

“Crosswalk” that correlates RAC topic, HB 3359 citation, OAR citation, and page number

RAC	Bill Section	Amendment – Changes to Rule Language	Pg
Definitions		<u>411-054-0005</u> Definitions	
	§ 25(4)	(9) “Approved dementia training”	2
	§ 25(2)	(19) “Competency”	5
	§ 25(2)	(20) “Competency Assessment”	5
	§ 35(2)	(18) “Conversion Facility”	5
	§ 5(1)(a)	(38) “Immediate Jeopardy”	7
	§ 35(7)(b)	(46) “Intensive Intervention Community”	8
	§ 25(1)	(61) “Pre-Service Training”	12
	HB 3262	(65) “Psychotropic Medication”	12
	§ 15(1)	(66) “Quality Measurement Program”	12
§ 16	(67) “Quality Measurement Council”	12	
§ 5(1)(c)	(80) “Substantial Compliance”	15	
Conversion Facilities		<u>411-054-0012</u> New Construction or Initial Licensure	16
	§ 20(2)(a)	(4) Conversion Facility “Letter of Intent” required 90 days before opening	17
	§ 20(2)(a)	(5) No market analysis needed	17
	§ 20(2)(a)	(9) Need to submit application 60 days before opening	19
		<u>411-054-0013</u> Application for Initial License/Renewal	21
	§ 20(2)(a)	(1) Application process is same for CFs and other RCFs	21
		<u>411-054-0016</u> New Applicant Qualifications	23
	§ 20(2)	Conversion facilities must meet requirements of residential care facilities	24
	§ 20(2)(a)	(4)(a) Must have consultant for 6 months to assist, unless prior experience	26
		<u>411-054-0200</u> Residential Care Facility Building Requirements	64
	§ 20(2)	(3)(c) Conversion facilities cannot be memory care communities	65
	§ 20(2)(b)	(4)(b) CFs may request exceptions from RCF corridor length requirements	66
§ 20(2)(b)	(5)(g) Must have one exterior window with min. of 8 sq feet per resident	69	

RAC	Bill Section	Amendment – Changes to Rule Language	Pg
Dementia Training		<u>411-054-0040</u> Change of Condition and Monitoring	26
	§ 35(3)	(2)(d) “Caregivers” are now “Direct care staff” throughout this rule & others	28
		<u>411-054-0070</u> Staffing Requirements & Training	
	§ 25(6)	(2)(a) Training program must be able to assess staff competency	39
	§ 25(6)	(2)(b) Facility shall maintain documentation of trainings	40
	§ 25(1)	(4) Pre-Service training required of all direct care staff	40
	§ 25(1)	(4)(a) All direct care staff shall complete dementia training	40
	§ 25(6)	(4)(b) Training requirement shall be fully implemented by 7/1/18	41
	§ 25(1)(2)	(4)(c) List of topics to include in pre-service dementia care training	42
	Existing law	(5) Direct care staff must complete certain training within 30 days of hire	43
	§ 25(3)	(6) Annual in-service training for direct care staff	44
	§ 25(3)	(6)(a) Number of hours of annual in-service training	44
	§ 25(4)	(6)(b)(A) Dementia care training must be provided by approved organizations	44
	§ 25(6)	(6)(b)(C) Methods to measure if staff have achieved knowledge of dementia	44
Existing law	(7) Additional training requirements	44	
Prescription Meds		<u>411-054-0055</u> Medications and Treatments	31
	§ 27(1)	(4)(b) Facility must ensure safe method for dispensing medications	
	§ 27(1)	(4)(b)(A) Facility shall have written policy for dispensing meds	35
	§ 27(2)	(4)(b)(B) Residents with Veteran’s Affairs benefits are exempt	35
Corrective Action		<u>411-54-110</u> Conditions	45
	§ 15(2)(a)	(1)(a) Dept may impose a license condition if substantiated finding of abuse <u>or</u>	45
	§ 15(2)(a)	(1)(b) Dept may impose license condition if finding of immediate jeopardy	46
	§ 15(2)(c)	(2) After finding of immediate jeopardy, Dept must substantiate within 30 days	46
§ 5(1)(b)	(4) Conditions may be imposed on a license if these situations occur	46	

RAC	Bill Section	Amendment – Changes to Rule Language	Pg	
Corrective Action (cont.)	§ 5(3)	(4)(f) Restriction on Admissions only used if immediate jeopardy likely to occur	46	
	Existing law	(5) Dept will provide notice at least 48 hours before issuing Order	47	
	§ 5(2)(d)(A)	(5)(a)(A) Notice must include describe what led to substantiated finding	47	
	§ 5(2)(d)(A)	(5)(a)(D) Notice will briefly describe how condition designed to remediate issue	47	
	§ 5(2)(d)(A)	(5)(a)(E) Notice will briefly describe what to do to have conditions removed	47	
	§ 5(2)(d)(B)	(5)(b) If threat is imminent, Dept may provide notice 48 hours after order issued	48	
	Existing law	(7) Process for Dept to issue Order imposing license condition	48	
	§ 5(2)(e)(A)	(7)(a)(F) Order will describe how condition designed to remediate issue	49	
	§ 5(2)(e)(B)	(7)(a)(G) Order will provide description of requirements for withdrawal of cond.	49	
	§ 24	(9) Acuity-Based Staffing Tool to be used when disagreement over staffing	50	
	Existing law	(11) Reinspection or Reevaluation	51	
	§ 5(4)(A)	(11)(a)(A) Dept will reinspect w/in 15 days of receiving facility’s written request	51	
	§ 5(4)(C)	(11)(a)(C) Dept will issue report within 30 business days following reinspection	51	
	§ 5(4)(b)	(11)(b) If facility has achieved substantial compliance, Dept will withdraw Order	51	
	§ 5(4)(c)	(11)(c) If facility has not fixed issue, Dept does not have to reinspect for 45 days	51	
	§ 5(4)(d)	(11)(d) If Dept doesn’t meet required deadlines, license condition is removed	52	
		<u>411-054-0120 Civil Penalties</u>		53
	§ 4(2)(d)	(2)(d) Definitions of levels of harm		54
	§ 4(2)(b)	(2)(e) Assessing the severity of a violation		54
	§ 4(2)(c)	(2)(f) Assessing the scope of a violation		54
	§ 4(3)(a)	(3) Determining Civil Penalties		55
	§ 4(2)(a)	(3)(b) Mitigating factors to consider when determining civil penalties		55
	§ 4(3)(a)	(4)(a) Description of how director may impose civil penalty amounts		56
§ 4(3)(c)	(4)(b) Penalties may not exceed \$20K in any 90-day period		57	

RAC	Bill Section	Amendment – Changes to Rule Language	Pg
Corrective Action (cont.)	§ 4(4)(a)	(4) Financial limits to substantiated abuse resulting in “negative outcome”	57
	§ 4(4)(b)	(5)(b) Negative outcome definitions – serious injury, rape, & sexual abuse	58
	§ 4(7)(a)	(6)(e) Notice of CP must have description of specific remediations necessary	58
	§ 4(7)(a)	(6)(f) Notice must include specific time to correct	58
	§ 4(7)(b)	(7) Dept shall hold penalty “in abeyance” for specific time for Level 2/3 violation	59
	§ 4(5) § 4(7)(b)	(11)(a) Penalty for abuse shall be reduced by at least 25% if self-reported (11)(b) Some/all of penalty withdrawn if substan compl. reached for Level 2/3	60 60
Enhanced Oversight	<u>411-054-0150 Enhanced Oversight & Supervision Program</u>		61
	§ 23(1)	(1) Purpose - assess regulatory compliance & use corrective action if necessary	61
	§ 23(2)	(3) Dept shall develop “framework” for assessing regulatory compliance	62
	§ 23(3)	(4)(a) Framework based on survey review & substantiated abuse or rule violat.	62
	§ 23(4)	(4)(d) Corrective action that may be used to prompt improvement	63
	§ 23	(5) Notification Dept must provide to facilities put in the program	63
Quality Measures	<u>411-054-0320 Quality Measurement Program and Council</u>		77
	§ 15(1)	(1) Purpose of program is to allow comparisons of facilities on quality metrics	77
	§ 16(1)	(2) Membership on the Quality Measurement Council	77
	§ 16(6)	(4) Council will determine how RCFs/ALFs will report annual metrics	78
	§ 16(3)(a)	(4)(b) Council may update metrics by rule on or after 1/1/2022	78
	§ 15(2)	(5) Each RCF/ALF shall submit annual data by 1/31 of each year (Starts 2020)	78
	§ 15(2)(a)	(5)(a) List of metrics RCFs/ALFs are required to report	78
	§ 15(3)	(6) Dept shall issue report annually by July 1 st , based on data from facilities	78
	§ 15(7)	(6)(d) Metrics reported under this program may not be used against facility	80
	§ 15(5)(a)	(7) Dept to develop online training to address top 2 statewide issues each year	80