

Topic: “Assisted living” endorsement on Residential Facility for Groups health facility license

Contact: Paul Shubert, Chief of Bureau of Health Care Quality and Compliance, pshubert@health.nv.gov or (702) 486-6515

Date: June 10, 2019

To: Residential facility for groups health facility licensees in Nevada

The Division of Public and Behavioral Health has identified some residential facilities for groups (RFG) that have self-identified as an “assisted living facility” in policies, employee handbooks and promotions without receiving an endorsement on their state license. The overarching purpose of this technical bulletin is to explain existing law and regulation that requires facilities to apply for and receive the assisted living endorsement before stating such services are provided in the facility.

Health facilities licensed in Nevada as RFGs are cautioned against promoting themselves as providing assisted living services without the proper endorsement on their license.

Under Nevada law, an RFG cannot claim to offer assisted living services unless it applies for and receives the endorsement on its license from the Bureau of Health Care Quality and Compliance (HCQC), which will review the application and approve or deny it.

Under [Nevada Revised Statutes Chapter 449.0302](#), a facility cannot be licensed as a residential facility for groups which provides assisted living services and a residential facility for groups shall not claim that it provides assisted living services unless:

- Before authorizing a person to move into the facility, the facility makes a full written disclosure to the person regarding what services of personalized care will be available to the person and the amount that will be charged for those services throughout the resident’s stay at the facility.
- The residents of the facility reside in their own living units which:
 - Contain toilet facilities (with certain exceptions);
 - Contain a sleeping area or bedroom; and
 - Are shared with another occupant upon consent of both occupants.
- The facility provides personalized care to the residents of the facility and the general approach to operating the facility incorporates these core principles:
 - The facility is designed to create a residential environment that actively supports and promotes each resident’s quality of life and right to privacy;
 - The facility is committed to offering high-quality supportive services that are developed by the facility in collaboration with the resident to meet the resident’s individual needs;
 - The facility provides a variety of creative and innovative services that emphasize the particular needs of each individual resident and the resident’s personal choice of lifestyle;
 - The operation of the facility and its interaction with its residents supports, to the maximum extent possible, each resident’s need for autonomy and the right to make decisions regarding his or her own life;
 - The operation of the facility is designed to foster a social climate that allows the resident to develop and maintain personal relationships with fellow residents and with persons in the general community;
 - The facility is designed and operated to minimize the need for its residents to move out as their physical and mental conditions change over time; and
 - The facility is operated in such a manner as to foster a culture that provides a high-quality environment for the residents, their families, the staff, any volunteers and the community at large.

Finally, the services provided by a residential facility that provides assisted living services must include, without limitation, services that will enable the residential facility to retain residents who have the medical needs or conditions described in [NAC 449.2712 to 449.2734](#), inclusive, and [449.275](#).

RFGs that want to offer assisted living services but do not have the endorsement can find application materials online at the [Residential Facilities for Groups licensing web page](#).

Note

This technical bulletin summarizes provisions of Nevada Revised Statutes and Nevada Administrative Code. For full language of those provisions, click on the links provided above.



Signed:

Date: 6/10/19

Lisa A. Sherych, Interim Administrator
Division of Public and Behavioral Health