rule** 7 AAC 12.770(a)  
**Type** Rule

**Regulation Definition**

Medical Record Service - (a) Each facility, with the exception of home health agencies, intermediate care facilities for the mentally retarded, and birth centers, must have a medical record service that complies with the applicable provisions of this section. A frontier extended stay clinic must comply with (b), (d), (g), and (i) - (k) of this section in addition to the requirements of 7 AAC 12.483.

**ST - N521 - Medical Record Service**

**Title** Medical Record Service  
**Rule** 7 AAC 12.770(b)  
**Type** Rule
### Regulation Definition

Medical Record Service - (b) A facility must keep records on all patients admitted or accepted for treatment. The medical records, including x-ray films, are the property of the facility and are maintained for the benefit of the patients, the medical staff, and the facility. Medical records are subject to the requirements of AS 18.05.042, 7 AAC 43.030, and 7 AAC 43.032. This section does not affect other statutory or regulatory requirements regarding access to, use of, disclosure of, confidentiality of, or retention of record contents, or regarding maintenance of health information in patients' records by health care providers.

### Interpretive Guideline

Medical Record Service - (b) A facility must maintain originals or accurate reproductions of the contents of the originals of all records, including x-rays, consultation reports, and laboratory reports, in a form that is legible and readily available

1. upon request, to the attending physician or other practitioner responsible for treatment, a member of the facility's medical staff, or a representative of the department; and
2. upon the patient's written request, to another practitioner.
ST - N523 - Medical Record Service

Title Medical Record Service
Rule 7 AAC 12.770(c) (1)
Type Rule

Regulation Definition
Medical Record Service - (c) Each in-patient medical record must include, as appropriate
   (1) an identification sheet which includes the
       (A) patient's name;
       (B) medical record number;
       (C) patient's address on admission;
       (D) patient's date of birth;
       (E) patient's sex;
       (F) patient's marital status;
       (G) patient's religious preference;
       (H) date of admission;
       (I) name, address, and telephone number of a contact person;
       (J) name of the patient's attending physician;
       (K) initial diagnostic impression;
       (L) date of discharge and final diagnosis; and
       (M) source of payment

ST - N524 - Medical Record Service

Title Medical Record Service
Rule 7 AAC 12.770(c) (2-5)
Type Rule

Regulation Definition
Medical Record Service - (c) Each in-patient medical record

Interpretive Guideline

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must include, as appropriate
(2) a medical and psychiatric history and examination record;
(3) consultation reports, dental records, and reports of special studies;
(4) an order sheet which includes medication, treatment, and diet orders signed by a physician;
(5) progress notes for each service or treatment received;

ST - N525 - Medical Record Service

<table>
<thead>
<tr>
<th>Title</th>
<th>Medical Record Service</th>
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</thead>
<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.770(c) (6)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Medical Record Service - (c) Each in-patient medical record must include, as appropriate

(6) nurses' notes which must include

(A) an accurate record of care given;

(B) a record of pertinent observations and response to treatment including psychosocial and physical manifestations;

(C) an assessment at the time of admission;

(D) a discharge plan; and

(E) the name, dosage, and time of administration of a medication or treatment, the route of administration and site of injection, if other than by oral administration, of a medication, the patient's response, and the signature of the person who administered the medication or treatment; and

(F) a record of any restraint used, showing the duration of usage.
ST - N526 - Medical Record Service

**Title** Medical Record Service

**Rule** 7 AAC 12.770(c)(7 - 14)

**Type** Rule

**Regulation Definition**

Medical Record Service -  (c) Each in-patient medical record must include, as appropriate

- (7) court orders relevant to involuntary treatment;
- (8) laboratory reports;
- (9) x-ray reports;
- (10) consent forms;
- (11) operative report on in-patient and out-patient surgery. including pre-operative and post-operative diagnosis, description of findings, techniques used, and tissue removed or altered, if appropriate;
- (12) anesthesia records including pre-operative diagnosis and post-anesthesia follow-up;
- (13) a pathology report, if tissue or body fluid is removed;
- (14) recovery room records;

**Interpretive Guideline**

ST - N527 - Medical Record Service

**Title** Medical Record Service

**Rule** 7 AAC 12.770(c)(15 - 19)

**Type** Rule

**Regulation Definition**

Medical Record Service -  (c) Each in-patient medical record must include, as appropriate

- (15) labor record;
- (16) delivery record;
(17) record of a neonatal physical examination and condition on discharge;
(18) if the patient was in inpatient care for 48 hours or more, a discharge summary, prepared and signed by the attending physician or mid-level practitioner, that summarizes
   (A) significant findings and events of the patient's stay in the facility;
   (B) conclusions as to the patient's primary and any associated diagnoses; and
   (C) disposition of the patient at discharge including instructions, medications, and recommendations and arrangements for future care; and
(19) if the patient was in inpatient care for less than 48 hours, a final discharge progress note signed by the attending physician or mid-level practitioner.

ST - N529 - Medical Record Service

Title  Medical Record Service
Rule  7 AAC 12.770(d)
Type  Rule

**Regulation Definition**

Medical Record Service - A facility must maintain procedures to protect the information in medical records from loss, defacement, tampering, or access by unauthorized persons. A patient's written consent is required for release of information that is not authorized to be released without consent.

**Interpretive Guideline**
ST - N530 - Medical Record Service

Title Medical Record Service

Rule 7 AAC 12.770(e)

Type Rule

**Regulation Definition**

Medical Record Service - (e) A record must be completed within 30 days of discharge and authenticated or signed by the attending physician, dentist, or other practitioner responsible for treatment. The facility must establish policies and procedures to ensure timely completion of medical records. A record may be authenticated by a signature stamp or computer key instead of the treating practitioner's signature if the practitioner has given a signed statement to the hospital administration that the practitioner is the only person who (1) has possession of the stamp or key; and (2) may use the stamp or key.

**Interpretive Guideline**

ST - N531 - Medical Record Service

Title Medical Record Service

Rule 7 AAC 12.770(f)

Type Rule

**Regulation Definition**

Medical Record Service - (f) Medical records must be filed in accordance with a standard health information archival system to ensure the prompt location of a patient's medical record.

**Interpretive Guideline**
Title Medical Record Service

Rule 7 AAC 12.770(g)

Type Rule

**Regulation Definition**

Medical Record Service - (g) The facility must ensure that a transfer summary, signed by the physician or other practitioner responsible for treatment, accompanies the patient, or is sent by electronic mail or facsimile transmission to the receiving facility or unit, if the patient is transferred to another facility or is transferred to a nursing or intermediate care service unit within the same facility. The transfer summary must include essential information relative to the patient's diagnosis, condition, medications, treatments, dietary requirement, known allergies, and treatment plan.

**Interpretive Guideline**

ST - N533 - Medical Record Service

Title Medical Record Service

Rule 7 AAC 12.770(h)

Type Rule

**Regulation Definition**

Medical Record Service - (h) Each facility subject to the provisions of this section, with the exception of an ambulatory surgical facility and a frontier extended stay clinic, must employ the services of a health information administrator who is registered by the American Health Information Management Association or a records technician who is accredited by the American Health Information Management Association to supervise the medical record service. If the administrator or
technician is a consultant only, the administrator or technician must visit the facility not less than biannually to organize and evaluate the operation of the service and to provide written reports to the medical record service and the administration of the facility.

**ST - N534 - Medical Record Service**

**Title** Medical Record Service  
**Rule** 7 AAC 12.770(i)  
**Type** Rule

**Regulation Definition**

Medical Record Service - (i) The facility must safely preserve patient records for at least seven years after discharge of the patient, except that  
(1) x-ray films or reproductions of films must be kept for at least five years after discharge of the patient; and  
(2) the records of minors must be kept until the minor has reached the age of 21 years, or seven years after discharge, whichever is longer.

**ST - N535 - Medical Record Service**

**Title** Medical Record Service  
**Rule** 7 AAC 12.770(j)  
**Type** Rule

**Regulation Definition**

Medical Record Service - (j) If a facility ceases operation, the facility must inform the department within 48 hours before ceasing operations of the arrangements made for safe preservation of patient records as required in this section. The facility must have a policy for the preservation of patients'
medical records in the event of the closure of the facility.

ST - N536 - Medical Record Service

Title Medical Record Service
Rule 7 AAC 12.770(k)
Type Rule

**Regulation Definition**

Medical Record Service - (k) If ownership of the facility changes, the previous licensee and the new licensee shall, before the change of ownership, provide the department with written documentation that

(1) the new licensee will have custody of the patient's records upon transfer of ownership, and that the records are available to both the new and former licensee and other authorized persons; or

(2) arrangements have been made for the safe preservation of patients' records, as required in this section, and the records are available to the new and former licensees and other authorized persons.

ST - N540 - Risk Management

Title Risk Management
Rule 7 AAC 12.860(1)
Type Rule

**Regulation Definition**

Risk Management - A facility, with the exception of home health agencies and hospice agencies that do not provide inpatient care on agency premises, must have a risk management program that has

(1) provision for monitoring, evaluating, identifying,
correcting, and reassessing care practices that negatively affect quality of care and services provided or result in accident or injury to a patient, resident, or staff, and provisions for documenting deficiencies found and remedial actions taken.

### ST - N541 - Risk Management

<table>
<thead>
<tr>
<th>Title</th>
<th>Risk Management</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.860(2)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Risk Management - A facility, with the exception of home health agencies and hospice agencies that do not provide inpatient care on agency premises, must have a risk management program that has (2) a preventive maintenance program that is designed to ensure the proper functioning, safety and performance of all electrical and mechanical equipment used in the care, diagnosis, and treatment of patients or residents, and for the physical plant including the electrical, plumbing, heating, and ventilation systems and their parts, including:

- (A) implementation of policies that specify procedures and frequencies for the maintenance of all equipment and systems and all their parts, that meets or exceeds manufacturers' recommendations, and
- (B) documentation of the preventive maintenance that has occurred.

### Interpretive Guideline

**Title**  | Risk Management
---|---
**Rule** | 7 AAC 12.860(3)
**Type** | Rule
### Regulation Definition

Risk Management - A facility, with the exception of home health agencies and hospice agencies that do not provide inpatient care on agency premises, must have a risk management program that has

(3) a procedure to investigate, analyze, and respond to patient or resident grievances that relate to patient or resident care.

### Interpretive Guideline

- **ST - N543 - Risk Management**

  **Title** Risk Management
  **Rule** 7 AAC 12.860(4)
  **Type** Rule

  **Regulation Definition**
  Risk Management - A facility, with the exception of home health agencies and hospice agencies that do not provide inpatient care on agency premises, must have a risk management program that has
  (4) a job-specific orientation program and an in-service training program for each employee that provides annual instruction in
  
  (A) policies and procedures for that service;
  (B) the employee's job responsibilities and the skills necessary to meet those responsibilities;
  (C) safety, fire, and disaster plans; and
  (D) principles and techniques of infection control

  **Interpretive Guideline**

### ST - N544 - Risk Management

**Title** Risk Management
**Rule** 7 AAC 12.860(5)
**Type** Rule
Risk Management - A facility, with the exception of home health agencies and hospice agencies that do not provide inpatient care on agency premises, must have a risk management program that has

- provision of 24-hour emergency service by a physician, on site or on call, including posting the on-call physician's name and phone number at each nursing station; a frontier extended stay clinic or free-standing birth center is exempt from the requirements of this paragraph.

- quarterly fire drills for each work shift, a record showing when each drill was held, and coordination with community or area mass casualty drills.

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**ST - N545 - Risk Management**

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<tr>
<th>Title</th>
<th>Risk Management</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.860(6)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Risk Management - A facility, with the exception of home health agencies and hospice agencies that do not provide inpatient care on agency premises, must have a risk management program that has

- quarterly fire drills for each work shift, a record showing when each drill was held, and coordination with community or area mass casualty drills.

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**ST - N546 - Risk Management**

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<th>Title</th>
<th>Risk Management</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.860(7)</td>
</tr>
<tr>
<td>Type</td>
<td>Rule</td>
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</tbody>
</table>

**Regulation Definition**

Risk Management - A facility, with the exception of home health agencies and hospice agencies that do not provide inpatient care on agency premises, must have a risk management program that has

- quarterly fire drills for each work shift, a record showing when each drill was held, and coordination with community or area mass casualty drills.
### ST - N547 - Risk Management

<table>
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<th>Title</th>
<th>Risk Management</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.860(8)</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Risk Management - A facility, with the exception of home health agencies and hospice agencies that do not provide inpatient care on agency premises, must have a risk management program that has

(7) an annual review of written policies and procedures approved, signed, and dated by the administrator or the administrator's designee.

### ST - N548 - Risk Management

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<th>Title</th>
<th>Risk Management</th>
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<tbody>
<tr>
<td>Rule</td>
<td>7 AAC 12.860(9)</td>
</tr>
</tbody>
</table>

**Regulation Definition**

Risk Management - A facility, with the exception of home health agencies and hospice agencies that do not provide inpatient care on agency premises, must have a risk management program that has

(8) a training program by an instructor certified in cardiopulmonary resuscitation (CPR) for all personnel who are engaged in patient care; the training program must include certification of employees by an approved organization.
### Risk Management

A facility, with the exception of home health agencies and hospice agencies that do not provide inpatient care on agency premises, must have a risk management program that has:

1. **a method of ensuring safe storage and transportation of gas cylinder tanks.**
2. **a disaster plan developed in coordination with the local community to address the facility's response in case of a disaster; the plan must include community and state resources for staffing and supplies, and prioritized options to account for staffing shortages, disruptions in the supply line, community allocation of staff resources, telephone triage, and plans for establishing and maintaining communication with local, state, and federal emergency response agencies; the disaster plan must be in place on or before January 1, 2007, and must address response to**
   - **an earthquake, flood, major fire, tsunami, or other potential disaster relative to the area; and**
   - **a pandemic influenza outbreak; the plan must include plans for**
     - **separate entrances to buildings, and segregated**
Aspen State Regulation Set: N 03.1 LTC - State Regulations

<table>
<thead>
<tr>
<th>Title</th>
<th>Rule 7 AAC 12.880(a)</th>
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<tbody>
<tr>
<td><strong>Regulation Definition</strong></td>
<td>Outpatient Service - (a) If a facility provides outpatient service, the responsibility of the outpatient service to the medical staff and the administration of the facility must be defined in writing.</td>
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<td><strong>Regulation Definition</strong></td>
<td>Outpatient Service - (b) The outpatient service must develop a written plan describing its treatment philosophy, objectives, and organization.</td>
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</table>
Outpatient Service - (d) A medical record must be maintained for each patient who receives care in the outpatient service.

Applicable federal, state, and local laws and regulations - A facility must comply with all applicable federal, state, and local laws and regulations. If a conflict or inconsistency exists between codes or standards, the more restrictive provision applies.