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Date: Thu, Oct 15, 2020 at 3:18 PM  
Subject: Amended Standards for Licensed Assisted Living Facilities, 22VAC40-73  
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# COMMONWEALTH of VIRGINIA

## DEPARTMENT OF SOCIAL SERVICES

**DATE:** October 14, 2020

**TO:** Assisted Living Facilities

**FROM:** Tara Ragland, Director  
Division of Licensing Programs

**SUBJECT:** Amended Standards for Licensed Assisted Living Facilities, 22VAC40-73

This memo is to inform you of changes to the Standards for Licensed Assisted Living Facilities (ALF).

Legislation passed during the 2020 session of the Virginia General Assembly amends 22VAC40-73-450, Individualized Service Plans. The change requires that any deviation from the individualized service plan be documented in writing or electronically, include a description of the circumstances warranting deviation and the date such deviation will occur, certify that notice of such deviation was provided to the resident or his legal representative, be included in the resident's file, and in the case of deviations that are made due to a significant change in the resident's condition, be signed by an authorized representative of the assisted living facility and the resident or his legal representative. The change is effective **October 15, 2020**.

Replacement pages amending the Standards for Licensed Assisted Living Facilities, 22VAC40-73 reflecting this change are posted to the VDSS ALF web page.

Please contact your licensing inspector if you have any questions.

**22VAC40-73-450. Individualized service plans.**

- C. The comprehensive individualized service plan shall be completed within 30 days after admission and shall include the following:
1. Description of identified needs and date identified based upon the (i) UAI; (ii) admission physical examination; (iii) interview with resident; (iv) fall risk rating, if appropriate; (v) assessment of psychological, behavioral, and emotional functioning, if appropriate; and (vi) other sources;
  2. A written description of what services will be provided to address identified needs, and if applicable, other services, and who will provide them;
  3. When and where the services will be provided;
  4. The expected outcome and time frame for expected outcome;
  5. Date outcome achieved; and
  6. For a facility licensed for residential living care only, if a resident lives in a building housing 19 or fewer residents, a statement that specifies whether the resident does or does not need to have a staff member awake and on duty at night.
- D. When hospice care is provided to a resident, the assisted living facility and the licensed hospice organization shall communicate and establish an agreed upon coordinated plan of care for the resident. The services provided by each shall be included on the individualized service plan.
- E. The individualized service plan shall be signed and dated by the licensee, administrator, or his designee, (i.e., the person who has developed the plan), and by the resident or his legal representative. The plan shall also indicate any other individuals who contributed to the development of the plan, with a notation of the date of contribution. The title or relationship to the resident of each person who was involved in the development of the plan shall be included. These requirements shall also apply to reviews and updates of the plan.
- F. Individualized service plans shall be reviewed and updated at least once every 12 months and as needed for a significant change of a resident's condition. The review and update shall be performed by a staff person with the qualifications specified in subsection B of this section and in conjunction with the resident and, as appropriate, with the resident's family, legal representative, direct care staff, case manager, health care providers, qualified mental health professionals, or other persons.
- G. The master service plan shall be filed in the resident's record. A current copy shall be provided to the resident and shall also be maintained in a location accessible at all times to direct care staff, but that protects the confidentiality of the contents of the service plan. Extracts from the plan may be filed in locations specifically identified for their retention.

**22VAC40-73-450. Individualized service plans.**

H. The facility shall ensure that the care and services specified in the individualized service plan are provided to each resident, except that:

1. There may be a deviation from the plan when mutually agreed upon between the facility and the resident or the resident's legal representative at the time the care or services are scheduled or when there is an emergency that prevents the care or services from being provided.
2. Any deviation from the plan shall:
  - a. Be documented in writing or electronically;
  - b. Include a description of the circumstances warranting deviation and the date such deviation will occur;
  - c. Certify that a notice of such deviation was provided to the resident or his legal representative;
  - d. Be included in the resident's file; and
  - e. Be signed by an authorized representative of the assisted living facility and the resident or his legal representative if the deviation is made due to a significant change in the resident's condition.
3. The facility may not start, change, or discontinue medications, dietary supplements, diets, medical procedures, or treatments without an order from a physician or other prescriber.

**22VAC40-73-460. Personal care services and general supervision and care.**

A. The facility shall assume general responsibility for the health, safety, and well-being of the residents.

B. Care provision and service delivery shall be resident-centered to the maximum extent possible and include:

1. Resident participation in decisions regarding the care and services provided to him;
2. Personalization of care and services tailored to the resident's circumstances and preferences; and
3. Prompt response by staff to resident needs as reasonable to the circumstances.

**22VAC40-73-460. Personal care services and general supervision and care.**

C. Care shall be furnished in a way that fosters the independence of each resident and enables him to fulfill his potential.

D. The facility shall provide supervision of resident schedules, care, and activities, including attention to specialized needs, such as prevention of falls and wandering from the premises.

E. The facility shall regularly observe each resident for changes in physical, mental, emotional, and social functioning.

1. Any notable change in a resident's condition or functioning, including illness, injury, or altered behavior, and any corresponding action taken shall be documented in the resident's record.