

Errata – LCB File No. R043-22

Blue italic = Proposed language found in LCB File No. R043-22

Red-italic in bold = Proposed omitted material found in LCB File No. R043-22

Green italic = New language proposed as Errata

Section 6 proposed changes are as follows:

Sec. 6. *“Tier 2 training” means training for employees of a residential facility that includes, without limitation, training in:*

- 1. The psychosocial aspects of dementia;*
- 2. Current science concerning dementia;*
- 3. Signs and symptoms of dementia; and*
- 4. Working with persons ~~suffering from~~ *with* dementia, including, without limitation:*
 - (a) Communication;*
 - (b) Providing person-centered care;*
 - (c) Assessment of persons with dementia;*
 - (d) Planning the provision of care; and*
 - (e) Assisting with activities of daily living.*

Section 7 proposed changes are as follows:

Sec. 7. 1. *Tier 2 training must be:*

- (a) A training included on the list compiled pursuant to subsection 2; or*
- (b) A training provided by:*
 - (1) A nationally recognized organization focused on dementia, which may include, without limitation, the National Alzheimer’s and Dementia Resource Center and the Alzheimer’s Association, or their successor organizations;*
 - (2) An accredited college or university located in the District of Columbia or any state or territory of the United States; or*
 - (3) The Federal or State Government.*
- 2. The Division shall compile and post on an Internet website maintained by the Division a list of trainings that shall be deemed to meet the requirements of this chapter for tier 2 training.*
- 3. If a course taken pursuant to subsection (a) or (b) of section 1 does not provide a post test and certificate of completion, then the facility must provide a post-test and certificate of completion.*

Section 13 proposed changes are as follows:

Sec. 13. 1. *A course must:*

- (a) Be conducted entirely in English and consist of:*
 - (1) At least 16 hours of training in the management of medication, consisting of not less than 12 hours of classroom training and not less than 4 hours of practical training; or*
 - (2) At least 8 hours of refresher or remedial training in the management of medication.*
- (b) Include, without limitation, instruction concerning:*
 - (1) The duties, responsibilities and authorized activities of a caregiver who administers or assists with the administration of medication to residents;*
 - (2) Common abbreviations used by physicians, physician assistants, advanced practice registered nurses and pharmacists when writing prescriptions and instructions for using medications;*
 - (3) Following a plan for managing the administration of medications maintained by a residential facility pursuant to paragraph (d) of subsection 1 of NAC 449.2742 and any other policies concerning ordering new prescriptions, reordering existing prescriptions, requesting refills,*

storage and handling of different types of medication, destruction of medication in accordance with subsection 9 of NAC 449.2742 and maintaining a log of medication deliveries;

(4) Common classifications of medications, including, without limitation, generic, brand name, statins, blood thinners, nitroglycerin, laxatives, antihistamines, antibiotics, bronchodilators, diuretics, antihypertensives, analgesics, antidepressants, anti-anxiety, sedatives, hypnotics, antipsychotics, anti-ulcer, anti-osteoporosis, eye drops and ear drops;

(5) Controlled substances and other medications commonly prescribed to residents;

(6) Types of orders commonly given by physicians, physician assistants and advanced practice registered nurses;

(7) Routes by which medication can be administered, including, without limitation, oral, sublingual, transdermal, topical, otic and ophthalmic;

(8) Types of packaging for medication, including, without limitation, bottles, bubble packs, blister packs and patches;

(9) Forms of medication, including, without limitation, tablet, capsule, cream, elixir, enteric-coated tablet, fast-dissolving tablet, gel capsule, powder, inhaler, ointment, solution, suspension and transdermal patch;

(10) Allergies, interactions between drugs, contraindications, side effects, adverse reactions and toxicity;

(11) Reading the medication label;

(12) The importance of:

~~*(I) Following the instructions on a medication label;*~~

~~*(II) Administering medications as prescribed, including, without limitation, the effect of the manner in which medication is administered on the level of medication in the bloodstream and the therapeutic effect of the medication; and*~~

~~*(III) Ensuring that over-the-counter medications and dietary supplements are administered only as authorized by NAC 449.2742;*~~

(13) Determining the schedule for administering a medication based on the instructions provided by the prescribing physician, physician assistant or advanced practice registered nurse;

~~*(14) The necessity of an agreement entered into by a resident pursuant to paragraph (i) of subsection 1 of NRS 453.375 or paragraph (p) of subsection 1 of NRS 454.213 and the rights of a resident concerning the administration of medication;*~~

(15) Verifying before and during the administration of medication that:

(I) The medication is being administered to the correct resident;

(II) The correct medication is being administered to the resident;

(III) The dosage of the medication is correct;

(IV) The medication is being administered according to the schedule established by the prescribing physician, physician assistant or advanced practice registered nurse;

(V) The medication is being administered through the correct route; and

(VI) The administration of the medication is documented properly;

(16) Checking the name of the resident receiving medication, the strength and dosage of the medication and the frequency of administration against the order or prescription, the record of the administration of the medication maintained pursuant to NAC 449.2744 and the instructions on the container of the medication;

(17) When to cut or crush a pill and the proper procedure for cutting or crushing a pill;

(18) When and how to administer a liquid medication, including, without limitation, measuring the amount of a liquid medication;

(19) Antibiotic therapy and achieving therapeutic levels of an antibiotic in blood serum;

- (20) Situations where it is appropriate to administer topical solutions, including, without limitation, antibiotic cream, without an order from a physician, physician assistant or advanced practice registered nurse;*
- (21) Determining when to administer a medication if the directions provide for administration as needed;*
- (22) Maintaining a record of medication administration in accordance with NAC 449.2744;*
- (23) Actions to take if an error is made in the administration of medication;*
- (24) Signs and symptoms of an allergic reaction to medication and other changes in the condition of a resident to whom medication is administered that must be reported to a physician, physician assistant or advanced practice registered nurse;*
- (25) Situations where it is necessary to seek the assistance of providers of emergency medical services;*
- (26) Assisting residents who use oxygen, residents who receive kidney dialysis and residents with diabetes, dementia, Parkinson's disease and asthma;*
- (27) Dealing with medication-seeking behavior and other problematic behavior of residents relating to medication;*
- (28) Assisting residents with the self-administration of medication;*
- (29) Preventing infectious diseases, including, without limitation, proper procedures for hand washing and actions to take when exposed to blood-borne pathogens; and*
- (30) Finding necessary information concerning medications.*
- (c) Require a participant in the course to demonstrate competency in:*
 - (1) Washing hands;*
 - (2) Putting on and removing gloves;*
 - (3) Pouring medication and passing the medication to a resident while performing the duties described in subparagraphs (15) and (16) of paragraph (b);*
 - (4) Assisting with the administration of medication orally, sublingually, topically or through eye drops, ear drops, nose drops or spray and inhalers;*
 - (5) Cutting and crushing pills;*
 - (6) Reading and interpreting the label of a prescription medication;*
 - (7) Labeling over-the-counter medications and nutritional supplements;*
 - (8) Counting the amount of a controlled substance;*
 - (9) Properly storing medications;*
 - (10) Recording the administration of medication in a record of medication administration maintained pursuant to NAC 449.2744 if:*
 - (I) The medication is administered pursuant to a routine schedule; and*
 - (II) The instructions of the prescribing physician, physician assistant or advanced practice registered nurse provide for administration as needed;*
 - (11) Recording an order to discontinue medication in a record of medication administration maintained pursuant to NAC 449.2744;*
 - (12) Completing a report documenting an error in the administration of medication;*
 - (13) Documenting the delivery and destruction of medication in a log maintained pursuant to NAC 449.2744;*
 - (14) Completing a form to notify the physician, physician assistant or advanced practice registered nurse who prescribed or ordered a medication for a resident if the resident refuses or otherwise misses an administration of the medication as required by subsection 7 of NAC 449.2742;*
 - (15) Recording a change to an order or prescription in the record of medication administration and on the container of the medication; and*
 - (16) Destroying unused medication in accordance with subsection 9 of NAC 449.2742.*

(d) Require a participant in the course to achieve a passing score of at least 80 percent on an examination in order to receive a certificate of completion. The examination must:

(1) Consist of questions prescribed by the Division; and

(2) Be administered in a manner approved by the Division.

(e) Result in the award of a certificate of completion approved by the Division to each person who successfully completes the course, including, without limitation, successfully completing the competency demonstration described in paragraph (c) and achieving a passing score on the examination described in paragraph (d). The certificate must be signed by the instructor and must include, without limitation:

(1) The number of hours of training completed;

(2) The names of the person who completed the course and the instructor;

(3) The date of the training;

(4) The approval code issued by the Division pursuant to section 12 of this regulation; and

(5) The approval code issued by the Division to the instructor of the course pursuant to section 14 of this regulation.

2. A person or entity that offers a course shall:

(a) Ensure that, upon the request of a participant in a course, the participant is provided with the written evaluation of the content and presentation of the course provided to the Division pursuant to paragraph (d) of subsection 1 of section 12 of this regulation to the participant;

(b) Allow the participant to complete the evaluation; and

(c) Review and consider the completed evaluation.

3. The person or entity that offers a course shall maintain attendance records for the course for at least 2 years after the final date on which the course took place and provide to the Division upon request.

Section 15 proposed changes are as follows:

Sec. 15. 1. An instructor must:

(a) Be authorized to use a curriculum concerning the management of medication that is approved by the Division pursuant to section 12 of this regulation;

(b) Have completed:

(1) At least 16 hours of training in the management of medication, consisting of not less than 12 hours of classroom training and not less than 4 hours of practical training, approved by the Division pursuant to section 12 of this regulation within the year immediately preceding the submission of an application pursuant to section 14 of this regulation; or

(2) At least 16 hours of training in the management of medication, consisting of not less than 12 hours of classroom training and not less than 4 hours of practical training approved by the Division pursuant to section 12 of this regulation, at any time and at least 8 hours of refresher or remedial training in the management of medication approved by the Division pursuant to section 12 of this regulation within the year immediately preceding the submission of an application pursuant to section 14 of this regulation;

(c) Have the ability to speak, read, write and teach the entire course in the English language;

(d) Have at least 3 years of experience administering medication or supervising the administration of medication in a medical facility or a facility for the dependent or be licensed in good standing as a physician, physician assistant, advanced practice registered nurse, registered nurse or licensed practical nurse; and

(e) In addition to passing the examination administered pursuant to paragraph (d) of subsection 1 of section 13 of this regulation at the conclusion of the course completed pursuant to paragraph (b), have achieved a score of at least 80 percent on a comprehensive examination concerning:

- (1) The curriculum that the applicant proposes to teach;*
 - (2) Regulations concerning the management of medication; and*
 - (3) Skills for presenting information in person or by videoconference.*
- 2. When teaching a course, the instructor shall:*
- (a) Utilize and follow the curriculum approved by the Division pursuant to section 12 of this regulation while providing comprehensive instruction concerning each topic in the curriculum;*
 - (b) Issue certificates of completion only to persons who meet the requirements of paragraph (e) of subsection 1 of section 13 of this regulation;*
 - (c) Protect the integrity of the examination administered pursuant to paragraph (d) of subsection 1 of section 13 of this regulation by refraining from sharing the questions on the examination and the answers to those questions with any person who is not authorized to view such questions and answers;*
 - (d) Educate himself or herself concerning the provisions of NAC 449.196, 449.2742, 449.2744 and 449.2746 and provide accurate information concerning those provisions to participants in the course;*
 - (e) Notify the Division of any changes in the information submitted to the Division as part of an application pursuant to section 14 of this regulation;*
 - (f) Verify the identity of each person who participates in a course of training for which the person provides instruction;*
 - (g) Administer and supervise the examination described in paragraph (d) of subsection 1 of section 13 of this regulation in a manner approved by the Division;*
 - ~~*(h) Not later than 10 days after the conclusion of a course, provide electronically to the Division a list of the names of each participant in the course; and*~~
 - ~~*(i) Allow employees of the Division to attend the course, with or without prior notice.*~~

Section 19 proposed changes are as follows:

Sec. 19. NAC 449.196 is hereby amended to read as follows:

449.196 1. A caregiver of a residential facility must:

- (a) Be at least 18 years of age;*
 - (b) Be responsible and mature and have the personal qualities which will enable him or her to understand the problems of elderly persons and persons with disabilities;*
 - (c) Understand the provisions of NAC 449.156 to 449.27706, inclusive, **and sections 2 to 16, inclusive, of this regulation** and sign a statement that he or she has read those provisions;*
 - (d) Demonstrate the ability to read, write, speak and understand the English language;*
 - (e) Possess the appropriate knowledge, skills and abilities to meet the needs of the residents of the facility;*
 - ~~*(f) Not later than 40 60 days after commencing employment with the residential facility, receive not less than 4 hours of a combination of tier 1 and tier 2 training related to care for the residents of the facility; and*~~
 - ~~*(g) Receive annually not less than 8 hours of training related to providing for the needs of the residents of a residential facility. **Such training must include, without limitation, at least 2 hours of tier 2 training.***~~
2. If a resident of a residential facility uses prosthetic devices or dental, vision or hearing aids, the caregivers employed by the facility must be knowledgeable of the use of those devices.

3. If a caregiver assists a resident of a residential facility in the administration of any medication, including, without limitation, an over-the-counter medication or dietary supplement, the caregiver must:

(a) Before assisting a resident in the administration of a medication, receive the training required pursuant to paragraph (e) of subsection 6 of NRS 449.0302, which must include at least 16 hours of training in the management of medication consisting of not less than 12 hours of classroom training and not less than 4 hours of practical training, and obtain a certificate acknowledging the completion of such training;

(b) Receive annually at least 8 hours of training in the management of medication and provide the residential facility with satisfactory evidence of the content of the training and his or her attendance at the training; *and*

(c) Complete the training program developed by the administrator of the residential facility pursuant to paragraph (e) of subsection 1 of NAC 449.2742 . [; *and*

(d) Annually pass an examination relating to the management of medication approved by the Bureau.]

Section 20 proposed changes are as follows:

Sec. 20. NAC 449.200 is hereby amended to read as follows:

449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include:

(a) The name, address, telephone number and social security number of the employee;

(b) The date on which the employee began his or her employment at the residential facility;

(c) Records relating to the training received by the employee [;], *including, without limitation:*

(1) Certificates of completion for all training completed by the employee; and

(2) If a certificate of completion for tier 2 training is not from a course listed on the Internet website maintained by the Division ~~does not~~ it must include a list of topics covered by the training, the syllabus, or an outline for the training;

(d) The health certificates required pursuant to chapter 441A of NAC for the employee;

(e) Evidence that the references supplied by the employee were checked by the residential facility; and

(f) Evidence of compliance with NRS 449.122 to 449.125, inclusive.

2. The personnel file for a caregiver of a residential facility must include, in addition to the information required pursuant to subsection 1:

(a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation; and

(b) Proof that the caregiver is 18 years of age or older.

3. The administrator may keep the personnel files for the facility in a locked cabinet and may, except as otherwise provided in this subsection, restrict access to this cabinet by other employees of the facility. Copies of the documents which are evidence that an employee has been certified to perform first aid and cardiopulmonary resuscitation and that the employee has been tested for tuberculosis must be available for review at all times. The administrator shall make the personnel files available for inspection by the Bureau within 72 hours after the Bureau requests to review the files.

Section 22 proposed changes are as follows:

Sec. 22. NAC 449.259 is hereby amended to read as follows:

449.259 1. A residential facility shall [;] *ensure that the staff of the facility collaborate with each resident of the facility, the family of the resident and other persons who provide care for the*

resident, including, without limitation, a qualified provider of health care, as interpreted by section 8 of this regulation, to:

- (a) Develop a person-centered service plan for the resident; and*
- (b) Review the person-centered service plan at least once each year.*

2. A person-centered service plan developed pursuant to this section must include, without limitation:

(a) [Provide each resident with protective] Provisions concerning activities of daily living, medication management, cognitive safety, assistive devices, special needs, social and recreational needs and involvement of ancillary services;

(b) Protective supervision as necessary [;

(b) Inform] for the resident;

(c) The manner in which all caregivers will be informed of the required supervision [;

(c) Provide each resident with] of the resident;

(d) The manner in which the facility will ensure that the resident has the opportunity to attend the religious service of his or her choice and participate in personal and private pastoral counseling;

[(d) Permit a]

(e) Permission for the resident to rest in his or her room at any time;

[(e) Permit a]

(f) Permission for the resident to enter or leave the facility at any time if the resident:

(1) Is physically and mentally capable of leaving the facility; and

(2) [The resident complies] Complies with the rules established by the administrator of the facility for leaving the facility;

[(f) Provide laundry]

(g) Laundry services for [each] the resident unless [a] the resident elects in writing to make other arrangements;

[(g) Ensure]

(h) The manner in which the facility will ensure that [each] the resident's clothes are clean, comfortable and presentable; [and

(h) Inform each]

(i) A requirement that the facility must inform the resident or his or her representative of the actions that the resident should take to protect the resident's valuables [.] ;

(j) A written program of activities for the resident that includes ~~at least 10 hours each week of~~ scheduled and unscheduled activities that are suited to his or her interests and capacities; and

(k) If the resident has Alzheimer's disease or another form of dementia, measures to address that dementia and ensure the safety of the resident in the facility, including, without limitation:

(1) Any measures taken pursuant to NAC 449.2754 or 449.2756; and

(2) Provisions for the transfer of the resident pursuant to NAC 449.2706 if:

(I) It is determined through an assessment conducted pursuant to paragraph (c) of subsection 1 of NRS 449.1845 that the resident meets the criteria prescribed in paragraph (a) of subsection 2 of that section; and

(II) The facility does not meet the requirements of NAC 449.2754 or 449.2756 or is otherwise unable to properly care for the resident.

[2.] 3. The administrator of a residential facility may require a resident who leaves the facility to inform a member of the staff of the facility upon his or her departure and return.

[3.] 4. The employees of a residential facility shall:

(a) Treat each resident in a kind and considerate manner; and

(b) Respect each resident's independence and ability to make decisions on his or her own, whenever possible.

Section 23 proposed changes are as follows:

Sec. 23. NAC 449.260 is hereby amended to read as follows:

449.260 1. The caregivers employed by a residential facility shall:

- (a) Ensure that the residents are afforded an opportunity to enjoy their privacy, participate in physical activities, relax and associate with other residents;
- (b) Provide group activities that provide mental and physical stimulation and develop creative skills and interests;
- (c) Plan recreational opportunities that are suited to the interests and capacities of the residents;
- (d) Provide each resident with a written program of activities;
- (e) Provide for the residents at least 10 hours each week of scheduled activities that are suited to their interests and capacities;
- (f) Encourage **[the residents] each resident** to participate in the activities scheduled pursuant to **[paragraph (e);] his or her person-centered service plan;** and
- (g) ~~(e)~~ Post, in a common area of the facility, a calendar of activities for each month that notifies residents of the major activities that will occur in the facility. The calendar must be:
 - (1) Prepared at least 1 month in advance; and
 - (2) Kept on file at the facility for not less than 6 months after it expires.

2. The administrator of a residential facility with at least 20 residents shall appoint a member of the staff of the facility who will be responsible for the organization, conduct and evaluation of activities for the residents. The person so appointed shall ensure that the activities are suited to the interests and capacities of the residents.

3. The administrator of a residential facility with 50 or more residents shall, in addition to appointing a member of the staff of the facility pursuant to subsection 2, appoint such other members of the staff as the administrator deems necessary to assist the person who is responsible for conducting the activities.

4. A residential facility shall have areas of sufficient size to conduct indoor and outdoor activities, including, without limitation:

- (a) A common area that complies with the provisions of NAC 449.216; and
- (b) An outdoor activity area that is easily accessible for the residents and is safe from vehicular traffic.