

Department reorganization; and to the Office of the Ombudsman for the Institutionalized Elderly, to reflect the change in the name of that entity to the State Long-Term Care Ombudsman, pursuant to P.L. 2017, c. 131, § 202 (see N.J.S.A. 52:27G-1 et seq., particularly at 52:27G-3), and changes to that entity's contact information.

Throughout the chapter, the Department is updating mailing addresses and other contact information of entities, and cross-references to laws, rules, and publications, to which the chapter refers. The Department is also correcting spelling errors.

In accordance with N.J.S.A. 52:14B-5.1.bc, the rules at N.J.A.C. 8:36, Standards for Licensure of Assisted Living Residences, Comprehensive Personal Care Homes, and Assisted Living Programs, were scheduled to expire December 23, 2020. Pursuant to Executive Order Nos. 127 (2020) and 244 (2021) and P.L. 2021, c. 103, any chapter of the New Jersey Administrative Code that would otherwise have expired during the Public Health Emergency originally declared in Executive Order No. 103 (2020) is extended through January 1, 2022. Therefore, this chapter has not yet expired and the 30-day filing date pursuant to N.J.S.A. 52:14B-5.1.c has not yet occurred, therefore, pursuant to Executive Order No. 244 (2021), and P.L. 2021, c. 103, this notice of readoption is timely filed.

N.J.A.C. 8:36, Standards for Licensure of Assisted Living Residences, Comprehensive Personal Care Homes, and Assisted Living Programs, establishes standards and general criteria for the licensure of assisted living residences.

Subchapter 1, General Provisions, establishes the scope, purpose, and definitions for the chapter. Subchapter 2, Licensure Procedures, establishes facility licensure procedures, such as certificate of need, application for licensure, requirements

for newly constructed or expanded facilities, surveys, license requirements, surrender of license, waiver, actions against a licensee, hearings, and advertisement of assisted living. Subchapter 3, Administration, requires the establishment of an administrator position, provides the responsibilities and qualifications of persons holding that position, creates an assisted living administrators' panel, and sets forth actions that can be taken against an administrator. Subchapter 4, Resident Rights, establishes the required policies and procedures regarding resident rights. Subchapter 5, General Requirements, establishes standards addressing the types of services that facilities are to provide, ownership, policies and procedures, agreements, notices, reportable events, transportation, discharge, and interpretation services.

Subchapter 6, Resident Care Policies, requires the creation, implementation, and periodic review of policies and procedures, the full disclosure of the costs of services, and a personal needs allowance policy. Subchapter 7, Resident Assessments and Care Plans, establishes standards for admission assessments, plans of care, and health care services. Subchapter 8, Nursing Services, establishes standards for the provision of nursing services by appropriately licensed nurses and minimum registered nurse staffing requirements. Subchapter 9, Personal Care Assistants, Certified Medication Aides, and Other Direct Caregivers, establishes the qualifications of personal care assistants and medication aides, and provides minimum personal care assistant staffing requirements.

Subchapter 10, Dining Service, establishes standards for the qualifications of dietitians, the designation of food services coordinators, and the dietary services that facilities are to provide. Subchapter 11, Pharmaceutical Services, establishes

standards for pharmaceutical services, including qualifications of pharmacists, provision of pharmaceutical services, supervision of medication administration, administration of medication, the certified medication administration aide program, designation of a pharmacist, and storage and control of medications. Subchapter 12, Resident Activities, establishes standards for the provision of resident activities. Subchapter 13, Social Work Services, establishes standards for the qualifications of social workers and requirements for the provision of social work services.

Subchapter 14, Emergency Services and Procedures, establishes standards for emergency services and procedures, including emergency medical services, emergency plans and procedures, and drills and tests. Subchapter 15, Resident Records, establishes standards for resident records, including health records, availability of records, confidentiality, record retention, resident register, individual resident records, and death records. Subchapter 16, Physical Plant, establishes physical plant standards, including standards for occupancy restriction, ventilation, exit access passageways and corridors, fire detection and suppression systems, interior finishes, residential units, toilets, baths and sinks, kitchenettes, community space, laundry equipment, dietary department, administration and public areas, fire extinguisher specifications, sounding devices, and telecommunications.

Subchapter 17, Housekeeping, Sanitation, Safety and Maintenance, establishes standards for the provision of housekeeping, laundry, pest control, resident environment, waste removal, sanitation, and heating and air conditioning services to residents. Subchapter 18, Infection Prevention and Control Services, establishes standards for infection prevention and control programs, including infection control

policies and procedures, staff education and training, and regulated medical waste.

Subchapter 19, Alzheimer's Disease and Dementia Programs, establishes standards for Alzheimer's disease and dementia programs, including scope and purpose, policies and procedures, staff training, and services for residents with Alzheimer's disease and dementia.

Subchapter 20, Standards for Respite Care Services, establishes standards for respite care services, including purpose and scope, policies and procedures, and staffing. Subchapter 21, Quality Improvement, establishes standards addressing quality improvement programs, the use of restraints, and personal care services. Subchapter 22, Comprehensive Personal Care Homes, establishes standards for comprehensive personal care homes, including eligibility, resident services and an explanation of these services, physical plant, resident discharge, conversion of facilities, combination of license categories, and supplemental security income recipients. Subchapter 23, Assisted Living Programs, establishes standards for assisted living programs, including tenant/resident eligibility, service provider requirements, services provided to residents, the policy and procedure manual, resident transportation, notices and notification requirements, maintenance of records, administration and staffing, financial arrangements, resident assessments, service plans, health care plans, and health care services, dining services and meal preparation assistance, pharmaceutical assistance, resident activities, resident records, resident rights and responsibilities, reportable events, and other requirements.

The Commissioner has reviewed N.J.A.C. 8:36 and has determined that the existing chapter remains necessary, proper, reasonable, efficient, understandable, and

responsive to the purposes for which the Department originally promulgated it, as amended and supplemented over time, and, with the technical changes, should be readopted.

Therefore, pursuant to N.J.S.A. 52:14B-5.1, N.J.A.C. 8:36 is readopted and shall continue in effect for seven years.

Full text of the technical changes follows (additions indicated in boldface **thus**; deletions indicated in brackets [thus]):

8:36-1.3 Definitions

The following words and terms, when used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise:

...

“Assisted living program provider” means an organization licensed by the New Jersey Department of Health [and Senior Services] to provide all services required of an assisted living program.

“Assisted living residence” means a facility [which] **that** is licensed by the Department of Health [and Senior Services] to provide apartment-style housing and congregate dining and to assure that assisted living services are available when needed, for four or more adult persons unrelated to the proprietor. Apartment units offer, at a minimum, one unfurnished room, a private bathroom, a kitchenette, and a lockable door on the unit entrance.

...

“Certificate of Need and Licensing Program” or “Program” means a unit of the Department for which the contact information is Certificate of Need and Licensing Program, New Jersey Department of Health, PO Box 358, Trenton, NJ 08625-0358, (609) 292-6552.

...

“Commissioner” means the [New Jersey State] Commissioner of the New Jersey Department of Health [and Senior Services].

...

“Comprehensive personal care home” means a facility which is licensed by the Department of Health [and Senior Services] to provide room and board and to assure that assisted living services are available when needed, to four or more adults unrelated to the proprietor. Residential units in comprehensive personal care homes house no more than two residents and have a lockable door on the unit entrance.

...

“Department” means the New Jersey [State] Department of Health [and Senior Services] .

...

“Division of Health Facility Survey and Field Operations” or “Division” means a unit of the Department for which the contact information is Division of Health Facility Survey and Field Operations, New Jersey Department of Health, PO Box 367, Trenton, NJ 08625-0358, (800) 792-9770.

...

“Health Care Plan Review Unit” means a unit within the Division of Codes and Standards in the New Jersey Department of Community Affairs for which the contact information is PO Box 817, Trenton, NJ 08625-0817, (609) 633-8151.

...

“Licensed nursing personnel” (licensed nurse) means registered professional nurses or practical nurses licensed by the New Jersey [State] Board of Nursing in accordance with N.J.A.C. 13:37.

...

8:36-2.1 Certificate of need

(a) (No change.)

(b) [In accordance with N.J.A.C. 8:33,] **Certificate of need** application forms [for a certificate of need], **CN-19**, and instructions for completion **thereof**, may be obtained from[:] **the** Certificate of Need and [Acute Care Licensure] **Licensing** Program

[New Jersey State Department of Health and Senior Services]

PO Box 360, Room 403

Trenton, New Jersey 08625-0360

609-292-5960]

or from the Department’s forms page at <https://www.nj.gov/health/forms>.

(c) (No change.)

8:36-2.2 Application for licensure

(a) Following receipt of a certificate of need, any person, organization, or corporation desiring to operate an assisted living residence, comprehensive personal care home or assisted living program shall make application to the Commissioner for a license on forms prescribed by the Department. Such forms may be obtained from **the Certificate of Need and Licensing Program**[:].

[Director

Long-Term Care Licensing and Certification

Division of Long-Term Care Systems

New Jersey State Department of Health and Senior Services

PO BOX 367

Trenton, New Jersey 08625-0367

(609)-633-9034.]

(b) (No change.)

(c) A copy of the assisted living residence or comprehensive personal care home admission agreement or other document stating the scope of a facility's services shall be forwarded to the Director[, Long-Term Care] **of the Certificate of Need and Licensing [and Certification (see (a) above for address)] Program** for review when application for licensure is made. Review shall ensure that the admission agreement does not violate any requirements contained herein, any conditions placed on certificate of need approval, or any applicable State or Federal statutes. This subsection shall not apply when a continuing care retirement community (CCRC) contracts with its residents to provide assisted living pursuant to a continuing care agreement. This subsection

does apply, however, when a CCRC provides assisted living to a person who is not a party to a continuing care agreement. The admission agreement shall include, but not be limited to, the following:

1.-4. (No change.)

(d)-(m) (No change.)

(n) Each applicant for a license to operate a facility or program may make an appointment for a preliminary conference at the Department with the [Long-Term Care Licensing Program] **Certificate of Need and Licensing Program.**

(o)-(p) (No change.)

8:36-2.3 Newly constructed or expanded facilities

(a) Any assisted living residence or comprehensive personal care home with a construction program, whether a certificate of need is required or not, shall submit plans to the Health Care Plan Review [Services, Division of Codes and Standards, Department of Community Affairs, P.O. Box 815, Trenton, N.J. 08625-0815,] **Unit**, for review and approval prior to the initiation of construction.

(b) The licensure application for a newly constructed, renovated, or expanded facility shall include the written final release of the physical plant construction plans by[:] **the Health Care Plan Review Unit.**

[Health Care Plan Review Program

Division of Codes and Standards

New Jersey Department of Community Affairs

PO Box 815

Trenton, N.J. 08625-0815

609-633-8151]

(c) Prior to occupying a new or renovated building, the facility shall submit a certificate of occupancy, issued by the local municipality, to the Health Care Plan Review [Program of the New Jersey Department of Community Affairs (DCA)] **Unit**, and shall submit the following items to the [Long-Term Care] **Certificate of Need and** Licensing Program of the Department [of Health and Senior Services]:

1.-2. (No change.)

8:36-2.4 Surveys

(a) When the written application for licensure is approved and the building is ready for occupancy, [a survey of the facility by] representatives of the [Assisted Living Assessment and] **Division of Health Facility Survey [Program] and Field Operations** of the Department shall [be conducted] **conduct a survey of the facility** to determine if the facility adheres to the provisions of this chapter.

1. (No change.)

2. [The facility shall notify the Assisted Living Assessment and Survey Program of the Department when] **When** the deficiencies, if any, have been corrected, [and] the [Assisted Living Assessment and Survey Program] **facility shall notify the Division, which** shall schedule one or more resurveys of the facility prior to occupancy.

(b) A license shall be issued to a facility when the following conditions are met:

1. A preliminary conference to review the conditions for licensure (see N.J.A.C. 8:36-2.2(d)1 through 8) and operation has taken place between the [Long-Term Care

Licensing Program] **Certificate of Need and Licensing Program** and representatives of the facility, who will be advised that the purpose of the conference is to allow the Department to determine the facility's compliance with N.J.S.A. 26:2H-1 et seq., and amendments thereto, and the rules pursuant thereto;

2.-5. (No change.)

6. The applicant has submitted approvals from the local zoning, fire, health, and building authorities, and a copy of the certificate of occupancy or a certificate of continued occupancy that has been issued by the appropriate local authority, to the [Long-Term Care] **Certificate of Need and Licensing Program** [of the Department];

7.-8. (No change.)

(c) No facility shall admit residents to the facility until the facility has the written approval and/or license issued by the [Long-Term Care] **Certificate of Need and Licensing Program** [of the Department]. Violators of this requirement shall be subject to penalties for operating a facility without a license, pursuant to N.J.S.A. 26:2H-14 and N.J.A.C. 8:43E-1.

(d) (No change.)

8:36-2.6 Surrender of license

The facility shall notify each resident, the resident's physician, and any guarantors of payment at least 30 days prior to the voluntary surrender of a license, or as directed under an order of revocation, refusal to renew, or suspension of license. In such cases, the license shall be returned to the [Long-Term Care] **Certificate of Need**

and Licensing Program [of the Department] within seven working days after the voluntary surrender, revocation, non-renewal, or suspension of license.

8:36-2.7 Waiver

(a) (No change.)

(b) A facility seeking a waiver of these rules shall apply in writing to the Director of the **Certificate of Need and** Licensing [and Certification Unit of the Department] **Program**.

(c)-(e) (No change.)

8:36-3.2 Qualifications of the administrator of an assisted living residence or comprehensive personal care home

(a)-(b) (No change.)

(c) An applicant for certification who fails the competency examination for an assisted living administrator will be permitted to re-take the examination in accordance with the following:

1.-2. (No change.)

3. Written documentation of successful completion of a training program required [by] **at** (b) above shall be submitted to the [Certification] **Certificate of Need and Licensing** Program, [Department of Health and Senior Services, PO Box 367, Trenton, NJ 08625-0367] at least 10 days prior to the next examination the applicant will take.

(d)-(h) (No change.)

(i) In order to be eligible to renew a current certification, an assisted living administrator shall:

1. Complete at least 30 hours of continuing education regarding assisted living concepts and related topics, as specified and approved by the Department [of Health and Senior Services]. Continuing education courses shall cover the topics described in the training program for assisted living administrators [in] **at** N.J.A.C. 8:36-3.3(a)2, and be earned between the time the current certificate was issued and is due to expire; and

2. (No change.)

(j)-(n) (No change.)

8:36-3.5 Actions against an assisted living administrator

(a) A certificate issued to an assisted living administrator in accordance with this subchapter may be revoked, suspended, or restricted for improper practice. Improper practice means, but is not limited to:

1. [Finding] **A finding** of abuse, neglect, or misappropriation of property of a resident of an assisted living residence, comprehensive personal care home, or assisted living program, or of a patient, resident, or client of any other facility or agency licensed by the Department;

2.-5. (No change.)

(b)-(c) (No change.)

8:36-3.6 Assisted Living Administrators Panel

(a) (No change.)

(b) The panel shall consist of 11 members, in accordance with the following criteria:

1. One member shall be from the Department's [Long-term Care Licensing Program] **Certificate of Need and Licensing Program**;

2. One member shall be from the [Department's Long-term Care Assessment and Survey Program] **Division of Health Facility Survey and Field Operations**;

3. One member shall be from the Department['s] **of Human Services'** Medicaid Waiver Program;

4. One member shall be the **State Long-Term Care** Ombudsman [for the Institutionalized Elderly], or his or her designee;

5.-10. (No change.)

(c)-(h) (No change.)

8:36-4.1 Posting and distribution of statement of resident rights

(a) Each assisted living provider [will] **shall** post and distribute a statement of resident rights for all residents of assisted living residences, comprehensive personal care homes, and assisted living programs. Each resident is entitled to the following rights:

1.-26. (No change.)

27. The right to receive confidential treatment of information about the resident. Information in the resident's records shall not be released to anyone outside the facility without the resident's approval, unless the resident transfers to another health care facility, or unless the release of the information is required by law, a third-party payment contract, or the [New Jersey State] Department [of Health and Senior Services];

28.-36. (No change.)

37. The right to receive written notice at least 30 days in advance when the facility requests the resident's transfer or discharge, except in an emergency. This written notice shall include the name, address, and telephone number of the [New Jersey Office of the] **Long-Term Care** Ombudsman [for the Institutionalized Elderly] , and shall also be provided to the resident's legally appointed guardian, if applicable, or, with the resident's consent, to the resident's family, 30 days in advance;

38.-39. (No change.)

40. The right to voice complaints without being threatened or punished. Each resident is entitled to complain and present his or her grievances to the administrator and staff, to government agencies, and to anyone else without fear of interference, discharge, or reprisal. The facility shall provide each resident and his or her legally appointed guardian, if applicable, and the resident's family member with the names, addresses, and telephone numbers of the government agencies to which a resident can complain and ask questions, including the Department and the [Office of the] **State Long-Term Care** Ombudsman [for the Institutionalized Elderly]. These names, addresses, and telephone numbers shall also be posted in a conspicuous place in the facility;

41.-42. (No change.)

(b)-(c) (No change.)

8:36-5.3 Transfer of ownership

(a) Prior to transferring ownership of a facility or program, the prospective new owner shall submit an application to the [Long-Term Care] **Certificate of Need and Licensing Program**, including the following items:

1.-5. (No change.)

6. When a transfer of ownership application has been reviewed and deemed acceptable, an approval letter from the [Long-Term Care] **Certificate of Need and Licensing Program** shall be sent to the applicant along with licensure application forms and the licensure fee request.

7. Within five working days after the transaction has been completed, the applicant shall submit the following documents to the [Long-Term Care] **Certificate of Need and Licensing Program**:

i.-iii. (No change.)

8:36-5.4 Submission and availability of documents

(a) The facility or program shall, upon request, submit in writing any documents which are required by this chapter to the Director of the [Long Term Care] **Certificate of Need and Licensing [and Certification Unit of the Department] Program**. Additionally, upon request of the Department, the facility or program shall submit in writing data related to utilization, demographics, costs, charges, staffing, and other planning and financial data necessary to evaluate the services provided.

(b) The facility shall report the number of resident days per calendar year to the Department's [Long-Term Care] **Certificate of Need and Licensing Program** by April 15 of each year, for the prior calendar year.

8:36-5.7 Policy and procedure manual

(a) A policy and procedure manual(s) for the organization and operation of the facility or program shall be developed, implemented, and reviewed at least annually. Each review of the manual(s) shall be documented, and the manual(s) shall be available in the facility or program to representatives of the Department at all times. The manual(s) shall include at least the following:

1.-3. (No change.)

4. Policies and procedures for reporting all alleged and/or suspected cases of resident abuse or exploitation to the Complaints Program of the Division of [Long-Term Care Systems] **Health Facility Survey and Field Operations** at 1-800-792-9770. If the resident is 60 years of age or older, the State [of New Jersey Office of the] **Long-Term Care** Ombudsman [for the Institutionalized Elderly] shall also be notified, in compliance with N.J.S.A. 52:27G-7.1 et seq., at 1-877-582-6995;

5.-8. (No change.)

(b) (No change.)

8:36-5.10 Reportable events

(a) The facility shall notify the [Department] **Division of Health Facility Survey and Field Operations** immediately by telephone at (609) 633-9034 or (609) 392-2020 if after business hours, followed within 72 hours by written confirmation, of the following:

1.-2. (No change.)

3. Any suspected cases of resident abuse or exploitation, which have been reported to the State [of New Jersey Office of the] **Long-Term Care** Ombudsman [for the Institutionalized Elderly].

(b) The written notification [to the Department], as required [by] **pursuant to** (a) above, shall be forwarded by the facility to the [following address:] **Division.**

[Director

Long-Term Care Licensing and Certification Unit

New Jersey Department of Health and Senior Services

PO Box 367

Trenton, NJ 08625-0367.]

8:36-5.11 Notices

(a) The facility shall conspicuously post a notice that the following information is available in the facility during normal business hours, to residents and the public:

1.-5. (No change.)

6. The toll-free hot line number of the Department; telephone numbers of county agencies and of the State [of New Jersey Office of the] **Long-Term Care** Ombudsman; and

7. (No change.)

8:36-5.13 Admission and retention of residents

(a) - (b) (No change.)

(c) If a facility or program has reason to believe, based on a resident's behavior, that the resident poses a danger to himself or herself or others, and that the facility or program is not capable of providing proper care to the resident, then the attending physician or the physician on call, in consultation with facility or program staff and a resident representative, shall determine whether the resident is appropriately placed in that facility or program. The facility or program or resident representative shall initiate the mental health screening process in accordance with N.J.S.A. 30:4-27.1 et seq., and N.J.A.C. 10:31, Screening and Screening Outreach [Process] **Program**, and, based on the results and recommendations of that screening process, shall attempt to locate a new placement, if necessary.

(d)-(e) (No change.)

8:36-6.1 Resident care policies and procedures

(a) Written resident care policies and procedures shall be established, implemented, and reviewed at intervals specified in the policies and procedures. Each review of the policies and procedures shall be documented. Policies and procedures shall include, but not be limited to, the following:

1.-7. (No change.)

8. The control of smoking in the facility, in accordance with N.J.S.A. 26:3D-55 et seq. and [the rules promulgated thereunder] **N.J.A.C. 8:6**;

9.-11. (No change.)

8:36-9.1 Qualifications of personal care assistants

(a) For the purposes of this subchapter, each personal care assistant shall be an individual who is employed by the facility and who has completed:

1. A nurse aide training course approved by the [New Jersey State] Department [of Health and Senior Services] in accordance with N.J.A.C. 8:39-43, and shall have passed the New Jersey Nurse Aide Certification Examination;

2. (No change.)

3. A personal care assistant training course approved by the [New Jersey] Department [of Health and Senior Services] and the competency evaluation program approved by the Department resulting in personal care assistant certification.

i. (No change.)

(b)-(l) (No change.)

(m) Upon receipt of a finding that a certified personal care assistant has abused, neglected, or misappropriated the property of a resident, resulting from an investigation by the [Office of the] **State Long-Term Care** Ombudsman [for the Institutionalized Elderly], the Department, or other State or local governmental agency, including criminal justice authorities, the Department shall determine whether the finding is valid and is to be entered onto the personal care assistant abuse registry at which time a disciplinary hearing process shall be initiated in accordance with (n) below.

(n)-(o) (No change.)

8:36-9.2 Certified [Medication Aides] **medication aides**

(a) Certified medication aides shall meet the following requirements:

1. (No change.)

2. Successful completion of the medication administration training course approved by the Department [of Health and Senior Services]; and

3. Successful completion of a Department [of Health and Senior Services] approved standardized examination regarding medication administration for personal care assistants.

i. (No change.)

(b)-(c) (No change.)

(d) At least once every two years, on a schedule to be determined by the Department, a medication aide shall file an application for renewal of current certification.

1. In order to be eligible to renew a current certification, the medication aide shall have completed at least 10 hours of continuing education, seminars, or in-service training every two-year certification period.

i. The continuing education requirement shall include five hours for review of the fundamental [principals] **principles** of medication administration and the skills and knowledge necessary for the task of medication administration and five hours of continuing education and in-service training on topics of current drug use relevant to the elderly.

ii. (No change.)

2. (No change.)

(e)-(h) (No change.)

(i) Upon receipt of a finding that a certified medication aide has abused, neglected, or misappropriated the property of a resident, or was negligent or incompetent in the performance of the individual's duties, resulting from an investigation by the [Office of the] **State Long-Term Care** Ombudsman [for the Institutionalized Elderly], the Department, or other State or local governmental agency, including criminal justice authorities, the Department shall determine whether the finding is valid and is to be entered onto the certified medication aide abuse registry, at which time a disciplinary hearing process shall be initiated.

(j) Prior to entering the finding on the certified medication aide abuse registry, the Department shall provide a notice to the certified medication aide, identifying the intended action, the factual basis and source of the finding, and the individual's right to a hearing.

1. The notice [in] **at** (j) above shall be transmitted to the individual so as to provide at least 30 days for the individual to request a hearing prior to abuse registry placement. If a hearing is requested, it shall be conducted by the Office of Administrative Law or by a Departmental hearing [office] **officer** in accordance with the hearing procedures established by the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq., and 52:14F-1 et seq., and the Uniform Administrative Procedure Rules, N.J.A.C. 1:1.

2. (No change.)

(k) (No change.)

8:36-10.5 Requirements for dining services

(a)-(b) (No change.)

(c) Meals shall be planned, prepared, and served in accordance with, but not limited to, the following:

1.-5. (No change.)

6. Nutrients and calories shall be provided for each resident, based upon current recommended dining allowances [In] in the Dietary Reference Intake Tables of the Food and Nutrition Board of the National Academy of Sciences, National Research Council, incorporated herein by reference, as amended and supplemented, available on the Internet at [<http://www.iom.edu/Object.File/Master/21/372/0.pdf>]

<https://nationalacademies.org/hmd/Activities/Nutrition/SummaryDRIs/DRI-Tables.aspx> or by calling [1-800-624-6242] **(202) 334-2000**. These allowances are to

be adjusted for age, sex, weight, physical activity, and therapeutic needs of the resident, if applicable;

7.-13. (No change.)

8:36-11.7 Storage and control of medications

(a) The administrator shall provide an appropriate and safe medication storage area, either in a common area or in the resident's unit, for the storage of medications that are not self-administered by the residents. The storage area requirement may be satisfied through the use of a locked medication cart.

1.-4. (No change.)

5. Medications shall be stored in accordance with manufacturer's instructions, and/or [extemporaneously applied] pharmacy labels and/or directions, and/or United States [Pharmacopoeia] **Pharmacopeia** Drug Information (USP DI) Volume I, Drug Information for the Health Care Professional, 2005, incorporated herein by reference, as amended and supplemented and USP DI Volume II: Advice for the Patient, incorporated herein by reference, as amended and supplemented. USP DI Volume I: Drug Information for the Health Care Professional and USP DI Volume II: Advice for the Patient can be obtained by contacting Thomson-Micromedex, 6200 S. Syracuse Way, Suite 300, [Greenwood Village] **Englewood**, CO 80111, (303) 486-6400.

(b) All medications shall be kept in their original containers and shall be properly labeled and identified.

1. (No change.)

2. If a generic substitute is used, the drug shall be labeled according to N.J.A.C. 8:71 and/or the provisions identified in the publication of the Office of Generic Drugs in the Office of Pharmaceutical Science of the Center for Drug Evaluation and Research of the United States Department of Health and Human Services, "Approved Drug Products with Therapeutic Equivalence Evaluations," [24th] (**March 20, 2020** Edition), incorporated herein by reference, as amended and supplemented, commonly known as the "Orange Book." The Orange Book can be obtained by contacting the Superintendent of Documents, Government [Printing] **Publishing** Office, [P.O.] **PO** Box 371954, Pittsburgh, PA 15250-7954, (202) 512-1800 or toll-free (866) 512-1800, and is available on-line at [<http://www.fda.gov/cder/orange/default.htm>] and at

<http://www.fda.gov/cder/ob/default.htm>]

<https://www.fda.gov/media/136324/download>.

3.-4. (No change.)

5. If a customized resident medication package is utilized, it shall conform with the provisions of USP DI Volume III, Approved Drug Products and Legal Requirements, 2005, incorporated herein by reference, as amended and supplemented. USP DI Volume III, Approved Drug Products and Legal Requirements can be obtained by contacting Thomson-Micromedex, 6200 S. Syracuse Way, Suite 300, [Greenwood Village] **Englewood**, CO 80111, (303) 486-6400, under license granted by the United States Pharmacopeial Convention, Inc.

(c)-(i) (No change.)

(j) Needles and syringes shall be stored, used, and disposed of in accordance with N.J.S.A. [26:24]**26:2H**-5.10 et seq.; N.J.A.C. 8:43E-7[,], **and** 7:26-3A[,]; **and** 29 CFR [1910.1930] **1910 through 1930**, and a record shall be maintained of the purchase, storage, and disposal of needles and syringes.

(k) Controlled dangerous substances shall be stored, and records shall be maintained, in accordance with the **New Jersey** Controlled Dangerous Substances Act[s], N.J.S.A. 24:21-1 et seq., and all other Federal and State laws and regulations concerning the procurement, storage, dispensation, administration, and disposition of same.

(l) Any theft of Scheduled or Controlled Substances shall be reported to the New Jersey Department of Law and Public Safety, [Division of Consumer Affairs,] Enforcement Bureau of Professional Boards at (973) [504-6300] **648-4742**, and/or to any other

municipal, county, State, or Federal authority having jurisdiction over theft of such substances.

8:36-16.15 Fire extinguisher specifications

(a) Fire extinguishers shall comply with National Fire Protection Association (NFPA) 10, Standards For Portable Fire Extinguishers, 2002 edition, incorporated herein by reference, as amended and supplemented[. National Fire Protection Association publications are], available from: NFPA, One Batterymarch Park, [Quincy] **Quincy**, MA, [02269-9101] **02169-7471**, <https://www.nfpa.org>, **1-800-344-3555**.

(b)-(c) (No change.)

8:36-17.3 Resident environment

(a) (No change.)

(b) The following safety conditions shall be met:

1.-6. (No change.)

7. If pets are allowed in the facility, the facility shall provide safeguards to prevent interference in the lives of residents. Guidelines for pet facilitated therapy may be requested from the Department [of Health and Senior Services];

8. (No change.)

8:36-18.2 Development of infection control policies and procedures

(a) (No change.)

(b) Centers for Disease Control publications can be obtained from:

National Technical Information Service
U.S. Department of Commerce
[5285 Port Royal] **5301 Shawnee** Road
[Springfield] **Alexandria**, VA [22161] **22312**
(703) 605-6000
(800) [553-6847] **363-2086**
or
Superintendent of Documents
U.S. Government [Printing] **Publishing** Office
732 N. Capitol Street NW
Washington, D.C. [20402] **20401**
(866) 512-1800

(c) The facility shall document evidence of annual vaccination against influenza for each resident, in accordance with the [General Recommendations on Immunization of the Advisory Committee on Immunization Practices of the Centers for Disease Control, February 8, 2002] **Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices, of the Centers for Disease Control, August 27, 2021**, incorporated herein by reference, as amended and supplemented, unless such vaccination is medically contraindicated or the resident has refused the vaccine, in accordance with N.J.A.C. 8:36-4.1(a). The [General Recommendations on Immunization of the Advisory Committee on Immunization Practices of the Centers for Disease Control, February 8, 2002, which] **Prevention and Control of Seasonal Influenza with Vaccines: Recommendations**

of the Advisory Committee on Immunization Practices, of the Centers for Disease Control, August 27, 2021 [are] is available on the Internet at

[<http://www.cdc.gov/nip/publications/acip-list.htm>]

<https://www.cdc.gov/mmwr/volumes/70/rr/rr7005a1.htm>. Influenza vaccination for all residents accepting the vaccine shall be completed by November 30 of each year.

Residents admitted after this date, during the flu season and up to February 1, shall, as medically appropriate, receive influenza vaccination prior to or on admission unless refused by the resident.

(d) The facility shall document evidence of vaccination against pneumococcal disease for all residents who are 65 years of age or older, in accordance with the General Recommendations on Immunization of the Advisory Committee on Immunization Practices of the Centers for Disease Control, [February 8, 2002] **January 28, 2011**, incorporated herein by reference, as amended and supplemented, unless such vaccination is medically contraindicated or the resident has refused offer of the vaccine in accordance with N.J.A.C. 8:36-4.1(a). The General Recommendations on Immunization of the Advisory Committee on Immunization Practices of the Centers for Disease Control, February 8, 2002, which are available on the Internet at

[<http://www.cdc.gov/nip/publications/acip-list.htm>]

<https://www.cdc.gov/mmwr/preview/mmwrhtml/rr6002a1.htm>. The facility shall provide or arrange for pneumococcal vaccination of residents who have not received this immunization, prior to or on admission unless the resident refuses offer of the vaccine.

8:36-18.3 General infection control policies and procedures

(a) Written policies and procedures shall be established and implemented regarding infection prevention and control, including, but not limited to, policies and procedures for the following:

1.-7. (No change.)

8. Needles and syringes used by residents as part of home self-care shall be disposed of in accordance with N.J.S.A. [2C:136-6.1] **2C:36-6.1** and N.J.A.C. 8:43E-7[, and amendments thereto].

SUBCHAPTER 19. [ALZHEIMER'S/DEMENTIA] ALZHEIMER'S DISEASE AND DEMENTIA PROGRAMS

8:36-19.3 Staff training program for [Alzheimer's/dementia] **Alzheimer's disease and dementia**

(a) [In a] **A** facility that advertises or holds itself out as having an [Alzheimer's/dementia] **Alzheimer's disease or dementia** program[,], **shall provide** training in specialized care of residents who are diagnosed by a physician as having [Alzheimer's/dementia shall be provided] **Alzheimer's disease or dementia** to all licensed and unlicensed staff who provide direct care to residents with Alzheimer's or dementia, in accordance with N.J.S.A. 26:2M-7.2.

1. Copies of the mandatory training program may be obtained from the Department by submitting a written request to[:] **the Division of Health Facility Survey and Field Operations.**

[Long-Term Care Licensing and Certification Unit

Division of Long-Term Care Systems
New Jersey Department of Health and Senior Services
PO Box 367
Trenton, NJ 08625-0367]

8:36-22.7 Supplemental Security Income recipients

(a) (No change.)

(b) On an ongoing, annual basis, at least five percent of each comprehensive personal care home's residents shall be SSI-eligible recipients, at least half of whom shall be former psychiatric patients. This percentage shall be computed based on the number of resident days per calendar year. The facility shall report this information to the [Long-Term Care] **Certificate of Need and** Licensing [and Certification] Program by April 15 of each year for the prior calendar year.

1.-2. (No change.)

(c)-(d) (No change.)

8:36-23.6 Notices

(a) The assisted living program provider and each program site shall conspicuously post a notice that the following information is available to residents and the public at the program site and at the assisted living program provider's main office during normal business hours:

1.-4. (No change.)

5. The toll-free hot line number of the Department; telephone numbers of county agencies dealing with senior service issues; and the telephone number of the State [of New Jersey Office of the] **Long-Term Care** Ombudsman [for the Institutionalized Elderly]; and

6. (No change.)

8:36-23.8 Notification requirements

(a) When known, and with the resident's consent, the resident's family, guardian, and/or designated responsible person or designated agency shall be notified promptly in the event of the following:

1. (No change.)

2. Any serious accident, criminal act, or incident occurs which involves the resident and results in serious harm or injury or results in the resident's arrest or detention. The [Department's Long-Term Care] **Certificate of Need and Licensing** [and Certification] Program shall also be notified in writing of these events;

3.-4. (No change.)

(b) (No change.)

8:36-23.17 Reportable events

(a) (No change.)

(b) The assisted living program shall notify the Department [of Health and Senior Services] immediately by telephone at (609) 633-9034 or (609) 392-2020 **if** after business hours, followed within 72 hours by written confirmation, of the following:

1.-3. (No change.)

4. Occurrence of all reportable infections and disease as specified [in Chapter II of the State Sanitary Code Communicable Diseases] at N.J.A.C. 8:57[-1.1 through 1.12], among residents and, where known, at the program site;

5.- 6. (No change.)

7. All suspected cases of abuse, neglect or exploitation of residents which have been reported to the State [of New Jersey Office of the] **Long-Term Care** Ombudsman [for the Institutionalized Elderly].