

# A COMPARISON OF PENNSYLVANIA'S PERSONAL CARE HOME AND ASSISTED LIVING RESIDENCE REGULATIONS

(55 Pa. Code Chapter 2600 and 55 Pa. Code Chapter 2800)



Advancing quality. Improving lives.

The Pennsylvania Health Care Association (PHCA), in response to innumerable requests from our colleagues in the Assisted Living and Personal Care professions, has reprinted this **PCH/ALR Regulatory Comparison Guide**. Over the last six years, we have been told how useful this Guide has been. Now, with many more facilities considering whether to become licensed as Assisted Living, the demand for this Guide has increased dramatically.

For almost 65 years, PHCA has advocated for Pennsylvania's most vulnerable older and disabled residents and their providers of care, which include assisted living residences, personal care homes and nursing facilities. We are proud to be recognized as the largest and most effective association representing these sectors.

In 2007, the Commonwealth of Pennsylvania defined and established Assisted Living, which is for individuals typically needing more care than is usually provided by personal care homes but less than the 24-hour care provided in nursing homes. The assisted living residence regulations (55 Pa. Code Chapter 2800) were published on July 17, 2010, and became effective on January 18, 2011. These regulations contain many provisions that are different from the personal care home regulations (55 Pa. Code Chapter 2600) that have been in effect since 2005. It is important that both providers and consumers understand the differences in the regulations governing both sectors.

This publication delivers to both providers and consumers an easy to understand guide to navigate the similarities and differences between the regulations for assisted living residences (2800) and personal care homes (2600). To assist the user: the first column provides the regulatory language from the personal care home regulations; the second column provides the regulatory language from the assisted living residence regulations **with the regulatory differences noted in bold, italics and underlined**; and the third column provides a brief summary of the differences between the two regulations, as well as space for your own notes. This comparison document is also posted on the PHCA website at [www.phca.org](http://www.phca.org) under the "AL/PC Members Only" section.

The PHCA AL/PC Board and staff hope you find this Comparison Guide insightful. For more information, please call 717-221-1800 or visit [www.phca.org](http://www.phca.org).



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# Questions to Consider Before Pursuing an ALR License

1. What resident population does the provider want to serve based on the care and financial needs of the consumers in the surrounding community?
  - a. Does the provider want to participate as a network provider in the PA Dept. of Human Services Medicaid Managed Long-Term Services and Supports program called Community HealthChoices?
2. What potential business and resident benefits could be achieved by transitioning from Personal Care Home (PCH) to Assisted Living Residence (ALR) licensure?
3. Is the provider prepared to meet the staffing requirements related to the following:
  - a. Administrator. See §2800.53; §2800.56; §2800.64
  - b. Licensed nurse and dietician on staff or under contract. See §2800.60
  - c. Staff training.
    - i. First aid and CPR training ratio. See §2800.63
    - ii. Direct care staff orientation and annual training. See §2800.65
    - iii. Dementia training. See §2800.69
4. Is the provider committed and prepared to allow residents to age in place up to needing 24/7 skilled nursing care?
5. Does the provider have the in-house resources or the provider network needed to fulfill the supplemental health care services requirements? See §2800.220(e)
6. Does the provider need to add services not currently provided and/or staff to meet the required core service packages (independent core package and enhanced service package)? See §2800.220(b)&(c)
7. Is the provider prepared to establish an informed consent process to allow the residents to direct their own care? See §2800.30
8. Does the provider meet the following physical plant requirements:
  - a. Living units including kitchen capacity. See §2800.101
  - b. Bathrooms. See §2800.102
  - c. Indoor activity space. See §2800.98
  - d. Dining room. See §2800.104
9. If the provider does not meet the above physical plant requirements, can the provider demonstrate that a waiver of the provision will not negatively impact a resident's quality of life? See §2800.19
10. What additional measures (staffing, physical plant, operational), if any, will be needed to ensure safe evacuation of all residents as they age in place?

*For further help in navigating the similarities and differences between the PCH regulations (Chapter 2600) and the ALR regulations (Chapter 2800), please refer to the PHCA 'Green Book'. For further assistance in determining whether to transition from a PCH license to an ALR license, please contact Gail Weidman, PHCA Director of Policy and Regulatory Affairs, or Brandon Smeltzer, PHCA Director of Assisted Living and Personal Care, with the Pennsylvania Health Care Association at 717-221-1800.*

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Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<b>General Provisions</b>		
<p><b>§ 2600.1. Purpose.</b></p> <p>(a) The purpose of this chapter is to protect the health, safety and well-being of personal care home residents.</p> <p>(b) Personal care homes are designed to provide safe, humane, comfortable and supportive residential settings for adults who do not require the services in or of a licensed long-term care facility, but who do require assistance or supervision with activities of daily living, instrumental activities of daily living, or both. Residents who live in personal care homes that meet the requirements in this chapter will receive the encouragement and assistance they need to develop and maintain maximum independence and self-determination.</p>	<p><b>§ 2800.1. Purpose.</b></p> <p>(a) The purpose of this chapter is to protect the health, safety and well-being of assisted living residents.</p> <p>(b) <u><i>Assisted living residences are a significant long-term care alternative to allow individuals to age in place. Residents who live in assisted living residences that meet the requirements in this chapter will receive the assistance they need to age in place and develop and maintain maximum independence, exercise decision-making and personal choice.</i></u></p>	
<p><b>§ 2600.2. Scope.</b></p> <p>(a) This chapter applies to personal care homes as defined in this chapter, and contains the minimum requirements that</p>	<p><b>§ 2800.2. Scope.</b></p> <p>(a) This chapter applies to assisted living residences as defined in this chapter, and contains the minimum requirements that</p>	

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Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>shall be met to obtain a license to operate a personal care home.</p> <p>(b) This chapter does not apply to commercial boarding homes or to facilities operated by a religious organization exclusively for the care of clergy or other individuals in a religious profession.</p>	<p>shall be met to obtain a license to operate an assisted living residence.</p> <p>(b) <u><i>This chapter does not apply to personal care homes, domiciliary care homes, independent living communities or commercial boarding homes.</i></u></p>	
<p><b>§ 2600.3. Inspections and licenses.</b></p> <p>(a) The Department will annually conduct at least one onsite unannounced inspection of each personal care home.</p> <p>(b) A license will be issued to the legal entity by the Department if, after an investigation by an authorized agent of the Department, the requirements for a license are met.</p>	<p><b>§ 2800.3. Inspections and licenses.</b></p> <p>(a) The Department will annually conduct at least one onsite unannounced inspection of each assisted living residence.</p> <p>(b) <u><i>Additional announced or unannounced inspections may be conducted at the Department's discretion.</i></u></p> <p>(c) A license will be issued to the legal entity by the Department if, after an investigation by an authorized agent of the Department, the requirements for a license are met.</p>	<p>In the ALR setting the Department added provisions that allow for additional announced and unannounced inspections.</p>

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Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
(c) The personal care home shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.	(d) The assisted living residence shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the assisted living residence.	
<p><b>§ 2600.4. Definitions.</b></p> <p>The following words and terms, when used in this chapter, have the following meanings, unless the context clearly indicates otherwise:</p> <p><i>ADL—Activities of daily living</i>—The term includes eating, drinking, ambulating, transferring in and out of a bed or chair, toileting, bladder and bowel management, personal hygiene, securing health care, managing health care, self-administering medication and proper turning and positioning in a bed or chair.</p> <p><i>Abuse</i>—The occurrence of one or more of the following acts:</p> <p>(i) The infliction of injury, unreasonable confinement, intimidation or punishment</p>	<p><b>§ 2800.4. Definitions.</b></p> <p>The following words and terms, when used in this chapter, have the following meanings, unless the context clearly indicates otherwise:</p> <p><i>ADL—Activities of daily living</i> —The term includes eating, drinking, ambulating, transferring in and out of a bed or chair, toileting, bladder and bowel management, personal hygiene, securing health care, managing health care, self-administering medication and proper turning and positioning in a bed or chair.</p> <p><i>Abuse</i>—The occurrence of one or more of the following acts:</p> <p>(i) The infliction of injury, unreasonable confinement, intimidation or punishment</p>	

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## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>with resulting physical harm, pain or mental anguish.</p> <p>(ii) The willful deprivation by the personal care home or its staff persons of goods or services which are necessary to maintain physical or mental health.</p> <p>(iii) Sexual harassment, rape or abuse, as defined in 23 Pa.C.S. Chapter 61 (relating to protection from abuse).</p> <p>(iv) Exploitation by an act or a course of conduct, including misrepresentation or failure to obtain informed consent which results in monetary, personal or other benefit, gain or profit for the perpetrator, or monetary or personal loss to the resident.</p> <p>(v) Neglect of the resident, which results in physical harm, pain or mental anguish.</p> <p>(vi) Abandonment or desertion by the personal care home or its staff persons.</p> <p><i>Adult</i>—An individual who is 18 years of age or older.</p>	<p>with resulting physical harm, pain or mental anguish.</p> <p>(ii) The willful deprivation by the assisted living residence or its staff persons of goods or services which are necessary to maintain physical or mental health.</p> <p>(iii) Sexual harassment, rape or abuse, as defined in 23 Pa.C.S. Chapter 61 (relating to protection from abuse).</p> <p>(iv) Exploitation by an act or a course of conduct, including misrepresentation or failure to obtain informed consent which results in monetary, personal or other benefit, gain or profit for the perpetrator, or monetary or personal loss to the resident.</p> <p>(v) Neglect of the resident, which results in physical harm, pain or mental anguish.</p> <p>(vi) Abandonment or desertion by the assisted living residence or its staff persons.</p> <p><i>Adult</i>—An individual who is 18 years of age or older.</p> <p><u><b>Age in place or aging in place— Receiving care and services at a licensed</b></u></p>	<p>New definition applicable to the ALR setting. Adding this definition and the</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><i>Agent</i>—An individual authorized by the Department to enter, visit, inspect or conduct an investigation of a personal care home.</p> <p><i>Ancillary staff person</i>—An individual who provides services for the residents other than activities of daily living.</p>	<p><b><u>assisted living residence to accommodate changing needs and preferences in order to remain in the assisted living residence.</u></b></p> <p><i>Agent</i>—An individual authorized by the Department to enter, visit, inspect or conduct an investigation of an assisted living residence.</p> <p><i>Ancillary staff person</i>—An individual who provides services for the residents other than direct assistance with activities of daily living. <b><u>Ancillary staff may include staff who do not provide direct care but who conduct assessment, care planning or care management activities, and who meet the direct care staff qualifications and training requirements. Ancillary staff may also include RNs, LPNs, dieticians, or skilled professionals who meet the requirements of their professional licensure and the direct care staff requirements, if they also provide direct assistance with activities of daily living. Other ancillary staff may include activities planners, housekeepers, cooking staff or facilities staff.</u></b></p>	<p>addition of assisted living to the current law, allows individuals who are found to be nursing facility clinically eligible to remain in an ALR as their needs change.</p> <p>Additions made to the definition of <i>Ancillary staff person</i> in the ALR setting. This addition was made to accommodate other changes in the ALR regulation in subsequent Sections.</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><i>Appropriate assessment agency</i>—An organization serving adults who are older or adults with disabilities, such as a county mental health/mental retardation agency, a drug and alcohol agency, an area agency on aging or another human service agency or an individual in an occupation maintaining contact with adults who are older and adults with disabilities, such as medicine, nursing or rehabilitative therapies.</p>	<p><i>Appropriate assessment agency</i>—An organization serving adults who are older or adults with disabilities, such as a county mental health/mental retardation agency, a drug and alcohol agency, an area agency on aging or another human service agency or an individual in an occupation maintaining contact with adults who are older and adults with disabilities, such as medicine, nursing or rehabilitative therapies.</p> <p><u><i>Area agency on aging—The local agency designated by the Department of Aging as defined in section 2202-A of The Administrative Code of 1929 (71 P.S. § 581-2).</i></u></p> <p><u><i>Assessment—An instrument that includes screening of a resident or potential resident to determine whether the resident or potential resident requires the services of an assisted living residence.</i></u></p> <p><u><i>Assisted living residence or residence—Any premises in which food, shelter,</i></u></p>	<p>This definition was added because the AAAs are the agency to determine whether an ALR resident is Nursing Facility Clinically Eligible (NFCE) under the Medical Assistance Program.</p> <p>New definition applicable to the ALR setting.</p> <p>New definition applicable to the ALR setting.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>assisted living services, assistance or supervision and supplemental health care services are provided for a period exceeding 24-hours for four or more adults who are not relatives of the operator, who require assistance or supervision in matters such as dressing, bathing, diet, financial management, evacuation from the residence in the event of an emergency or medication prescribed for self-administration.</i></u></p> <p><u><i>Assisted living residence administrator—An individual who is charged with the general administration of an assisted living residence, whether or not the individual has an ownership interest in the residence or his function and duties are shared with other individuals.</i></u></p> <p><u><i>Assisted living services—Services as defined in § 2800.220(b) (relating to service provision).</i></u></p> <p><u><i>Basic cognitive support services—These services include the following:</i></u>  <u><i>(i) Intermittent cueing.</i></u></p>	<p>New definition applicable to the ALR setting.</p> <p>New definition applicable to the ALR setting.</p> <p>New definition applicable to the ALR setting.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><i>CAM—Complementary and alternative medications</i>—Practices, substances and ideas used to prevent or treat illness or promote health and well-being outside the realm of modern conventional medicine. Alternative medicine is used alone or instead of conventional medicine. Complementary medicine is used along with or in addition to conventional medicine.</p> <p><i>CPR</i>—Cardiopulmonary resuscitation.</p>	<p><u><i>(ii) Redirecting.</i></u>  <u><i>(iii) Environmental cues.</i></u>  <u><i>(iv) Measures to address wandering.</i></u>  <u><i>(v) Dementia-specific activity programming.</i></u>  <u><i>(vi) Specialized communication techniques.</i></u></p> <p><i>CAM—Complementary and alternative medications</i>—Practices, substances and ideas used to prevent or treat illness or promote health and well-being outside the realm of modern conventional medicine. Alternative medicine is used alone or instead of conventional medicine. Complementary medicine is used along with or in addition to conventional medicine.</p> <p><u><i>CPB—Cognitive, physical, behavioral.</i></u></p> <p><i>CPR</i>—Cardiopulmonary resuscitation.</p> <p><u><i>Cognitive support services—</i></u>  <u><i>(i) Services provided to an individual who has memory impairments and other cognitive problems which significantly</i></u></p>	<p>New definition applicable to the ALR setting.</p> <p>New definition applicable to the ALR setting.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><i>Commercial boarding home</i>—A type of residential living facility providing only food and shelter, or other services normally provided by a hotel, for payment, for individuals who require no services beyond food, shelter and other services usually found in hotel or apartment rental.</p>	<p><u><i>interfere with his ability to carry out ADLs without assistance and who requires that supervision, monitoring and programming be available 24 hours per day, 7 days per week, in order to reside safely in the setting of his choice.</i></u>  <u><i>(ii) The term includes assessment, health support services and a full range of dementia-capable activity programming and crisis management.</i></u></p> <p><i>Commercial boarding home</i>—A type of residential living facility providing only food and shelter, or other services normally provided by a hotel, for payment, for individuals who require no services beyond food, shelter and other services usually found in hotel or apartment rental.</p> <p><u><i>Common living area—Includes any of the following:</i></u>  <u><i>(i) Dining room.</i></u>  <u><i>(ii) Indoor activity space.</i></u>  <u><i>(iii) Recreational space.</i></u>  <u><i>(iv) Swimming area, if located in the residence.</i></u></p>	<p>New definition applicable to the ALR setting.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><i>Complaint</i>—A written or oral criticism, dispute or objection presented by or on behalf of a resident to the Department regarding the care, operations or management of a personal care home.</p> <p><i>Day</i>—Calendar day.</p> <p><i>Dementia</i>—A clinical syndrome characterized by a decline of long duration in mental function in an alert individual. Symptoms of dementia may include memory loss, personality change, chronic wandering and the loss or diminishing of other cognitive abilities, such as learning ability, judgment, comprehension, attention and orientation to time and place and to oneself.</p> <p><i>Department</i>—The Department of Public Welfare of the Commonwealth.</p> <p><i>Designated person</i>—An individual who may be chosen by the resident and documented in the resident's record, to be notified in case of an emergency,</p>	<p><i>Complaint</i>—A written or oral criticism, dispute or objection presented by or on behalf of a resident to the Department regarding the care, operations or management of an assisted living residence.</p> <p><i>Day</i>—Calendar day.</p> <p><i>Dementia</i>—A clinical syndrome characterized by a decline of long duration in mental function in an alert individual. Symptoms of dementia may include memory loss, personality change, chronic wandering and the loss or diminishing of other cognitive abilities, such as learning ability, judgment, comprehension, attention and orientation to time and place and to oneself.</p> <p><i>Department</i>—The Department of Public Welfare of the Commonwealth.</p> <p><i>Designated person</i>—An individual who may be chosen by the resident and documented in the resident's record, to be notified in case of an emergency,</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>termination of service, personal care home closure or other situations as indicated by the resident or as required by this chapter. A designated person may be the resident's legal representative or an advocate.</p> <p><i>Designee</i>—A staff person authorized in writing to act in the administrator's absence.</p> <p><i>Direct care staff person</i>—A staff person who directly assists residents with activities of daily living, and instrumental activities of daily living and provides services or is otherwise responsible for the health, safety and well-being of the residents.</p>	<p>termination of service, assisted living residence closure or other situations as indicated by the resident or as required by this chapter. A designated person may be the resident's legal representative or an advocate.</p> <p><i>Designee</i>—A staff person authorized in writing to act in the administrator's absence.</p> <p><i>Direct care staff person</i>—A staff person who directly assists residents with activities of daily living, and instrumental activities of daily living and provides services or is otherwise responsible for the health, safety and well-being of the residents.</p> <p><b><u>Discharge—Termination of an individual's residency in an assisted living residence.</u></b></p> <p><b><u>Distinct part—A portion of a building that is visually separated such as a wing or floor, or sections or parts of floors.</u></b></p>	<p>New definition applicable to the ALR setting.</p> <p>New definition applicable to the ALR setting, which will allow a building to hold both a PCH and an ALR license.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><i>Emergency medical plan</i>—A plan that ensures immediate and direct access to medical care and treatment for serious injury or illness, or both.</p> <p><i>Financial management</i>—</p> <p>(i) A personal care service provided whenever the administrator serves as representative payee or as a guardian or power of attorney assigned prior to December 21, 1988, for a resident, or when a resident requests and receives assistance in budgeting and spending of the personal needs allowance.</p> <p>(ii) The term does not include solely storing funds in a safe place as a convenience for a resident.</p> <p><i>Fire safety expert</i>—A member of a local fire department, fire protection engineer, Commonwealth-certified fire protection instructor, college instructor in fire science, county or Commonwealth fire school, volunteer trained and certified by a county or Commonwealth fire school, an insurance company loss control</p>	<p><i>Emergency medical plan</i>—A plan that ensures immediate and direct access to medical care and treatment for serious injury or illness, or both.</p> <p><i>Financial management</i>—</p> <p>(i) <b><u>An assisted living service requested or required by the resident in accordance with his support plan, which includes taking responsibility for or assisting with paying bills, budgeting, maintaining accurate records of income and disbursements, safekeeping funds and making funds available to the resident upon request.</u></b></p> <p>(ii) The term does not include solely storing funds in a safe place as a convenience for a resident.</p> <p><i>Fire safety expert</i>—A member of a local fire department, fire protection engineer, Commonwealth certified fire protection instructor, college instructor in fire science, county or Commonwealth fire school, volunteer trained and certified by a county or Commonwealth fire school, an insurance company loss control</p>	<p>Definition expanded in the ALR setting. Financial management is an assisted living service that the ALR must provide to a resident if requested or required by the resident based on his/her support plan.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
representative, Department of Labor and Industry building code inspector or construction code official.	<p>representative, Department of Labor and Industry building code inspector or construction code official.</p> <p><u><b>Health care or human services field—Includes the following:</b></u></p> <p><u><b>(i) Child welfare services.</b></u></p> <p><u><b>(ii) Adult services.</b></u></p> <p><u><b>(iii) Older adult services.</b></u></p> <p><u><b>(iv) Mental health/mental retardation services.</b></u></p> <p><u><b>(v) Drug and alcohol services.</b></u></p> <p><u><b>(vi) Services for individuals with disabilities.</b></u></p> <p><u><b>(vii) Medicine.</b></u></p> <p><u><b>(viii) Nursing.</b></u></p> <p><u><b>(ix) Rehabilitative services.</b></u></p> <p><u><b>(x) Any other human service or occupation that maintains contact with adults who are older or adults and children with disabilities.</b></u></p> <p><u><b>Housekeeping—The cleaning of the living unit and common living areas. Cleaning of the living unit includes at least weekly dusting, sweeping, vacuuming, mopping, emptying trash,</b></u></p>	<p>New definition applicable to the ALR setting as a result of the enhanced administrator qualification requirements. See § 2800.53 (related to qualifications and responsibilities of administrators).</p> <p>New definition applicable to the ALR setting. Housekeeping is an assisted living service that the ALR must provide to residents unless the resident opts-out. See § 2800.220</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><i>IADL—Instrumental activities of daily living</i>—The term includes the following activities when done on behalf of a resident:</p> <ul style="list-style-type: none"> <li>(i) Doing laundry.</li> <li>(ii) Shopping.</li> <li>(iii) Securing and using transportation.</li> <li>(iv) Managing finances.</li> <li>(v) Using a telephone.</li> <li>(vi) Making and keeping appointments.</li> <li>(vii) Caring for personal possessions.</li> <li>(viii) Writing correspondence.</li> <li>(ix) Engaging in social and leisure activities.</li> <li>(x) Using a prosthetic device.</li> <li>(xi) Obtaining and keeping clean, seasonal clothing.</li> </ul>	<p><b><u>and cleaning of bathroom, counters, refrigerator and microwave oven, if these appliances are in the resident's living area. Housekeeping for common living areas means keeping them in clean sanitary condition.</u></b></p> <p><i>IADL—Instrumental activities of daily living</i>—The term includes the following activities when done on behalf of a resident:</p> <ul style="list-style-type: none"> <li>(i) Doing laundry.</li> <li>(ii) Shopping.</li> <li>(iii) Securing and using transportation.</li> <li>(iv) <b><u>Financial management.</u></b></li> <li>(v) Using a telephone.</li> <li>(vi) Making and keeping appointments.</li> <li>(vii) Caring for personal possessions.</li> <li>(viii) Writing correspondence.</li> <li>(ix) Engaging in social and leisure activities.</li> <li>(x) Using a prosthetic device.</li> <li>(xi) Obtaining and keeping clean, seasonal clothing.</li> </ul> <p><b><u>INRBI—Intense neurobehavioral rehabilitation after brain injury.</u></b></p>	<p>Financial management in the ALR setting has replaced managing finances in the PCH setting. See definition of Financial management above in § 2800.4.</p> <p>New term and definition applicable to the ALR setting. See Special Care Unit provisions §§2800.231-239.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><i>Legal entity</i>—A person, society, corporation, governing authority or partnership legally responsible for the administration and operation of a personal care home.</p>	<p><b><u>Informed consent agreement—A formal, mutually agreed upon, written understanding which:</u></b>  <b><u>(i) Results after thorough discussion among the assisted living residence staff, the resident and any individuals the resident wants to be involved.</u></b>  <b><u>(ii) Identifies how to balance the assisted living residence's responsibilities to the individuals it serves with a resident's choices and capabilities with the possibility that those choices will place the resident or other residents at risk of harm.</u></b></p> <p><b><u>LPN—Licensed practical nurse.</u></b></p> <p><i>Legal entity</i>—A person, society, corporation, governing authority or partnership legally responsible for the administration and operation of an assisted living residence.</p> <p><b><u>Legal representative—An individual who holds a power of attorney, a court-appointed guardian or other person legally authorized to act for the resident.</u></b></p>	<p>New term and concept applicable to the ALR setting. See § 2800.30 for the specific provisions related to informed consent agreements.</p> <p>Additional definition in the ALR regulation.</p> <p>New definition applicable to the ALR setting.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><i>License</i>—A certificate of compliance issued by the Department permitting the operation of a personal care home, at a given location, for a specific period of time, for a specified capacity, according to Chapter 20 (relating to licensure or approval of facilities and agencies).</p>	<p><i>License</i>—A certificate of compliance issued by the Department permitting the operation of an assisted living residence, at a given location, for a specific period of time, for a specified capacity, according to Chapter 20 (relating to licensure or approval of facilities and agencies).</p> <p><b><u><i>Licensee—A person legally responsible for the operations of an assisted living residence licensed in accordance with this chapter.</i></u></b></p>	<p>New definition applicable to the ALR setting.</p>
<p><i>Long-term care ombudsman</i>—A representative of the Office of the State Long-Term Care Ombudsman in the Department of Aging who investigates and seeks to resolve complaints made by or on behalf of individuals who are 60 years of age or older who are consumers of long-term care services. These complaints may relate to action, inaction or decisions of providers of long-term care services, of public agencies, of social service agencies or their representatives, which may adversely affect the health, safety, well-being or rights of these</p>	<p><i>Long-term care ombudsman</i>—A representative of the Office of the State Long-Term Care Ombudsman in the Department of Aging who investigates and seeks to resolve complaints made by or on behalf of individuals who are 60 years of age or older who are consumers of long-term care services. These complaints may relate to action, inaction or decisions of providers of long-term care services, of public agencies, of social service agencies or their representatives, which may adversely affect the health, safety, well-being or rights of these</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>consumers.</p> <p><i>Mobile resident</i>—</p> <p>(i) A resident who is physically and mentally capable of vacating the personal care home on the resident's own power or with limited physical or oral assistance in the case of an emergency, including the capability to ascend or descend stairs if present on the exit path.</p> <p>(A) Physical assistance means assistance in getting to one's feet or into a wheelchair, walker or prosthetic device.</p> <p>(B) Oral assistance means giving instructions to assist the resident in vacating the personal care home.</p> <p>(ii) The term includes an individual who is able to effectively operate an ambulation device required for moving from one place to another, and able to understand and carry out instructions for vacating the personal care home.</p> <p><i>Neglect</i>—The failure of a personal care home or its staff persons to provide goods or services essential to avoid a clear and serious threat to the physical or mental</p>	<p>consumers.</p> <p><i>Mobile resident</i>—</p> <p>(i) A resident who is physically and mentally capable of vacating the assisted living residence on the resident's own power or with limited physical or oral assistance in the case of an emergency, including the capability to ascend or descend stairs if present on the exit path.</p> <p>(A) Physical assistance means assistance in getting to one's feet or into a wheelchair, walker or prosthetic device.</p> <p>(B) Oral assistance means giving instructions to assist the resident in vacating the assisted living residence.</p> <p>(ii) The term includes an individual who is able to effectively operate an ambulation device required for moving from one place to another, and able to understand and carry out instructions for vacating the assisted living residence.</p> <p><i>Neglect</i>—The failure of an assisted living residence or its staff persons to provide goods or services essential to avoid a clear and serious threat to the physical or</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>health of a resident. The failure or omission to provide the care, supervision and services that the personal care home has voluntarily, or by contract, agreed to provide and that are necessary to maintain the resident's health, safety and well-being, including personal care services, food, clothing, medicine, shelter, supervision and medical services. Neglect may be repeated conduct or a single incident.</p> <p><i>OTC</i>—Over the counter or nonprescription.</p> <p><i>Personal care home or home</i>—</p> <p>(i) A premise in which food, shelter and personal assistance or supervision are provided for a period exceeding 24 hours, for four or more adults who are not relatives of the operator, who do not require the services in or of a licensed long-term care facility, but who do require assistance or supervision in activities of daily living or instrumental activities of daily living.</p> <p>(ii) The term includes a premise that has</p>	<p>mental health of a resident. The failure or omission to provide the care, supervision and services that the assisted living residence has voluntarily, or by contract, agreed to provide and that are necessary to maintain the resident's health, safety and wellbeing, including assisted living services, food, clothing, medicine, shelter, supervision and medical services. Neglect may be repeated conduct or a single incident.</p> <p><i>OTC</i>—Over-the-counter or nonprescription.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>held or presently holds itself out as a personal care home and provides food and shelter to four or more adults who need personal care services, but who are not receiving the services.</p> <p><i>Personal care home administrator or administrator</i>—An individual who is charged with the general administration of a personal care home, whether the individual has an ownership interest in the personal care home, and whether functions and duties are shared with other individuals.</p> <p><i>Personal care services</i>—Assistance or supervision in ADL or IADL, or both.</p> <p><i>Premises</i>—The grounds and buildings on the same grounds, used for providing personal care services.</p> <p><i>Protective services unit</i>—The local area agency on aging unit designated by the Department of Aging to investigate allegations of abuse of adults who are 60 years of age or older and assess the need</p>	<p><u><i>Personal care services is included in the definition of assisted living services.</i></u></p> <p><i>Premises</i>—The grounds and buildings on the same grounds, used for providing services required by residents.</p> <p><i>Protective services unit</i>—The local area agency on aging unit designated by the Department of Aging to investigate allegations of abuse of adults who are 60 years of age or older and assess the need</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>for protective interventions.</p> <p><i>Referral agent</i>—An agency or individual who arranges for or assists, or both, with placement of a resident into a personal care home.</p> <p><i>Relative</i>—A spouse, parent, child, stepparent, stepchild, grandparent, grandchild, brother, sister, half-brother, half-sister, aunt, uncle, niece or nephew.</p> <p><i>Resident</i>—An individual, unrelated to the legal entity, who resides in a personal care home, and who requires personal care services, <i>but who does not require the level of care provided by a hospital or long-term care facility.</i></p> <p><i>Resident with mobility needs</i>—An individual who is unable to move from one location to another, has difficulty in understanding and carrying out instructions without the continued full assistance of other individuals or is</p>	<p>for protective interventions.</p> <p><b><u>RN—Registered nurse.</u></b></p> <p><i>Referral agent</i>—An agency or individual who arranges for or assists, or both, with placement of a resident into an assisted living residence.</p> <p><i>Relative</i>—A spouse, parent, child, stepparent, stepchild, grandparent, grandchild, brother, sister, half-brother, half-sister, aunt, uncle, niece or nephew.</p> <p><b><u>Resident</u></b>—An adult, unrelated to the legal entity, who resides in an assisted living residence, and <b><u>who may require assisted living services or supplemental health care services, or both.</u></b></p> <p><i>Resident with mobility needs</i>—An <b><u>adult</u></b> who is unable to move from one location to another, has difficulty in understanding and carrying out instructions without the continued full assistance of other individuals or is incapable of</p>	<p>Additional definition in the ALR regulation.</p> <p>The definition of <i>Resident</i> in the ALR setting was amended to remove the language “but who does not require the level of care provided by a hospital or long term care facility”, to allow a resident in the ALR setting to age in place.</p>

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## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>incapable of independently operating an ambulation device, such as a wheelchair, prosthesis, walker or cane to exit a building.</p> <p><i>Restraint</i>—A manual, chemical or mechanical device used to limit or restrict the movement or normal function of an individual or a portion of the individual's body.</p> <p>SSI—Supplemental Security Income.</p> <p><i>Secretary</i>—The Secretary of the Department.</p>	<p>independently operating an ambulation device, such as a wheelchair, prosthesis, walker or cane to exit a building.</p> <p><i>Restraint</i>—A manual, chemical or mechanical device used to limit or restrict the movement or normal function of an individual or a portion of the individual's body.</p> <p>SSI—Supplemental Security Income.</p> <p><i>Secretary</i>—The Secretary of the Department.</p> <p><b><u><i>Special care designation—A licensed assisted living residence or a distinct part of the residence which is specifically designated by the Department as capable of providing cognitive support services to residents with severe cognitive impairments, including dementia or Alzheimer's disease, in the least restrictive manner to ensure the safety of the resident and others in the residence while maintaining the resident's ability to</i></u></b></p>	<p>New definition applicable to the ALR setting. See special care unit provisions contained in §§ 2800.231-239.</p>



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## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><i>Staff person</i>—An individual who works for the personal care home for compensation either on payroll or under contract.</p>	<p><u><i>age in place.</i></u></p> <p><u><i>Specialized cognitive support services—These services include the following:</i></u>  <u><i>(i) Nonpharmacological interventions.</i></u>  <u><i>(ii) Dining with dignity.</i></u>  <u><i>(iii) Routines and roles.</i></u>  <u><i>(iv) Close of day programming.</i></u>  <u><i>(v) Pain management and person-centered care planning.</i></u>  <u><i>(vi) Implementation and management.</i></u></p> <p><i>Staff person</i>—An individual who works for the assisted living residence for compensation either on payroll or under contract.</p> <p><u><i>Supplemental health care services—The provision by an assisted living residence of any type of health care service, either directly or through contractors, subcontractors, agents or designated providers, except for any service that is required by law to be provided by a health care facility under the Health Care Facilities Act (35 P.S. §§ 448.101—448.901).</i></u></p>	<p>New definition applicable to the ALR setting. Specialized cognitive support services is considered a supplemental health care service in the ALR setting--the ALR must either provide or arrange for the provision of this service. See §2800.220(e)(8).</p> <p>New definition applicable to the ALR setting. An ALR must either provide or arrange for supplemental health care services. See §2800.220(e)</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><i>Support plan</i>—A written document that describes for each resident the resident’s care, service or treatment needs based on the assessment of the resident, and when the care, service or treatment will be provided, and by whom.</p>	<p><i>Support plan</i>—A written document that describes for each resident the resident's care, service or treatment needs based on the assessment of the resident, and when the care, service or treatment will be provided, and by whom.</p> <p><b><u>Third-party provider—Any contractor, subcontractor, agents or designated providers under contract with the resident or residence to provide services to any resident.</u></b></p> <p><b><u>Transfer—Movement of a resident within the assisted living residence or to a temporary placement outside the assisted living residence.</u></b></p>	<p>New definition applicable to the ALR setting.</p> <p>New definition applicable to the ALR setting.</p>
<p><i>Volunteer</i>—</p> <p>(i) An individual who, of his own free will, and without monetary compensation, provides direct care services for residents in the personal care home.</p> <p>(ii) The term does not include visitors or individuals who provide nondirect services or entertainment on an occasional basis.</p>	<p><i>Volunteer</i>—</p> <p>(i) An individual who, of his own free will, and without monetary compensation, provides direct care services for residents in the assisted living residence.</p> <p>(ii) The term does not include visitors or individuals who provide nondirect services or entertainment on an occasional basis.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.5. Access.</b></p> <p>(a) The administrator or a designee shall provide, upon request, immediate access to the home, the residents and records to:</p> <p>(1) Agents of the Department.  (2) Representatives of the area agency on aging.  (3) Representatives of the Long-Term Care Ombudsman Program.  (4) Representatives of the protection and advocacy system for individuals with disabilities designated under the Protection and Advocacy for Individual Rights Program of the Vocational Rehabilitation and Rehabilitation Services Act (29 U.S.C.A. § 794e), the Protection and Advocacy for Individuals with Mental Illness Act (42 U.S.C.A. §§ 10801—10851) and the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C.A. §§ 15041—15043).</p>	<p><b>§ 2800.5. Access.</b></p> <p>(a) The administrator, <u><b>administrator designee or staff person designated under § 2800.56(c) (relating to administrator staffing)</b></u> shall provide, upon request, immediate access to the residence, the residents and records to:</p> <p>(1) Agents of the Department.  (2) Representatives of the area agency on aging.  (3) Representatives of the Long-Term Care Ombudsman Program.  (4) Representatives of the protection and advocacy system for individuals with disabilities designated under the Protection and Advocacy for Individual Rights Program of the Vocational Rehabilitation and Rehabilitation Services Act (29 U.S.C.A. § 794e), the Protection and Advocacy for Individuals with Mental Illness Act (42 U.S.C.A. §§ 10801—10851) and the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C.A. §§ 15041—15043).  <u><b>(5) The resident's designated person, if so requested by the resident. The access</b></u></p>	<p>In the ALR setting it is clarified that the administrator designee or the staff person designee must provide access to the residence, the residents and records. Provision is also added that the resident's designated person must be provided access to the resident's records if requested by the resident.</p> <p>In the ALR setting, the resident's designated person may also have access to the home, resident and that resident's</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
(b) The administrator or a designee shall permit community service organizations and representatives of community legal services programs to have access to the home during visitation hours or by appointment for the purpose of assisting or informing the residents of the availability of services and assistance. A resident or a resident's designated person may decline the services of the community service organization or the community legal service program.	<u><i>to records under this paragraph is limited to the records of the resident.</i></u>  (b) The administrator, administrator designee or staff person designated under § 2800.56(c) shall permit community service organizations and representatives of legal services programs to have access to the residence during visitation hours or by appointment for the purpose of assisting or informing the residents of the availability of services and assistance. A resident or a resident's designated person <u><i>if so authorized</i></u> may decline the services of the community service organization or the legal service program.	medical records.
General Requirements		
<b>§ 2600.11. Procedural requirements for licensure or approval of personal care homes.</b>  (a) Except for § 20.32 (relating to announced inspections), the requirements in Chapter 20 (relating to licensure or approval of facilities and agencies) apply	<b>§ 2800.11. Procedural requirements for licensure or approval of assisted living residences; special care designation and dual licensure.</b>  (a) Except for § 20.32 (relating to announced inspections), the requirements in Chapter 20 (relating to licensure or approval of facilities and agencies) apply	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>to personal care homes.</p> <p>(b) Before a home is initially licensed and permitted to open, operate or admit residents, it will be inspected by the Department and found to be in compliance with applicable laws and regulations. The Department will reinspect newly licensed homes within 3 months of the date of initial licensure.</p> <p>(c) After the Department determines that a home meets the requirements for a license, the Department's issuance or renewal of a license to a home is contingent upon receipt by the Department of an application fee based on the number of beds in the home, as follows:</p> <p>(1) 0-20 beds—\$15.  (2) 21-50 beds—\$20.  (3) 51-100 beds—\$30.  (4) 101 beds and over—\$50.</p>	<p>to assisted living residences.</p> <p>(b) Before a residence is initially licensed and permitted to open, operate or admit residents, it will be inspected by the Department and found to be in compliance with applicable laws and regulations <b><i>including this chapter</i></b>. The Department will reinspect newly licensed residences within 3 months of the date of initial licensure.</p> <p>(c) After the Department determines that a residence meets the requirements for a license, the Department's issuance or renewal of a license to a residence is contingent upon receipt by the Department of the following fees based on the number of beds in the residence, as follows:</p> <p><b><i><u>(1) A \$300 license application or renewal fee.</u></i></b>  <b><i><u>(2) A \$75 per bed fee that may be adjusted by the Department annually at a rate not to exceed the Consumer Price Index. The Department will publish a notice in the Pennsylvania Bulletin when</u></i></b></p>	<p>In the ALR setting, ALRs are required to pay an application fee or renewal fee as well as a per bed fee. The per bed fee for ALRs is significantly higher than the PCH per bed fees. The regulation includes language to allow for increases in the per bed fees for ALRs by notice in the</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>the per bed fee is increased.</i></u></p> <p><u><i>(d) A person, organization or program may not use the term "assisted living" in any name or written material, except as a licensee in accordance with this chapter. Corporate entities which own subsidiaries that are licensed as assisted living residences may not use the term "assisted living" in any written material to market programs that are not licensed in accordance with this chapter.</i></u></p> <p><u><i>(e) Multiple buildings located on the same premises may apply for a single assisted living residence license.</i></u></p> <p><u><i>(f) A licensed assisted living residence may submit an application and a \$150 application fee to the Department requesting special care designation. If the Department determines that the residence meets the requirements for special care designation, the residence will be issued a license indicating special care designation.</i></u></p>	<p><i>Pennsylvania Bulletin.</i></p> <p>An entity that is not licensed by the Department as an ALR may not use the term “assisted living” in any marketing materials.</p> <p>ALRs on the same campus may be licensed under a single ALR license.</p> <p>An ALR requesting special care designation must pay an additional application fee of \$150.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>(g) A licensed personal care home may submit an application to the Department requesting dual licensure if the licensed personal care home and the assisted living residence are colocated in the same building and are each located in a distinct part of the building. If the Department determines that the licensed facility meets all of the requirements of this chapter, the facility will be issued a dual license.</u></p> <p><u>(1) A facility that is dually licensed may not segregate residents or transfer residents from one licensed facility to another based on payment source.</u></p> <p><u>(2) A facility that is dually licensed may request approval from the Department to share the administrator for the two licensed facilities by requesting a waiver of the administrator hourly staffing requirements contained in § 2800.56 (relating to administrator staffing). The qualifications for a shared administrator must be as set forth in this chapter.</u></p>	<p>Language provides for dual licensure if the personal care home and the assisted living residences are located in distinct parts of the same building. See § 2800.4 (relating to definitions) for the definition of <i>distinct part</i>.</p> <p>A dually licensed residence may not segregate residents or transfer them from one licensed facility to another based on payment source.</p> <p>A dually licensed residence may seek approval to share the administrator for the two licensed facilities.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.12. Appeals.</b></p> <p>Appeals related to the licensure or approval of the personal care home shall be made in accordance with 1 Pa. Code Part II (relating to General Rules of Administrative Practice and Procedure).</p>	<p><b>§ 2800.12. Appeals.</b></p> <p>(a) Appeals related to the licensure or approval of the assisted living residence shall be made in accordance with 1 Pa. Code Part II (relating to General Rules of Administrative Practice and Procedure (GRAPP)).</p> <p><u><i>(b) Appeals related to the licensure or approval of the assisted living residence shall be made by filing a petition within 30 days after service of notice of the action.</i></u></p> <p><u><i>(c) Subsection (b) supersedes the appeal period of 1 Pa. Code § 35.20 (relating to appeals from actions of the staff).</i></u></p>	<p>The ALR regulation provides specific language related to the timing of appeals.</p>
<p><b>§ 2600.13. Maximum capacity.</b></p> <p>(a) The maximum capacity is the total number of residents who are permitted to reside in the home at any time. A request to increase the capacity shall be submitted to the Department and other applicable authorities and approved prior to the</p>	<p><b>§ 2800.13. Maximum capacity.</b></p> <p>(a) The maximum capacity is the total number of residents who are permitted to reside in the residence at any time. A request to increase the capacity shall be submitted to the Department and other applicable authorities and approved prior</p>	



## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>admission of additional residents. The maximum capacity is limited by physical plant space and other applicable laws and regulations.</p> <p>(b) The maximum capacity specified on the license may not be exceeded.</p>	<p>to the admission of additional residents. The maximum capacity is limited by physical plant space and other applicable laws and regulations.</p> <p>(b) The maximum capacity specified on the license may not be exceeded.</p>	
<p><b>§ 2600.14. Fire safety approval.</b></p> <p>(a) Prior to issuance of a license, a written fire safety approval from the Department of Labor and Industry, the Department of Health or the appropriate local building authority under the Pennsylvania Construction Code Act (35 P. S. §§ 7210.101—7210.1103) is required.</p> <p>(b) If the fire safety approval is withdrawn or restricted, the home shall notify the Department orally immediately, and in writing, within 48 hours of the withdrawal or restriction.</p> <p>(c) If a building is structurally renovated or altered after the initial fire safety</p>	<p><b>§ 2800.14. Fire safety approval.</b></p> <p>(a) Prior to issuance of a license under this chapter, a written fire safety approval from the Department of Labor and Industry, the Department of Health or the appropriate local building authority under the Pennsylvania Construction Code Act (35 P.S. §§ 7210.101—7210.1103) is required.</p> <p>(b) If the fire safety approval is withdrawn or restricted, the residence shall notify the Department orally immediately, and in writing, within 48 hours of the withdrawal or restriction.</p> <p>(c) If a building is structurally renovated or altered after the initial fire safety</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>approval is issued, the home shall submit the new fire safety approval, or written certification that a new fire safety approval is not required, from the appropriate fire safety authority. This documentation shall be submitted to the Department within 15 days of the completion of the renovation or alteration.</p> <p>(d) The Department will request additional fire safety inspections by the appropriate agency if possible fire safety violations are observed during an inspection by the Department.</p>	<p>approval is issued, the residence shall submit the new fire safety approval, or written certification that a new fire safety approval is not required, from the appropriate fire safety authority. This documentation shall be submitted to the Department within 15 days of the completion of the renovation or alteration.</p> <p>(d) The Department will request additional fire safety inspections by the appropriate agency if possible fire safety violations are observed during an inspection by the Department.</p> <p><b><u>(e) Fire safety approval must be renewed at least every 3 years, or more frequently, if requested by the Department.</u></b></p>	<p>In the ALR setting fire safety approval must be renewed at least every 3 years.</p>
<p><b>§ 2600.15. Abuse reporting covered by law.</b></p> <p>(a) The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6</p>	<p><b>§ 2800.15. Abuse reporting covered by law.</b></p> <p>(a) The residence shall immediately report suspected abuse of a resident served in the residence in accordance with the Older Adult Protective Services Act (35 P.S. §§ 10225.701—10225.707) and 6 Pa.Code</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>Pa.Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.</p> <p>(b) If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.</p> <p>(c) The home shall immediately submit to the Department's personal care home regional office a plan of supervision or notice of suspension of the affected staff person.</p> <p>(d) The home shall immediately notify the resident and the resident's designated person of a report of suspected abuse or neglect involving the resident.</p>	<p>§§ 15.21—15.27 (relating to reporting suspected abuse, <u><b>neglect, abandonment or exploitation</b></u>) and comply with the requirements regarding restrictions on staff persons.</p> <p>(b) If there is an allegation of abuse of a resident involving a residence's staff person, the residence shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.</p> <p>(c) The residence shall immediately submit to the Department's assisted living residence office a plan of supervision or notice of suspension of the affected staff person.</p> <p>(d) The residence shall immediately notify the resident and the resident's designated person of a report of suspected abuse or neglect involving the resident.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.16. Reportable incidents and conditions.</b></p> <p>(a) A reportable incident or condition includes the following:</p> <p>(1) The death of a resident.</p> <p>(2) A physical act by a resident to commit suicide.</p> <p>(3) A serious bodily injury or trauma requiring treatment at a hospital or medical facility. This does not include minor injuries such as sprains or minor cuts.</p> <p>(4) A violation of a resident's rights in § § 2600.41—2600.44 (relating to resident rights).</p> <p>(5) An unexplained absence of a resident for 24 hours or more, or when the support plan so provides, a period of less than 24 hours, or an absence of a resident from a secured dementia care unit.</p> <p>(6) Misuse of a resident's funds by the home's staff persons or legal entity.</p> <p>(7) An outbreak of a serious communicable disease as defined in 28 Pa. Code § 27.2 (relating to specific identified reportable diseases, infections</p>	<p><b>§ 2800.16. Reportable incidents and conditions.</b></p> <p>(a) A reportable incident or condition includes the following:</p> <p>(1) The death of a resident.</p> <p>(2) A physical act by a resident to commit suicide.</p> <p>(3) <u>An injury, illness</u> or trauma requiring treatment at a hospital or medical facility. This does not include minor injuries such as sprains or minor cuts.</p> <p>(4) A violation of a resident's rights in §§ 2800.41—2800.44 (relating to resident rights).</p> <p>(5) An unexplained absence of a resident for 24 hours or more, or when the support plan so provides, a period of less than 24 hours, or an absence of a resident from a special care unit.</p> <p>(6) Misuse of a resident's funds by the residence's staff persons or legal entity.</p> <p>(7) An outbreak of a serious communicable disease as defined in 28 Pa. Code § 27.2 (relating to specific identified reportable diseases, infections</p>	<p>In the ALR setting, a reportable incident includes any injury or illness that requires treatment at a hospital or medical facility.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>and conditions).</p> <p>(8) Food poisoning of residents.</p> <p>(9) A physical or sexual assault by or against a resident.</p> <p>(10) Fire or structural damage to the home.</p> <p>(11) An incident requiring the services of an emergency management agency, fire department or law enforcement agency, except for false alarms.</p> <p>(12) A complaint of resident abuse, suspected resident abuse or referral of a complaint of resident abuse to a local authority.</p> <p>(13) A prescription medication error as defined in § 2600.188 (relating to medication errors.)</p> <p>(14) An emergency in which the procedures under § 2600.107 (relating to emergency preparedness) are implemented.</p> <p>(15) An unscheduled closure of the home or the relocation of the residents.</p> <p>(16) Bankruptcy filed by the legal entity.</p> <p>(17) A criminal conviction against the legal entity, administrator or staff that are</p>	<p>and conditions).</p> <p>(8) Food poisoning of residents.</p> <p>(9) A physical or sexual assault by or against a resident.</p> <p>(10) Fire or structural damage to the residence.</p> <p>(11) An incident requiring the services of an emergency management agency, fire department or law enforcement agency, except for false alarms.</p> <p>(12) A complaint of resident abuse, suspected resident abuse or referral of a complaint of resident abuse to a local authority.</p> <p>(13) A prescription medication error as defined in § 2800.188 (relating to medication errors).</p> <p>(14) An emergency in which the procedures under § 2800.107 (relating to emergency preparedness) are implemented.</p> <p>(15) An unscheduled closure of the residence or the relocation of the residents.</p> <p>(16) Bankruptcy filed by the legal entity.</p> <p>(17) A criminal conviction against the legal entity, administrator or staff that is</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>subsequent to the reporting on the criminal history checks under § 2600.51 (relating to criminal history checks).            (18) A termination notice from a utility.            (19) A violation of the health and safety laws listed in § 2600.18 (relating to applicable health and safety laws).</p> <p>(b) The home shall develop and implement written policies and procedures on the prevention, reporting, notification, investigation and management of reportable incidents and conditions.</p> <p>(c) The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).</p>	<p>subsequent to the reporting on the criminal history checks under § 2800.51 (relating to criminal history checks).            (18) A termination notice from a utility.            (19) A violation of the health and safety laws under § 2800.18 (relating to applicable laws).  <u><b>(20) An absence of staff so that residents receive inadequate care as defined by the respective resident's support plan.</b></u></p> <p>(b) The residence shall develop and implement written policies and procedures on the prevention, reporting, notification, investigation and management of reportable incidents and conditions.</p> <p>(c) The residence shall report the incident or condition to the Department's assisted living residence office or the assisted living residence complaint hotline within 24 hours in a manner designated by the Department. <u><b>The residence shall immediately report the incident or condition to the resident's family and the resident's designated person.</b></u> Abuse reporting must also follow the guidelines</p>	<p>In the ALR setting a reportable incident includes the absence of adequate staff to provide care to the residents based on their support plans.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(d) The home shall submit a final report, on a form prescribed by the Department, to the Department's personal care home regional office immediately following the conclusion of the investigation.</p> <p>(e) If the home's final report validates the occurrence of the alleged incident or condition, the affected resident and other residents who could potentially be harmed or his designated person shall also be informed immediately following the conclusion of the investigation.</p> <p>(f) The home shall keep a copy of the report of the reportable incident or condition.</p>	<p>in § 2800.15 (relating to abuse reporting covered by law).</p> <p>(d) The residence shall submit a final report, on a form prescribed by the Department, to the <u><i>Department's assisted living residence office</i></u> immediately following the conclusion of the investigation.</p> <p>(e) If the residence's final report validates the occurrence of the alleged incident or condition, the affected resident and other residents who could potentially be harmed or his designated person shall also be informed immediately following the conclusion of the investigation.</p> <p>(f) The residence shall keep a copy of the report of the reportable incident or condition.</p>	
<p><b>§ 2600.17. Confidentiality of records.</b></p> <p>Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the</p>	<p><b>§ 2800.17. Confidentiality of records.</b></p> <p>Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.	resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.	
<p><b>§ 2600.18. Applicable health and safety laws.</b></p> <p>A home shall comply with applicable Federal, State and local laws, ordinances and regulations.</p>	<p><b>§ 2800.18. Applicable laws.</b></p> <p>A residence shall comply with applicable Federal, State and local laws, ordinances and regulations.</p>	
<p><b>§ 2600.19. Waivers.</b></p> <p>(a) A home may submit a written request for a waiver of a specific requirement contained in this chapter. The waiver request must be on a form prescribed by the Department. The Secretary, or the Secretary's appointee, may grant a waiver of a specific requirement of this chapter if</p>	<p><b>§ 2800.19. Waivers.</b></p> <p>(a) A residence may submit a written request for a waiver of a specific requirement contained in this chapter. The waiver request must be on a form prescribed by the Department. The Secretary, or the Secretary's appointee, may grant a waiver of a specific</p>	



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>the following conditions are met:</p> <p>(1) There is no jeopardy to the residents.  (2) There is an alternative for providing an equivalent level of health, safety and well-being protection of the residents.  (3) Residents will benefit from the waiver of the requirement.</p> <p>(b) The scope, definitions, applicability or residents' rights under this chapter may not be waived.</p>	<p>requirement of this chapter if the following conditions are met:</p> <p>(1) There is no jeopardy to the residents.  (2) There is an alternative for providing an equivalent level of health, safety and well-being protection of the residents.  (3) Residents will benefit from the waiver of the requirement.</p> <p><b><u>(b) Following receipt of a waiver request, the Department will post the waiver request on the Department's website with a 30-day public comment period prior to final review and decision on the requested waiver.</u></b></p> <p>(c) The scope, definitions, applicability or residents' rights, <b><u>assisted living service delivery requirements, special care designation requirements, staff training requirements, disclosure requirements, complaint rights or procedures, notice requirements to residents or the resident's family, contract requirements, reporting requirements, fire safety requirements, assessment, support plan or service delivery requirements</u></b> under</p>	<p>Provisions included in the ALR regulation require the Department to post waiver requests and allow for a public comment period prior to rendering a decision on the waiver request.</p> <p>In the ALR setting the provisions that CANNOT be waived by a licensed ALR are expanded.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(c) At least 30 days prior to the submission of the completed written waiver request to the Department, the home shall provide a copy of the completed written waiver request to the affected resident and designated person to provide the opportunity to submit comments to the Department. The home shall provide the affected resident and designated person with the name, address and telephone number of the Department staff person to submit comments.</p> <p>(d) The home shall discuss the waiver request with the affected resident and designated person upon the request of the resident or designated person.</p> <p>(e) The home shall notify the affected resident and designated person of the approval or denial of the waiver. A copy of the waiver request and the Department's written decision shall be posted in a conspicuous and public place</p>	<p>this chapter may not be waived.</p> <p>(d) At least 30 days prior to the submission of the completed written waiver request to the Department, the residence shall provide a copy of the completed written waiver request to the affected resident and designated person to provide the opportunity to submit comments to the Department. The residence shall provide the affected resident and designated person with the name, address and telephone number of the Department staff person to submit comments.</p> <p>(e) The residence shall discuss the waiver request with the affected resident and designated person upon the request of the resident or designated person.</p> <p>(f) The residence shall notify the affected resident and designated person of the approval or denial of the waiver. A copy of the waiver request and the Department's written decision shall be posted in a conspicuous and public place</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>within the home.</p> <p>(f) The Department will review waivers annually to determine compliance with the conditions required by the waiver. The Department may revoke the waiver if the conditions required by the waiver are not met.</p> <p>(g) A waiver granted prior to October 24, 2005, is no longer in effect as of October 24, 2006.</p>	<p>within the residence.</p> <p>(g) The Department will review waivers annually to determine compliance with the conditions required by the waiver. The Department may revoke the waiver if the conditions required by the waiver are not met. <b><u>When the Department revokes a standing waiver from a residence that residence may appeal the revocation consistent with § 2800.12 (relating to appeals).</u></b></p>	<p>The ALR regulation includes provisions to allow the residence to appeal the revocation of a waiver by the Department.</p>
<p><b>§ 2600.20. Financial management.</b></p> <p>(a) A resident may manage his personal finances unless he has a guardian of his estate.</p> <p>(b) If the home provides assistance with financial management or holds resident funds, the following requirements apply:</p> <p>(1) The home shall keep a record of</p>	<p><b>§ 2800.20. Financial management.</b></p> <p>(a) A resident may manage his personal finances unless the resident has a guardian of his estate.</p> <p>(b) If the residence provides assistance with financial management or holds resident funds, the following requirements apply:</p> <p>(1) The residence shall keep a record of</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>financial transactions with the resident, including the dates, amounts of deposits, amounts of withdrawals and the current balance.</p> <p>(2) Resident funds shall be disbursed during normal business hours within 24 hours of the resident's request.</p> <p>(3) The home shall obtain a written receipt from the resident for cash disbursements at the time of disbursement.</p> <p>(4) Resident funds and property shall only be used for the resident's benefit.</p> <p>(5) Commingling of resident funds and home funds is prohibited.</p> <p>(6) If a home is holding more than \$200 for a resident for more than 2 consecutive months, the administrator shall notify the resident and offer assistance in establishing an interest-bearing account in the resident's name at a local Federally-insured financial institution. This does not include security deposits.</p> <p>(7) The legal entity, administrator and staff persons of the home are prohibited from being assigned power of attorney or</p>	<p>financial transactions with the resident, including the dates, amounts of deposits, amounts of withdrawals and the current balance.</p> <p>(2) Resident funds shall be disbursed during normal business hours within 24 hours of the resident's request.</p> <p>(3) The residence shall obtain a written receipt from the resident for cash disbursements at the time of disbursement.</p> <p>(4) Resident funds and property shall only be used for the resident's benefit.</p> <p>(5) Commingling of resident funds and residence funds is prohibited.</p> <p>(6) If a residence is holding more than \$200 for a resident for more than 2 consecutive months, the administrator shall notify the resident and offer assistance in establishing an interest-bearing account in the resident's name at a local Federally-insured financial institution. This does not include security deposits.</p> <p>(7) The legal entity, administrator and staff persons of the residence are prohibited from being assigned power of</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>guardianship of a resident or a resident's estate.</p> <p>(8) The home shall give the resident and the resident's designated person, an itemized account of financial transactions made on the resident's behalf on a quarterly basis.</p> <p>(9) A copy of the itemized account shall be kept in the resident's record.</p> <p>(10) The home shall provide the resident the opportunity to review his own financial record upon request during normal business hours.</p>	<p>attorney or guardianship of a resident or a resident's estate.</p> <p>(8) The residence shall give the resident and the resident's designated person, an itemized account of financial transactions made on the resident's behalf on a quarterly basis.</p> <p>(9) A copy of the itemized account shall be kept in the resident's record.</p> <p>(10) The residence shall provide the resident the opportunity to review his own financial record upon request during normal business hours.</p>	
<p><b>§ 2600.21. Offsite services.</b></p> <p>If services or activities are provided by the home at a location other than the premises, the home shall ensure that the residents' support plans are followed and that resident health and safety needs are met.</p>	<p><b>§ 2800.21. Offsite services.</b></p> <p>If services or activities are provided by the residence at a location other than the premises, the residence shall ensure that the residents' support plans are followed and that the health and safety needs of the residents are met.</p>	
<p><b>§ 2600.22. Admission.</b></p> <p>The following admission documents shall be completed for each resident:</p>	<p><b>§ 2800.22. Application and admission.</b></p> <p>(a) <i>Documentation.</i> The following admission documents shall be completed</p>	<p>In the ALR setting the preadmission screening is replaced by the initial assessment and preliminary support plan</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(1) Preadmission screening completed prior to admission on a form specified by the Department.</p> <p>(2) Medical evaluation completed 60 days prior to or 30 days after admission on a form specified by the Department.</p> <p>(3) Personal care home assessment completed within 15 days after admission on a form specified by the Department.</p>	<p>for each resident:</p> <p>(1) Medical evaluation completed <u><b>within 60 days prior to admission</b></u> on a form specified by the Department. The medical evaluation may be completed within <u><b>15 days after admission if one of the following conditions applies:</b></u>  <u><b>(i) The resident is being admitted directly to the residence from an acute care hospital.</b></u>  <u><b>(ii) The resident is being admitted to escape from an abusive situation.</b></u>  <u><b>(iii) The resident has no alternative living arrangement.</b></u></p> <p>(2) Assisted living resident <u><b>initial assessment completed within 30 days prior to admission</b></u> on a form specified by the Department. The initial assessment may be completed within <u><b>15 days after admission subject to § 2800.224 (relating to initial assessment and preliminary support plan).</b></u>  <u><b>(3) Preliminary support plan developed within 30 days prior to admission. The</b></u></p>	<p>that must be completed 30 days prior to admission. See § 2800.22(a)(2) below.</p> <p>In the ALR setting the medical evaluation must be completed within 60 days prior to admission or 15 days after admission if certain conditions apply. The initial assessment must be completed within 30 days prior to admission or 15 days after admission if certain conditions apply. The preliminary support plan must be developed within 30 days prior to admission or within 15 days after admission if certain conditions apply. The final support plan must be developed and implemented within 30 days after admission.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(4) Support plan developed and implemented within 30 days after admission.</p> <p>(5) Resident-home contract completed prior to admission or within 24 hours after admission.</p>	<p><u><i>preliminary support plan may be completed within 15 days after admission if one of the following conditions applies:</i></u></p> <p><u><i>(i) The resident is being admitted directly to the residence from an acute care hospital.</i></u></p> <p><u><i>(ii) The resident is being admitted to escape from an abusive situation.</i></u></p> <p><u><i>(iii) The resident has no alternative living arrangement.</i></u></p> <p>(4) <u><i>Final</i></u> support plan is developed and implemented within 30 days after admission.</p> <p>(5) Resident-residence contract is completed prior to admission or within 24 hours after admission.</p> <p><u><i>(6) Medical evaluations, resident assessments and support plans may be subsequently updated as needed, but no less frequently than required in §§ 2800.225 and 2800.227 (relating to additional assessments; and development of the final support plan).</i></u></p>	<p>In the ALR setting, new timing requirements are added regarding updating of evaluations, assessments and support plans.</p> <p>In the ALR setting, a certification must be</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><b><u>(b) Certification.</u></b></p> <p><b><u>(1) A certification shall be made, prior to admission, that the needs of the potential resident can be met by the services provided by the residence.</u></b></p> <p><b><u>(2) The certification shall be made by one of the following persons:</u></b></p> <p><b><u>(i) The administrator acting in consultation with the supplemental health care providers.</u></b></p> <p><b><u>(ii) The individual's physician or certified registered nurse practitioner.</u></b></p> <p><b><u>(iii) The medical director of the residence.</u></b></p> <p><b><u>(3) A potential resident whose needs cannot be met by the residence shall be provided with a written decision denying his admission and provide a basis for the denial. The decision shall be confidential and may only be released with the consent of the potential resident or his designated person. The potential resident shall then be referred to a local appropriate assessment agency.</u></b></p> <p><b><u>(c) Supplemental health care. A potential resident who requires assisted living</u></b></p>	<p>made prior to admitting the resident that the ALR can meet the needs of the resident. The certification must be made by the administrator in consultation with the supplemental health care providers, the individual's physician or CRNP, or the medical director of the ALR.</p> <p>If the ALR cannot meet the potential resident's needs, the ALR must provide the individual with a written decision stating the basis for the denial of admission and refer them to a local appropriate assessment agency.</p> <p>In the ALR setting if a potential resident requires assisted living services but does not require supplemental health care</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>services but does not currently require assistance in obtaining supplemental health care services may be admitted to the residence, provided the resident is only provided supplemental health care services required or requested by the resident. When supplemental health care services are required, the residence shall develop a preliminary support plan as required in § 2800.224. This subsection applies to residents under any of the following circumstances:</u></p> <p><u>(1) A resident who currently does not require assistance in obtaining supplemental health care services, but who may require supplemental health care services in the future.</u></p> <p><u>(2) A resident who wishes to obtain assistance in obtaining supplemental health care services.</u></p> <p><u>(3) A resident who resides in a residence in which supplemental health care services are available.</u></p> <p><u>(d) Adults requiring services of a long-term care nursing facility. Adults requiring the services of a licensed long-</u></p>	<p>services, the ALR may admit the resident. The ALR shall only provide the services the resident needs or requests. When the resident requires supplemental health care services the ALR must develop a preliminary support plan.</p> <p>In the ALR setting, an adult who is Nursing Facility Clinical Eligible (NFCE) may reside in the ALR, as long as the resident's needs can be met and the</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>term care nursing facility, including those with mobility needs, may reside in a residence, provided that appropriate supplemental health care services are provided those residents and the design, construction, staffing and operation of the residence allows for their safe emergency evacuation.</i></u></p> <p><u><i>(e) Written disclosure. Upon application for residency and prior to admission to the residence, the licensee shall provide each potential resident or potential resident's designated person with written disclosures that include:</i></u></p> <p><u><i>(1) A list of the nonwaivable resident rights.</i></u></p> <p><u><i>(2) A copy of the contract the resident will be asked to sign.</i></u></p> <p><u><i>(3) A copy of residence rules and resident handbook. The resident handbook shall be approved by the Department.</i></u></p> <p><u><i>(4) Specific information about the following:</i></u></p> <p><u><i>(i) The services and the core packages that are offered by the residence.</i></u></p> <p><u><i>(ii) The cost of those services and of the</i></u></p>	<p>design, construction, staffing and operation of the ALR provides for safe emergency evacuation of the resident.</p> <p>In the ALR setting, the ALR must provide various written disclosures prior to the resident's admission to the ALR. The disclosures are intended to ensure the resident is fully informed prior to admission. See Subsection (e).</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>core packages to the potential resident.</i></u></p> <p><u><i>(iii) When a potential resident may require the services offered in a different core package.</i></u></p> <p><u><i>(iv) The contact information for the Department.</i></u></p> <p><u><i>(v) The licensing status of the most recent inspection reports and instructions for access to the Department's public website for information on the residence's most recent inspection reports.</i></u></p> <p><u><i>(vi) The number of living units in the residence that comply with the Americans with Disabilities Act (42 U.S.C.A. §§ 12101—12213).</i></u></p> <p><u><i>(vii) Disclosure of any waivers that have been approved for the residence and are still in effect.</i></u></p>	
<p><b>§ 2600.23. Activities.</b></p> <p>(a) A home shall provide each resident with assistance with ADLs as indicated in the resident's assessment and support plan.</p>	<p><b>§ 2800.23. Activities.</b></p> <p>(a) A residence shall provide each resident with assistance with ADLs <u><i>and appropriate cueing for ADLs</i></u> as indicated in the resident's assessment and support plan.</p>	<p>In the ALR setting appropriate cueing for ADLs and IADLs must be provided to residents as indicated in the resident's assessment and support plan.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
(b) A home shall provide each resident with assistance with IADLs as indicated in the resident's assessment and support plan.	(b) A residence shall provide each resident with assistance with IADLs <u><b>and appropriate cueing for IADLs</b></u> as indicated in the resident's assessment and support plan.	
<p><b>§ 2600.24. Personal hygiene.</b></p> <p>A home shall provide the resident with assistance with personal hygiene as indicated in the resident's assessment and support plan. Personal hygiene includes one or more of the following:</p> <ul style="list-style-type: none"> <li>(1) Bathing.</li> <li>(2) Oral hygiene.</li> <li>(3) Hair grooming and shampooing.</li> <li>(4) Dressing, undressing and care of clothes.</li> <li>(5) Shaving.</li> <li>(6) Nail care.</li> <li>(7) Foot care.</li> <li>(8) Skin care.</li> </ul>	<p><b>§ 2800.24. Personal hygiene.</b></p> <p>A residence shall provide the resident with assistance with personal hygiene <u><b>and appropriate cueing to encourage personal hygiene</b></u> as indicated in the resident's assessment and support plan. Personal hygiene includes one or more of the following:</p> <ul style="list-style-type: none"> <li>(1) Bathing.</li> <li>(2) Oral hygiene.</li> <li>(3) Hair grooming and shampooing.</li> <li>(4) Dressing, undressing and care of clothes.</li> <li>(5) Shaving.</li> <li>(6) Nail care.</li> <li>(7) Foot care.</li> <li>(8) Skin care.</li> </ul>	<p>In the ALR setting appropriate cueing for personal hygiene must be provided to residents as indicated in the resident's assessment and support plan.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.25. Resident-home contract.</b></p> <p>(a) Prior to admission, or within 24 hours after admission, a written resident-home contract between the resident and the home shall be in place. The administrator or a designee shall complete this contract and review and explain its contents to the resident and the resident's designated person if any, prior to signature.</p> <p>(b) The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.</p> <p>(c) At a minimum, the contract must specify the following:</p> <p>(1) Each resident shall retain, at a</p>	<p><b>§ 2800.25. Resident-residence contract.</b></p> <p>(a) Prior to admission, or within 24 hours after admission, a written resident-residence contract between the resident and the residence must be in place. The administrator or a designee shall complete this contract and review and explain its contents to the resident and the resident's designated person if any, prior to signature.</p> <p>(b) The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees. <b><u>The contract must run month-to-month with automatic renewal unless terminated by the resident with 14 days notice or by the residence with 30 days notice in accordance with § 2800.228 (relating to transfer and discharge).</u></b></p> <p>(c) At a minimum, the contract must specify the following:</p> <p>(1) Each resident shall retain, at a</p>	<p>In the ALR setting the resident-residence contract must run month-to-month with automatic renewal. The resident may terminate the resident-residence contract with a 14-day notice and the ALR may terminate the contract with a 30-day notice. (See § 2800.228).</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>minimum, the current personal needs allowance as the resident's own funds for personal expenditure. A contract to the contrary is not valid. A personal needs allowance is the amount that a resident shall be permitted to keep for his personal use.</p> <p>(2) A fee schedule that lists the actual amount of allowable resident charges for each of the home's available services.</p> <p>(3) An explanation of the annual assessment, medical evaluation and support plan requirements and procedures, which shall be followed if either the assessment or the medical evaluation indicates the need of another and more appropriate level of care.</p> <p>(4) The party responsible for payment.</p> <p>(5) The method for payment of charges for long distance telephone calls.</p> <p>(6) The conditions under which refunds will be made, including the refund of admission fees and refunds upon a resident's death.</p>	<p>minimum, the current personal needs allowance as the resident's own funds for personal expenditure. A contract to the contrary is not valid. A personal needs allowance is the amount that a resident shall be permitted to keep for his personal use.</p> <p>(2) A fee schedule that lists the actual amount of charges <u><b>for each of the assisted living services that are included in the resident's core service package in accordance with § 2800.220 (relating to service provision).</b></u></p> <p>(3) An explanation of the annual assessment, medical evaluation and support plan requirements and procedures, which shall be followed if either the assessment or the medical evaluation indicates the need for another and more appropriate level of care.</p> <p>(4) The party responsible for payment.</p> <p>(5) The method for payment of charges for long distance telephone calls.</p> <p>(6) The conditions under which refunds will be made, including the refund of admission fees and refunds upon a resident's death.</p>	<p>In the ALR setting, the resident-residence contract must include an itemized listing of the assisted living services included in the core service package the resident will receive.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(7) The financial arrangements if assistance with financial management is to be provided.</p> <p>(8) The home's rules related to home services, including whether the home permits smoking.</p> <p>(9) The conditions under which the agreement may be terminated including home closure as specified in § 2600.228 (relating to notification of termination).</p> <p>(10) A statement that the resident is entitled to at least 30 days' advance notice, in writing, of the home's request to change the contract.</p> <p>(11) A list of personal care services to be provided to the resident based on the outcome of the resident's support plan, a list of the actual rates that the resident will be periodically charged for food, shelter and services and how, when and by whom payment is to be made.</p> <p>(12) Charges to the resident for holding a bed during hospitalization or other extended absence from the home.</p> <p>(13) Written information on the resident's rights and complaint procedures as</p>	<p>(7) The financial arrangements if assistance with financial management is to be provided.</p> <p>(8) The residence's rules related to residence services, including whether the residence permits smoking.</p> <p>(9) The conditions under which the resident-residence contract may be terminated including residence closure as specified in § 2800.228.</p> <p>(10) A statement that the resident is entitled to at least 30 days advance notice, in writing, of the residence's request to change the contract.</p> <p><b><u>(11) A list of assisted living services or supplemental health care services, or both,</u></b> to be provided to the resident based on the outcome of the resident's support plan, a list of the actual rates that the resident will be periodically charged for food, shelter and services and how, when and by whom payment is to be made.</p> <p>(12) Charges to the resident for holding a bed during hospitalization or other extended absence from the residence.</p> <p>(13) Written information on the resident's rights and complaint procedures as</p>	<p>In the ALR setting, the resident-residence contract must include a list of the services (assisted living services and/or supplemental services) the resident will be receiving based on the resident's support plan.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>specified in § 2600.41 (relating to notification of rights and complaint procedures).</p> <p>(d) A home may not seek or accept payments from a resident in excess of one-half of any funds received by the resident under the Senior Citizens Rebate and Assistance Act (72 P. S. § § 4751-1—4751-12). If the home will be assisting the resident to manage a portion of the rent rebate, the requirements of § 2600.20 (relating to financial management) may apply. There may be no charge for filling out this paperwork.</p> <p><b><i>Corresponding provisions for PCHs are contained in § 2600.25b provided in the grid below. See § 2600.25b pages 52- 53.</i></b></p>	<p>specified in § 2800.41 (relating to notification of rights and complaint procedures).</p> <p>(d) A residence may not seek or accept payments from an SSI resident in excess of one-half of any funds received by the resident under the Senior Citizens Rebate and Assistance Act (72 P.S. §§ 4751-1—4751-12). If the residence will be assisting the resident to manage a portion of the rent rebate, the requirements of § 2800.20 (relating to financial management) may apply. There may be no charge for filling out this paperwork.</p> <p>(e) The resident-residence contract must include whether the residence collects a portion of a resident's rent rebate under subsection (d).</p> <p>(f) If the residence collects a resident's rent rebate under subsection (e), the resident-residence contract must include the following: (1) The dollar amount or percentage of the rent rebate to be collected.</p>	



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(e) The resident, or a designated person, has the right to rescind the contract for up to 72 hours after the initial dated signature of the contract and pay only for the services received. Rescission of the contract must be in writing addressed to the home.</p> <p>(f) The home may not require or permit a resident to assign assets to the home in return for a life care contract/guarantee. A life care contract/guarantee is an agreement between the legal entity and the resident that the legal entity will provide care to the resident for the duration of the resident's life. Continuing care communities that have obtained a</p>	<p>(2) The residence's intended use of the revenue collected from the rent rebate.</p> <p>(g) A statement signed by the resident, and the resident's designated person if applicable, at the time of admission, informing the resident that the information required in subsections (e) and (f) is to be kept in the resident's record.</p> <p>(h) The resident, or a designated person, has the right to rescind the contract for up to 72 hours after the initial dated signature of the contract. The resident shall pay only for the services received. Rescission of the contract must be in writing addressed to the residence.</p> <p>(i) The residence may not require or permit a resident to assign assets to the residence in return for a life care contract/guarantee. A life care contract/guarantee is an agreement between the legal entity and the resident that the legal entity will provide care to the resident for the duration of the resident's life. Continuing care</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>Certificate of Authority from the Insurance Department and provide a copy of the certificate to the Department are exempt from this requirement.</p> <p>(g) A copy of the signed admission contract shall be given to the resident and a copy shall be filed in the resident's record.</p> <p>(h) The service needs addressed in the resident's support plan shall be available to the resident every day of the year.</p>	<p>communities that have obtained a Certificate of Authority from the Insurance Department and <u>have provided</u> a copy of the certificate to the Department are exempt from this requirement.</p> <p>(j) A copy of the signed resident-residence contract shall be given to the resident and a copy shall be filed in the resident's record.</p> <p>(k) The service needs addressed in the resident's support plan shall be available to the resident every day of the year.</p> <p><b><u>(l) The resident-residence contract shall identify the assisted living services included in the core service package the individual is purchasing and the total price for those services. Supplemental health care services shall be packaged, contracted and priced separately from the resident-residence contract. Services provided by or contracted for by the residence other than supplemental health care services must be priced separately from the service package in the resident-</u></b></p>	<p>In the ALR setting, the resident-residence contract must list the assisted living services and the total price for those services included in the service package the resident is purchasing. Any supplemental health care services being provided or arranged for must be priced separately and any other services provided or arranged for by the ALR must be priced separately from the service package in the resident-residence contract.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<u><i>residence contract.</i></u>	
<p><b>§ 2600.25a. Personal needs allowance for residents of personal care homes—statement of policy.</b></p> <p>The personal needs allowance for residents of personal care homes who receive Supplemental Security Income is \$85.</p>	No corresponding provision included in the ALR Chapter 2800 regulation.	
<p><b>§ 2600.25b. Rent rebates for residents of personal care homes—statement of policy.</b></p> <p>(a) The resident-home contract is to include whether the home collects a portion of a resident’s rent rebate under § 2600.25(d) (relating to resident-home contract).</p> <p>(b) If the home collects a resident’s rent rebate under subsection (a), the resident-home contract is to include the following:</p> <p>(1) The dollar amount or percentage of the rent rebate to be collected.</p> <p>(2) The home’s intended use of the</p>	<p><b>Rent rebates for residents.</b> Similar language for ALRs is contained in § 2800.25 provided above.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>revenue collected from the rent rebate.</p> <p>(c) A statement signed by the resident, and the resident's designated person if applicable, at the time of admission, informing the resident that the information required in subsection (a) is to be kept in the resident's record.</p>		
<p><b>§ 2600.26. Quality management.</b></p> <p>(a) The home shall establish and implement a quality management plan.</p> <p>(b) The quality management plan shall address the periodic review and evaluation of the following:</p> <p>(1) The reportable incident and condition reporting procedures.</p> <p>(2) Complaint procedures.</p> <p>(3) Staff person training.</p> <p>(4) Licensing violations and plans of correction, if applicable.</p> <p>(5) Resident or family councils, or both, if applicable.</p>	<p><b>§ 2800.26. Quality management.</b></p> <p>(a) The residence shall establish and implement a quality management plan.</p> <p>(b) The quality management plan must address the periodic review and evaluation of the following, <u><b>to assure compliance with law and with the relevant standard of care:</b></u></p> <p>(1) The reportable incident and condition reporting procedures.</p> <p>(2) Complaint procedures.</p> <p>(3) Staff person training.</p> <p>(4) Licensing violations and plans of correction, if applicable.</p> <p>(5) Resident or family councils, or both, if applicable.</p>	<p>In the ALR setting, language added to require that the quality management plan address compliance with law and standard of care.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
(c) The quality management plan shall include the development and implementation of measures to address the areas needing improvement that are identified during the periodic review and evaluation.	(c) The quality management plan must include the development and implementation of measures to address the areas needing improvement that are identified during the periodic review and evaluation.	
<p><b>§ 2600.27. SSI recipients.</b></p> <p>(a) If a home agrees to admit a resident eligible for SSI benefits, the home's charges for actual rent and other services may not exceed the SSI resident's actual current monthly income reduced by the current personal needs allowance.</p> <p>(b) The administrator or staff persons may not include funds received as lump sum awards, gifts or inheritances, gains from the sale of property, or retroactive government benefits when calculating payment of rent for an SSI recipient or for a resident eligible for SSI benefits.</p> <p>(c) The administrator or staff persons may seek and accept payments from funds</p>	<p><b>§ 2800.27. SSI recipients.</b></p> <p>(a) If a residence agrees to admit a resident eligible for SSI benefits, the residence's charges for actual rent and other services may not exceed the SSI resident's actual current monthly income reduced by the current personal needs allowance.</p> <p>(b) The administrator or staff persons may not include funds received as lump sum awards, gifts or inheritances, gains from the sale of property or retroactive government benefits when calculating payment of rent for an SSI recipient or for a resident eligible for SSI benefits.</p> <p>(c) The administrator or staff persons may not seek or accept any payments from</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>received as retroactive awards of SSI benefits, but only to the extent that the retroactive awards cover periods of time during which the resident actually resided in the home and for which full payment has not been received.</p> <p>(d) The administrator shall provide each resident who is a recipient of SSI, at no charge beyond the amount determined in subsection (a), the following items or services as needed:</p> <p>(1) Necessary personal hygiene items, such as a comb, toothbrush, toothpaste, soap and shampoo. Cosmetic items are not included.</p> <p>(2) Laundry services for personal laundry, bed linens and towels, but not including dry cleaning or other specialized services.</p> <p>(3) Personal care services.</p> <p>(e) Third-party payments made on behalf of an SSI recipient and paid directly to the home are permitted. These payments may not be used for food, clothing or shelter</p>	<p>funds received as retroactive awards of SSI benefits, but may seek and accept the payments only to the extent that the retroactive awards cover periods of time during which the resident actually resided in the residence and for which full payment has not been received.</p> <p>(d) The administrator shall provide each resident who is a recipient of SSI, at no charge beyond the amount determined in subsection (a), the following items or services as needed:</p> <p>(1) Necessary personal hygiene items, such as a comb, toothbrush, toothpaste, soap and shampoo. Cosmetic items are not included.</p> <p>(2) Laundry services for personal laundry, bed linens and towels, but not including dry cleaning or other specialized services.</p> <p>(3) <b><u>Assistance or supervision in ADL or IADL, or both.</u></b></p> <p>(e) Third-party payments made on behalf of an SSI recipient and paid directly to the residence are permitted. These payments may not be used for food, clothing or</p>	<p>Language amended because in the ALR setting personal care services is not a defined term.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
because to do so would reduce SSI payments. See 20 CFR 416.1100 and 416.1102 (relating to income and SSI eligibility; and what is income). These payments may be used to purchase items or services for the resident that are not food, clothing or shelter.	shelter because to do so would reduce SSI payments. See 20 CFR 416.1100 and 416.1102 (relating to income and SSI eligibility; and what is income). These payments may be used to purchase items or services for the resident that are not food, clothing or shelter.	
<p><b>§ 2600.28. Refunds.</b></p> <p>(a) If, after the home gives notice of discharge or transfer in accordance with § 2600.228(b) (relating to notification of termination), and the resident moves out of the home before the 30 days are over, the home shall give the resident a refund equal to the previously paid charges for rent and personal care services for the remainder of the 30-day time period. The refund shall be issued within 30-days of discharge or transfer. The resident's personal needs allowance shall be refunded within 2 business days of discharge or transfer.</p>	<p><b>§ 2800.28. Refunds.</b></p> <p>(a) If, after the residence gives notice of transfer or discharge in accordance with § 2800.228(b) (relating to transfer and discharge), and the resident moves out of the residence before the 30 days are over, the residence shall give the resident a refund equal to the previously paid charges for rent, assisted living services and supplemental health care services, if applicable, for the remainder of the 30-day time period. The refund shall be issued within 30-days of transfer or discharge. The resident's personal needs allowance shall be refunded within 2 business days of transfer or discharge.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) After a resident gives notice of the intent to leave in accordance with § 2600.228(b) and if the resident moves out of the home before the expiration of the required 30 days, the resident owes the home the charges for rent and personal care services for the entire length of the 30-day time period for which payment has not been made.</p> <p>(c) If no notice is required, as set forth in subsection (d), the resident shall be required to pay only for the nights spent in the home.</p> <p>(d) If the home does not require a written notice prior to a resident's departure, the administrator shall refund the remainder of previously paid charges to the resident within 30 days of the date the resident moved from the home.</p> <p>(e) In the event of a death of a resident under 60 years of age, the administrator shall refund the remainder of previously</p>	<p>(b) After a resident gives notice of the intent to leave in accordance with § 2800.25(b) (relating to resident-residence contract) and if the resident moves out of the residence before the expiration of the required <u>14 days</u>, the resident owes the residence the charges for rent and <u>assisted living services and supplemental health care services</u>, or both, for the entire length of the <u>14-day</u> time period for which payment has not been made.</p> <p>(c) If no notice is required, as set forth in subsection (d), the resident shall be required to pay only for the nights spent in the residence.</p> <p>(d) If the residence does not require a written notice prior to a resident's departure, the administrator shall refund the remainder of previously paid charges to the resident within 30 days of the date the resident moved from the residence.</p> <p>(e) In the event of the death of a resident under 60 years of age, the administrator shall refund the remainder of previously</p>	



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>paid charges to the resident's estate within 30 days from the date the room is cleared of the resident's personal property. In the event of a death of a resident 60 years of age and older, the home shall provide a refund in accordance with the Elder Care Payment Restitution Act (35 P. S. §§ 10226.101—10226.107). The home shall keep documentation of the refund in the resident's record.</p> <p>(f) Within 30 days of either the termination of service by the home or the resident's leaving the home, the resident shall receive an itemized written account of the resident's funds, including notification of funds still owed the home by the resident or a refund owed the resident by the home. Refunds shall be made within 30 days of discharge.</p> <p>(g) Upon discharge of the resident or transfer of the resident to a higher level of care, the administrator shall return the resident's funds being managed or stored by the home to the resident within 2 business days from the date the room is</p>	<p>paid charges to the resident's estate within 30 days from the date the living unit is cleared of the resident's personal property. In the event of the death of a resident 60 years of age and older, the residence shall provide a refund in accordance with the Elder Care Payment Restitution Act (35 P.S. §§ 10226.101—10226.107). The residence shall keep documentation of the refund in the resident's record.</p> <p>(f) Within 30 days of either the termination of service by the residence or the resident's leaving the residence, the resident shall receive an itemized written account of the resident's funds, including notification of funds still owed the residence by the resident or a refund owed the resident by the residence. Refunds shall be made within 30 days of discharge.</p> <p>(g) Upon discharge of the resident or transfer of the resident, the administrator shall return the resident's funds being managed or stored by the residence to the resident within 2 business days from the date the living unit is cleared of the</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
cleared of the resident's personal property.	resident's personal property.	
<p><b>§ 2600.29. Hospice care and services.</b></p> <p>Hospice care and services that are licensed by the Department of Health as a hospice may be provided in a personal care home.</p>	<p><b>§ 2800.29. Hospice care and services.</b></p> <p>Hospice care and services that are licensed by the Department of Health as a hospice may be provided in an assisted living residence.</p>	
<p><b>§ 2600.29a. Hospice care and services—statement of policy.</b></p> <p>(a) If a personal care home elects to provide assistance with IADLs or ADLs for a resident who receives hospice care and services in accordance with § 2600.29 (relating to hospice care and services), the home shall provide for the resident's personal care needs, as well as meet the needs directed by the hospice agency for the time period that hospice service staff are not physically present in the home, and in accordance with the resident's medical evaluation, assessment and support plan.</p>	<p><b>Chapter 2800</b> - No Corresponding Section.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

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Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) A home that elects to serve one or more residents who receive hospice care and services in accordance with § 2600.29 is not required to evacuate a resident who is actively dying, during a fire drill, if all of the following are met:</p> <p>(1) A physician, who is not an employee or contractor of the home, has certified in writing that the resident is actively dying and may suffer bodily injury or a hastened death as a result of participation in a fire drill.</p> <p>(2) The resident, the resident's power of attorney for health care, the resident's legal guardian or the resident's health care representative has provided written informed consent that the person is not to evacuate in a fire drill.</p> <p>(3) If practicable, the home is to locate the bedroom of a resident receiving hospice care and services on the ground level of the building and near to an exit or fire-safe area as defined in § 2600.132(d) (relating to fire drills).</p> <p>(4) During a fire drill, the one designated person at the home who has knowledge in advance of the fire drill is to immediately</p>		

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

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Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>upon setting off the fire alarm to begin the fire drill, go to the room of the resident who meets the conditions of paragraphs (1)—(3), and notify the affected resident and any staff person who attempts to evacuate the resident, that this is a fire drill and the resident is not to be evacuated.</p> <p>(5) If the provisions of paragraph (4) are initiated, the informed staff person is to immediately practice a fire drill evacuation in accordance with the following:</p> <p>(i) Access a mode of transport such as a bed on wheels, a chair on wheels or a drag mat in the resident's bedroom or nearby area, which is not currently occupied by the resident.</p> <p>(ii) Reasonably simulate the level of effort required to move the resident and proceed to practice evacuation to the nearest unblocked exit or fire safe area. The simulation will include the number of staff persons that is required during an evacuation to safely move the resident.</p> <p>(6) If the provisions of paragraph (4) are not initiated, staff persons will proceed to</p>		

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

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Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>evacuate the resident. All staff persons are to be trained to follow this evacuation procedure.</p> <p>(7) The home is to maintain sufficient staffing at all times to provide for the safe evacuation of all residents, including the resident who is actively dying while receiving hospice care and services, in accordance with the fire drill practice requirements specified in paragraph (5) and § 2600.132(a)—(j). A resident who meets the conditions of paragraphs (1)—(3) is a resident with mobility needs in accordance with § 2600.4 (relating to definitions).</p> <p>(8) A hospice agency staff person may participate in the fire drill if the staff person is physically present in the home continuously on a 24-hour basis during the active dying process.</p> <p>(9) The total time to evacuate all residents, including the practice provision of paragraph (5), may not exceed the time allotted under § 2600.132(d).</p> <p>(10) The resident's assessment and support plan are to be kept current and specify the requirements of this section as</p>		

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>it relates to the specific resident.</p> <p>(11) Documentation of compliance with this section is to be kept in the fire drill record, as well as in the resident's record. The documentation is to include the following:</p> <p>(i) A copy of the Department of Health license for the hospice agency.</p> <p>(ii) Written certification by the physician as specified in paragraph (1).</p> <p>(iii) Written informed consent as specified in paragraph (2).</p> <p>(iv) Written documentation of the home's consideration of relocation of the resident's bedroom as specified in paragraph (3).</p>		
<b>Chapter 2600 - No Corresponding Section</b>	<p><b><u>§ 2800.30. Informed consent process.</u></b></p> <p><b><u>(a) Initiation of process.</u></b></p> <p><b><u>(1) When a licensee determines that a competent resident's decision, behavior or action creates a dangerous situation and places the competent resident, other residents or staff members at risk of harm by the competent resident's wish to exercise independence in directing the</u></b></p>	<p>In the ALR setting, an informed consent process has been established. The intent of this process is to promote aging in place by allowing, within reason, residents the opportunity to negotiate with the ALR on any risks involved in directing their own care.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>manner in which the competent resident receives care, the licensee may initiate an informed consent process to address the identified risk and to reach a mutually agreed-upon plan of action with the competent resident or the resident's designated person. The initiation of an informed consent process does not guarantee that an informed consent agreement, which is agreeable to all parties, will be reached and executed.</i></u></p> <p><u><i>(2) When a competent resident wishes to exercise independence in directing the manner in which the competent resident receives care, the competent resident may initiate an informed consent process to modify the support plan and attempt to reach a mutually agreed upon plan of action with the licensee.</i></u></p> <p><u><i>(3) An incompetent resident shall be eligible for an informed consent agreement only if the resident's legal representative is included in the negotiation of the informed consent agreement and executes the agreement.</i></u></p>	<p>The informed consent process can be initiated by the licensee, a competent resident, or the legal representative of an incompetent resident.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><b><u>(b) Notification.</u></b></p> <p><b><u>(1) When the licensee chooses to initiate an informed consent process, the provider shall do so by notifying the competent resident and, if applicable, the resident's designated person in writing and orally. The notification must include the contact information for the ombudsman. For incompetent residents, the ombudsman shall be automatically notified by the licensee. Notification shall be documented in the resident's file by the licensee.</u></b></p> <p><b><u>(2) When a competent resident chooses to initiate an informed consent negotiation, the competent resident shall do so by notifying the licensee in writing and orally. Notification shall be documented in the competent resident's file by the licensee. When a legal representative for an incompetent resident chooses to initiate an informed consent negotiation, the legal representative shall do so by notifying the licensee in writing or orally. Notification shall be documented in the incompetent resident's file by the</u></b></p>	<p>If the informed consent process is initiated by the licensee the competent resident, and if applicable the resident's designated person must be notified in writing and orally.</p> <p>If the resident is incompetent the licensee must notify the ombudsman and document the notification in the resident's file.</p> <p>If the informed consent process is initiated by a competent resident the resident must notify the licensee in writing and orally.</p> <p>If a legal representative initiates the informed consent process for an incompetent resident the legal representative must notify the licensee in writing and orally.</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>licensee.</u></p> <p><u>(c) Resident's involvement. A resident who is not incompetent shall be entitled, but is not required, to involve his legal representative and physician, and any other individual the competent resident wants involved, to participate or assist in the discussion of the competent resident's wish to exercise independence and, if necessary, in developing a satisfactory informed consent agreement that balances the competent resident's choices and capabilities with the possibility that the choices will place the resident, other residents or staff members at risk of harm.</u></p> <p><u>(d) Informed consent meeting.</u>  <u>(1) In a manner the competent resident can understand, the licensee shall discuss the competent resident's wish to exercise independence in directing the manner in which he receives care. The discussion must relate to the decision, behavior or action that places the competent resident, other residents or</u></p>	<p>If the resident is competent the resident has the option to involve their legal representative and any other individuals.</p> <p>An informed consent meeting must take place to discuss the competent resident's wishes to exercise his/her independence. The discussion must relate to the behavior or action that places the resident, other residents or staff members at risk of harm and include reasonable alternatives, if any, for mitigating the risk, as well as significant benefits and disadvantages of each alternative.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>staff members at risk of harm and hazards inherent in the resident's action. The discussion must include reasonable alternatives, if any, for mitigating the risk, the significant benefits and disadvantages of each alternative and the most likely outcome of each alternative. In the case of an incompetent resident, the incompetent resident's legal representative shall participate in the discussion.</u></p> <p><u>(2) A resident may not have the right to place other residents or staff members at risk, but, consistent with statutory and regulatory requirements, may elect to proceed with a decision, behavior or action affecting only his own safety or health status, foregoing alternatives for mitigating the risk, after consideration of the benefits and disadvantages of the alternatives including his wish to exercise independence in directing the manner in which he receives care. The licensee shall evaluate whether the competent resident understands and appreciates the nature and consequences of the risk, including the significant</u></p>	<p>If the resident is incompetent the resident's legal representative must participate in the discussion.</p> <p>A resident may not place others at risk, only himself. The ALR must determine that the competent resident is consenting to accept the risk to self with full knowledge.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>benefits and disadvantages of each alternative considered, and then shall further ascertain whether the competent resident is consenting to accept or mitigate the risk with full knowledge and forethought.</i></u></p> <p><u><i>(e) Successful negotiation. If the parties agree, the informed consent agreement shall be reduced to writing and signed by all parties, including all individuals engaged in the negotiation at the request of the competent resident, and shall be retained in the resident's file as part of the service plan.</i></u></p> <p><u><i>(f) Unsuccessful negotiation. If the parties do not agree, the licensee shall notify the resident, the resident's legal representative and the individuals engaged in the informed consent negotiation at the request of the resident. The residence shall include contact information on the local ombudsman or the appropriate advocacy organization and whether the licensee will issue a notice of discharge.</i></u></p>	<p>If the negotiation is successful, the informed consent agreement must be reduced to writing and signed by all parties.</p> <p>If the negotiation is unsuccessful, the ALR must notify the resident, the resident's legal representative and the individuals engaged in the negotiation at the request of the resident. The notification must include contact information for the local ombudsman or the appropriate advocacy organization and whether the ALR will be issuing a discharge notice.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><b><u>(g) Freedom from duress. An informed consent agreement must be voluntary and free of force, fraud, deceit, duress, coercion or undue influence, provided that a licensee retains the right to issue a notice of involuntary discharge in the event a resident's decision, behavior or action creates a dangerous situation and places other residents or staff members at risk of harm and, after a discussion of the risk, the resident declines alternatives to mitigate the risk.</u></b></p> <p><b><u>(h) Individualized nature. An informed consent agreement must be unique to the resident's situation and his wish to exercise independence in directing the manner in which he receives care. The informed consent agreement shall be utilized only when a resident's decision, behavior or action creates a situation and places the resident, other residents or staff members at risk of harm. A licensee may not require execution of an informed consent agreement as a standard condition of admission.</u></b></p>	<p>The informed consent agreement must be voluntary.</p> <p>The informed consent agreement must be individualized.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><b><u>(i) Liability. Execution of an informed consent agreement does not constitute a waiver of liability beyond the scope of the agreement or with respect to acts of negligence, tort, products defect, breach of fiduciary duty, contract violation, or any other claim or cause of action. An informed consent agreement does not relieve a licensee of liability for violation of statutory or regulatory requirements promulgated under this chapter nor does it affect the enforceability of regulatory provisions including those provisions governing admission or discharge or the permissible level of care in an assisted living residence.</u></b></p> <p><b><u>(j) Change in resident's condition. An informed consent agreement must be updated following a significant change in the resident's condition that affects the risk potential to the resident, other residents or staff members.</u></b></p> <p><b><u>(k) Either party has a right to rescind the informed consent agreement within 30 days of execution of the agreement.</u></b></p>	<p>An informed consent agreement does not constitute a waiver of liability beyond the scope of the agreement.</p> <p>An informed consent agreement must be updated following a significant change in the resident's condition that affects the potential risk.</p> <p>Either party may rescind the informed consent agreement within 30 days of execution of the agreement.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<b>Resident Rights</b>		
<p><b>§ 2600.41. Notification of rights and complaint procedures.</b></p> <p>(a) Upon admission, each resident and, if applicable, the resident's designated person, shall be informed of resident rights and the right to lodge complaints without intimidation, retaliation, or threats of retaliation of the home or its staff persons against the reporter. Retaliation includes discharge or transfer from the home.</p> <p>(b) Notification of rights and complaint procedures shall be communicated in an easily understood manner and in a language understood by or mode of communication used by the resident and, if applicable, the resident's designated person.</p> <p>(c) The Department's poster of the list of resident's rights shall be posted in a conspicuous and public place in the home.</p>	<p><b>§ 2800.41. Notification of rights and complaint procedures.</b></p> <p>(a) Upon admission, each resident and, if applicable, the resident's designated person, shall be informed of resident rights and the right to lodge complaints without intimidation, retaliation or threats of retaliation by the residence or its staff persons against the reporter. Retaliation includes transfer or discharge from the residence.</p> <p>(b) Notification of rights and complaint procedures shall be communicated in an easily understood manner and in a language understood by or mode of communication used by the resident and, if applicable, the resident's designated person.</p> <p>(c) The Department's poster of the list of resident's rights shall be posted in a conspicuous and public place in the residence.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(d) A copy of the resident's rights and complaint procedures shall be given to the resident and, if applicable, the resident's designated person upon admission.</p> <p>(e) A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in subsection (d), or documentation of efforts made to obtain signature, shall be kept in the resident's record.</p>	<p>(d) A copy of the resident's rights and complaint procedures shall be given to the resident and, if applicable, the resident's designated person, upon admission.</p> <p>(e) A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in subsection (d), or documentation of efforts made to obtain signature, shall be kept in the resident's record.</p>	
<p><b>§ 2600.42. Specific rights.</b></p> <p>(a) A resident may not be discriminated against because of race, color, religious creed, disability, handicap, ancestry, sexual orientation, national origin, age or sex.</p> <p>(b) A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.</p>	<p><b>§ 2800.42. Specific rights.</b></p> <p>(a) A resident may not be discriminated against because of race, color, religious creed, disability, ancestry, sexual orientation, national origin, age or sex.</p> <p>(b) A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way. <u><b>A resident must be free from mental, physical, and sexual abuse and</b></u></p>	<p>In the ALR setting, this right has been further clarified.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(c) A resident shall be treated with dignity and respect.</p> <p>(d) A resident shall be informed of the rules of the home and given 30 days' written notice prior to the effective date of a new home rule.</p> <p>(e) A resident shall have access to a telephone in the home to make calls in privacy. Nontoll calls shall be without charge to the resident.</p> <p>(f) A resident has the right to receive and send mail.            (1) Outgoing mail may not be opened or read by staff persons unless the resident requests.            (2) Incoming mail may not be opened or read by staff persons unless upon the request of the resident or the resident's designated person.</p>	<p><b><u>exploitation, neglect, financial exploitation and involuntary seclusion.</u></b></p> <p>(c) A resident shall be treated with dignity and respect.</p> <p>(d) A resident shall be informed of the rules of the residence and given 30 days' written notice prior to the effective date of a new residence rule.</p> <p>(e) A resident shall have access to a telephone in the residence to make calls in privacy. Nontoll calls must be without charge to the resident.</p> <p>(f) A resident has the right to receive and send mail.            (1) Outgoing mail may not be opened or read by staff persons unless the resident requests.            (2) Incoming mail may not be opened or read by staff persons unless upon the request of the resident or the resident's designated person.</p>	



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(g) A resident has the right to communicate privately with and access the local ombudsman.</p> <p>(h) A resident has the right to practice the religion or faith of the resident's choice, or not to practice any religion or faith.</p> <p>(i) A resident shall receive assistance in accessing health services.</p> <p>(j) A resident shall receive assistance in obtaining and keeping clean, seasonal clothing. A resident's clothing may not be shared with other residents.</p> <p>(k) A resident and the resident's designated person, and other individuals upon the resident's written approval shall have the right to access, review and request corrections to the resident's record.</p> <p>(l) A resident has the right to furnish his room and purchase, receive, use and retain personal clothing and possessions.</p>	<p>(g) A resident has the right to communicate privately with and access the local ombudsman.</p> <p>(h) A resident has the right to practice the religion or faith of the resident's choice, or not to practice any religion or faith.</p> <p>(i) A resident shall receive assistance in accessing health care services, <b><u>including supplemental health care services.</u></b></p> <p>(j) A resident shall receive assistance in obtaining and keeping clean, seasonal clothing. A resident's clothing may not be shared with other residents.</p> <p>(k) A resident and the resident's designated person, and other individuals upon the resident's written approval shall have the right to access, review and request corrections to the resident's record.</p> <p>(l) A resident has the right to furnish his living unit and purchase, receive, use and retain personal clothing and possessions.</p>	<p>In the ALR setting, the resident shall receive assistance in accessing supplemental health care services.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(m) A resident has the right to leave and return to the home at times consistent with the home rules and the resident's support plan.</p> <p>(n) A resident has the right to relocate and to request and receive assistance, from the home, in relocating to another facility. The assistance shall include helping the resident get information about living arrangements, making telephone calls and transferring records.</p> <p>(o) A resident has the right to freely associate, organize and communicate with others privately.</p> <p>(p) A resident shall be free from restraints.</p> <p>(q) A resident shall be compensated in accordance with State and Federal labor laws for labor performed on behalf of the home. Residents may voluntarily and without coercion perform tasks related directly to the resident's personal space or common areas of the home.</p>	<p>(m) A resident has the right to leave and return to the residence at times consistent with the residence rules and the resident's support plan.</p> <p>(n) A resident has the right to relocate and to request and receive assistance, from the residence, in relocating to another facility. The assistance must include helping the resident get information about living arrangements, making telephone calls and transferring records.</p> <p>(o) A resident has the right to freely associate, organize and communicate privately with his <u><b>friends, family, physician, attorney and other persons.</b></u></p> <p>(p) A resident shall be free from restraints.</p> <p>(q) A resident shall be compensated in accordance with State and Federal labor laws for labor performed on behalf of the residence. Residents may voluntarily and without coercion perform tasks related directly to the resident's personal space or common areas of the residence.</p>	<p>In the ALR setting, this right has been further clarified to include friends, family, physician and attorney.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(r) A resident has the right to receive visitors for a minimum of 12 hours daily, 7 days per week.</p>	<p>(r) A resident has the right to receive visitors <u><b>at any time provided that the visits do not adversely affect other residents. A residence may adopt reasonable policies and procedures related to visits and access. If the residence adopts those policies and procedures, they will be binding on the residence.</b></u></p>	<p>In the ALR setting, the resident has the right to receive visitors at any time, as long as the visits do not negatively affect other residents. The ALR can establish policies and procedures related to visits and access.</p>
<p>(s) A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.</p>	<p>(s) A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.</p>	
<p>(t) A resident has the right to file complaints with any individual or agency and recommend changes in policies, home rules and services of the home without intimidation, retaliation or threat of discharge.</p>	<p>(t) A resident has the right to file complaints, <u><b>grievances or appeals</b></u> with any individual or agency and recommend changes in policies, residence rules and services of the residence without intimidation, retaliation or threat of discharge.</p>	<p>In the ALR setting, clarification is provided that the resident has the right to file grievances or appeals.</p>
<p>(u) A resident has the right to remain in the home, as long as it is operating with a license, except as specified in § 2600.228</p>	<p>(u) A resident has the right to remain in the residence, as long as it is operating with a license, except as specified in §</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(relating to notification of termination).</p> <p>(v) A resident has the right to receive services contracted for in the resident-home contract.</p> <p>(w) A resident has the right to use both the home's procedures and external procedures, if any, to appeal involuntary discharge.</p> <p>(x) A resident has the right to a system to safeguard a resident's money and property.</p> <p>(y) A resident has the right to choose his own health care providers without limitation by the home. This includes the right to select the resident's own pharmacist provided that the pharmacy agrees to supply medications in a way that is compatible with the home's system for handling and assisting with the self-administration of resident medications.</p>	<p>2800.228 (relating to transfer and discharge).</p> <p>(v) A resident has the right to receive services contracted for in the resident-residence contract.</p> <p>(w) A resident has the right to use both the residence's procedures and external procedures to appeal involuntary discharge.</p> <p>(x) A resident has the right to a system to safeguard a resident's money and property.</p> <p><b><u>(y) To the extent prominently displayed in the written resident-residence</u></b></p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>contract, a residence may require residents to use providers of supplemental health care services as provided in § 2800.142 (relating to assistance with medical care and supplemental health care services).</i></u></p> <p><u><i>When the residence does not designate, the resident may choose the supplemental health care service provider. The actions and procedures utilized by a supplemental health care service provider chosen by a resident must be consistent with the residence's systems for caring for residents. This includes the handling and assisting with the administration of resident's medications, and may not conflict with Federal laws governing residents.</i></u></p> <p><u><i>(z) The resident has the right to choose his primary care physician.</i></u></p>	<p>In the ALR setting, the resident may be required to use the supplemental health care service providers designated by the ALR. If the ALR does not designate supplemental health care providers the resident can use a supplemental health care provider of their choice, as long as the provider uses actions and procedures consistent with the ALR's system.</p>
<p><b>§ 2600.43. Prohibition against deprivation of rights.</b></p> <p>(a) A resident may not be deprived of his rights.</p>	<p><b>§ 2800.43. Prohibition against deprivation of rights.</b></p> <p>(a) A resident may not be deprived of his rights.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
(b) A resident's rights may not be used as a reward or sanction.	(b) A resident's rights may not be used as a reward or sanction.  <b><u>(c) Waiver of any resident right shall be void.</u></b>	In the ALR setting, language was added to clarify that an ALR may not request a waiver of any resident right.
<p><b>§ 2600.44. Complaint procedures.</b></p> <p>(a) Prior to admission, the home shall inform the resident and the resident's designated person of the right to file and the procedure for filing a complaint with the Department's personal care home regional office, local ombudsman or protective services unit in the area agency on aging, Pennsylvania Protection &amp; Advocacy, Inc. or law enforcement agency.</p> <p>(b) The home shall permit and respond to oral and written complaints from any source regarding an alleged violation of resident rights, quality of care or other matter without retaliation or the threat of retaliation.</p>	<p><b>§ 2800.44. Complaint procedures.</b></p> <p>(a) Prior to admission, the residence shall inform the resident and the resident's designated person of the right to file and the procedure for filing a complaint with the <b><u>Department's Assisted Living Residence Licensing Office</u></b>, local ombudsman or protective services unit in the area agency on aging, the <b><u>Disability Rights Network</u></b> or law enforcement agency.</p> <p>(b) The residence shall permit and respond to oral and written complaints from any source regarding an alleged violation of resident rights, quality of care or other matter without retaliation or the threat of retaliation.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(c) If a resident indicates that he wishes to make a written complaint, but needs assistance in reducing the complaint to writing, the home shall assist the resident in writing the complaint.</p> <p>(d) The home shall ensure investigation and resolution of complaints. The home shall designate the staff person responsible for receiving complaints and determining the outcome of the complaint.</p> <p>(e) Within 2 business days after the submission of a written complaint, a status report shall be provided by the home to the complainant. If the resident is not the complainant, the resident and the resident's designated person shall receive the status report unless contraindicated by the support plan. The status report must indicate the steps that the home is taking to investigate and address the complaint.</p>	<p>(c) If a resident indicates that he wishes to make a written complaint, but needs assistance in reducing the complaint to writing, the residence shall assist the resident in writing the complaint.</p> <p>(d) The residence shall ensure investigation and resolution of complaints. The residence shall designate the staff person responsible for receiving complaints and determining the outcome of the complaint. <b><u>The residence shall keep a log of all complaints and the outcomes of the complaints.</u></b></p> <p>(e) Within 2 business days after the submission of a written complaint, a status report shall be provided by the residence to the complainant. If the resident is not the complainant, the resident and the resident's designated person shall receive the status report unless contraindicated by the support plan. The status report must indicate the steps that the residence is taking to investigate and address the complaint.</p>	<p>In the ALR setting, the ALR must keep a log of all complaints and their outcomes.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(f) Within 7 days after the submission of a written complaint, the home shall give the complainant and, if applicable, the designated person, a written decision explaining the home's investigation findings and the action the home plans to take to resolve the complaint. If the resident is not the complainant, the affected resident shall receive a copy of the decision unless contraindicated by the support plan. If the home's investigation validates the complaint allegations, a resident who could potentially be harmed or his designated person shall receive a copy of the decision, with the name of the affected resident removed, unless contraindicated by the support plan.</p>	<p>(f) Within 7 days after the submission of a written complaint, the residence shall give the complainant and, if applicable, the designated person, a written decision explaining the residence's investigation findings and the action the residence plans to take to resolve the complaint. If the resident is not the complainant, the affected resident shall receive a copy of the decision unless contraindicated by the support plan. If the residence's investigation validates the complaint allegations, a resident who could potentially be harmed or his designated person shall receive a copy of the decision, with the name of the affected resident removed, unless contraindicated by the support plan.</p>	
<p>(g) The telephone number of the Department's personal care home regional office, the local ombudsman or protective services unit in the area agency on aging, Pennsylvania Protection &amp; Advocacy, Inc., the local law enforcement agency, the Commonwealth Information Center and the personal care home complaint</p>	<p>(g) The telephone number of the Department's Assisted Living Residence Licensing Office, the local ombudsman or protective services unit in the area agency on aging, the Disability Rights Network, the local law enforcement agency, the Commonwealth Information Center and the assisted living residence complaint</p>	



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
hotline shall be posted in large print in a conspicuous and public place in the home.	<p>hotline shall be posted in large print in a conspicuous and public place in the residence.</p> <p><b><u>(h) Nothing in this section may affect in any way the right of the resident to file suit or claim for damages.</u></b></p>	In the ALR setting, language was added to clarify that the provisions in this Section may not affect the resident's right to file suit or claim for damages.
<b>Staffing</b>		
<p><b>§ 2600.51. Criminal history checks.</b></p> <p>Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).</p>	<p><b>§ 2800.51. Criminal history checks.</b></p> <p>(a) Criminal history checks shall be in accordance with the Older Adult Protective Services Act (35 P.S.§§ 10225.101—10225.5102), and 6 Pa.Code Chapter 15 (relating to protective services for older adults).</p> <p><b><u>(b) The hiring policies shall be in accordance with the Department of Aging's Older Adult Protective Services Act policy as posted on the Department of Aging's web site.</u></b></p>	In the ALR setting, language was added to clarify that the hiring policies of the ALR must be in accordance with the Department of Aging's Older Adult Protective Services Act policy.

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.52. Staff hiring, retention and utilization.</b></p> <p>Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults) and other applicable regulations.</p>	<p><b>§ 2800.52. Staff hiring, retention and utilization.</b></p> <p>Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective Services Act (35 P.S. §§ 10225.101—10225.5102), 6 Pa.Code Chapter 15 (relating to protective services for older adults) and other applicable regulations.</p>	
<p><b>§ 2600.53. Qualifications and responsibilities of administrators.</b></p> <p>(a) The administrator shall have one of the following qualifications:</p> <p>(1) A license as a registered nurse from the Department of State.</p> <p>(2) An associate's degree or 60 credit hours from an accredited college or university.</p>	<p><b>§ 2800.53. Qualifications and responsibilities of administrators.</b></p> <p>(a) The administrator shall have one of the following qualifications:</p> <p>(1) A license as an RN from the Department of State <u><b>and 1 year, in the prior 10 years, of direct care or administrative experience in a health care or human services field.</b></u></p> <p>(2) An associate's degree or 60 credit hours from an accredited college or university <u><b>in a human services field and 1 year, in the prior 10 years, of direct care or administrative experience in a health care or human services field.</b></u></p>	<p>In the ALR setting, to qualify as an ALR administrator an RN must have 1 year experience in a health care or human services field.</p> <p>In the ALR setting, to qualify as an ALR administrator in addition to an associate's degree or 60 credit hours in a human services field the individual must have 1 year experience in a health care or human services field.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	(3) An associate's degree or 60 credit hours from an accredited college or university <b><u>in a field that is not related to human services and 2 years, in the prior 10 years, of direct care or administrative experience in a health care or human services field.</u></b>	In the ALR setting, to qualify as an ALR administrator in addition to an associate's degree or 60 credit hours the individual must have 2 years experience in a health care or human services field.
(3) A license as a licensed practical nurse from the Department of State and 1 year of work experience in a related field.	(4) A license as an LPN from the Department of State and 1 year, <b><u>in the prior 10 years, of direct care or administrative experience in a health care or human services field.</u></b>	In the ALR setting, to qualify as an ALR administrator an LPN must have 1 year of work experience in a health care or human services field.
(4) A license as a nursing home administrator from the Department of State.	(5) A license as a nursing home administrator from the Department of State <b><u>and 1 year, in the prior 10 years, of direct care or administrative experience in a health care or human services field.</u></b>	In the ALR setting, a licensed NHA must have 1 year of direct care or administrative experience in a health care or human services field.
(5) For a home serving 8 or fewer residents, a general education development diploma or high school diploma and 2 years direct care or administrative experience in the human services field.	<b><u>(6) With the exception of administrators qualified under § 2600.53(a)(5) (relating to qualifications and responsibilities of administrators), experience as a personal care home administrator, if the following requirements are met:</u></b> <b><u>(i) Employed as a personal care home</u></b>	In the ALR setting, a PCH administrator may qualify as an ALR administrator if the individual has been employed as a PCH administrator for 2 years prior to 1/18/11, has completed the administrator training requirements and passed the Department-approved training test.

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><b><u>administrator for 2 years prior to January 18, 2011.</u></b></p> <p><b><u>(ii) Completed the administrator training requirements and pass the Department-approved competency based training test in § 2800.64 (relating to administrator training and orientation) by January 18, 2012.</u></b></p>	
(b) The administrator shall be 21 years of age or older.	(b) The administrator shall be 21 years of age or older.	
(c) The administrator shall be responsible for the administration and management of the home, including the health, safety and well-being of the residents, implementation of policies and procedures and compliance with this chapter.	(c) The administrator shall be responsible for the administration and management of the residence, including the health, safety and well-being of the residents, implementation of policies and procedures and compliance with this chapter.	
(d) The administrator shall have the ability to provide personal care services or to supervise or direct the work to provide personal care services.	(d) The administrator shall have the ability to provide assisted living services or to supervise or direct the work to provide assisted living services.	
(e) The administrator shall have knowledge of this chapter.	(e) The administrator shall have knowledge of this chapter.	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(f) The administrator shall have the ability to comply with applicable laws, rules and regulations, including this chapter.</p> <p>(g) The administrator shall have the ability to maintain or supervise the maintenance of financial and other records.</p> <p>(h) The administrator shall be free from a medical condition, including drug or alcohol addiction that would limit the administrator from performing duties with reasonable skill and safety.</p>	<p>(f) The administrator shall have the ability to comply with applicable laws, rules and regulations, including this chapter.</p> <p>(g) The administrator shall have the ability to maintain or supervise the maintenance of financial and other records.</p> <p>(h) <u><b>At all times</b></u> the administrator shall be free from a medical condition, including drug or alcohol addiction that would limit the administrator from performing duties with reasonable skill and safety.</p>	
<p><b>§ 2600.54. Qualifications for direct care staff persons.</b></p> <p>(a) Direct care staff persons shall have the following qualifications:</p> <p>(1) Be 18 years of age or older, except as permitted in subsection (b).</p> <p>(2) Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.</p> <p>(3) Be free from a medical condition, including drug or alcohol addiction, that</p>	<p><b>§ 2800.54. Qualifications for direct care staff persons.</b></p> <p>(a) Direct care staff persons shall have the following qualifications:</p> <p>(1) Be 18 years of age or older, except as permitted in subsection (d).</p> <p>(2) Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.</p> <p>(3) Be free from a medical condition, including drug or alcohol addiction, that</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.</p> <p>(b) An individual who is 16 or 17 years of age may be a staff person at a home, but may not perform tasks related to medication administration. A staff person who is 16 or 17 years of age may not perform tasks related to incontinence care, bathing or dressing of residents without supervision.</p> <p>(c) A volunteer who performs ADLs shall meet the staff person qualifications and training requirements specified in this chapter.</p>	<p>would limit direct care staff persons from providing necessary assisted living services with reasonable skill and safety.</p> <p><b><u>(4) Be able to communicate in a mode or manner understood by the resident. Strategies that promote interactive communication on the part of direct care staff and individual residents shall be developed in accordance with the resident's final support plan under § 2800.227(e) (relating to development of the final support plan).</u></b></p> <p>(b) A volunteer who performs or provides ADLs shall meet the direct staff person qualifications and training requirements specified in this chapter.</p>	<p>In the ALR setting, a direct care staff person must be able to communicate in a mode or manner understood by the resident.</p> <p>See Subsection (d) below for language related to individuals who are 16 or 17 years of age in the ALR setting.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
(d) A resident receiving personal care services who voluntarily performs tasks in the home will not be considered a volunteer under this chapter.	(c) A resident receiving assisted living services who voluntarily performs tasks in the residence will not be considered a volunteer under this chapter.  <u><i>(d) Food services or housekeeping staff may be 16 or 17 years of age.</i></u>	In the ALR setting, individuals 16 or 17 years old may only provide food services or housekeeping services.
<b>§ 2600.55. Exceptions for staff qualifications.</b>  (a) The staff qualification requirements for administrator and direct care staff persons do not apply to individuals hired or promoted to the specified positions prior to December 1, 2004.  (b) A staff person who transfers to another licensed home, with no more than a 1 year break in service, may continue to work in the same capacity as long as the staff person meets the conditions specified in subsection (a).	<b>§ 2800.55. Portability of staff training.</b>  <u><i>A staff person who transfers to another licensed residence, or from a licensed personal care home shall be given credit for any completed hours of training that are required on an annual basis, provided however, that the staff person shall complete any additional training required by this chapter for assisted living residence direct care staff.</i></u>	Training that has been completed in a PCH can be used for credit in an ALR.
<b>§ 2600.56. Administrator staffing.</b>  The administrator shall be present in the	<b>§ 2800.56. Administrator staffing.</b>  (a) Except for temporary absences under	In the ALR setting, the time an

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
home an average of 20 hours or more per week, in each calendar month.	<p>subsection (b), the administrator shall be present in the residence <u><b>an average of 36 hours or more per week, in each calendar month. At least 30 hours per week must be during normal business hours.</b></u></p> <p><u><b>(b) If the administrator is unavailable to meet the hourly requirements in subsection (a) due to a temporary absence, the administrator shall assign an administrator designee in writing to supervise the residence during the administrator's temporary absence. The administrator designee shall meet the following requirements:</b></u></p> <p><u><b>(1) Have 3,000 hours of direct operational responsibility for a senior housing facility, health care facility, residential care facility, adult daily living facility or other group home licensed or approved by the Commonwealth.</b></u></p> <p><u><b>(2) Pass the Department-approved competency-based administrator training test under § 2800.64(a)(3) (relating to administrator training and orientation.)</b></u></p> <p><u><b>(3) Meet the qualification and training</b></u></p>	<p>administrator must be present in the ALR is increased to 36 hours.</p> <p>In the ALR setting, the administrator designee must have 3,000 hours of direct operational responsibility in one of the settings listed in (b)(1), pass the Department-approved competency-based administrator training test, AND meet the qualifications and training of a direct care staff person.</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>requirements of a direct care staff person under §§ 2800.54 and 2800.65 (relating to qualifications for direct care staff persons; and staff orientation and direct care staff person training and orientation).</i></u></p> <p><u><i>(c) The administrator shall assign a staff person in writing to supervise the residence during the administrator's or administrator designee's absence. The staff person shall meet the qualification and training requirements of a direct care staff person under §§ 2800.54 and 2800.65.</i></u></p> <p><u><i>(d) During the administrator's and administrator designee's absence, the administrator or administrator designee shall be on-call.</i></u></p>	<p>In the ALR setting, if the administrator and the administrator designee are absent from the ALR the administrator must designate a staff person to supervise the residence. The staff person must meet the direct care staff qualification and training requirements. During their absence either the administrator or the administrator designee must be on-call.</p>
<p><b>§ 2600.57. Direct care staffing.</b></p> <p>(a) At all times one or more residents are present in the home a direct care staff person who is 21 years of age or older and who serves as the designee, shall be</p>	<p><b>§ 2800.57. Direct care staffing.</b></p> <p>(a) At all times one or more residents are present in the residence, a direct care staff person who is 21 years of age or older shall be present in the residence. The</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>present in the home. The direct care staff person may be the administrator if the administrator provides direct care services.</p> <p>(b) Direct care staff persons shall be available to provide at least 1 hour per day of personal care services to each mobile resident.</p> <p>(c) Direct care staff persons shall be available to provide at least 2 hours per day of personal care services to each resident who has mobility needs.</p> <p>(d) At least 75% of the personal care service hours specified in subsections (b) and (c) shall be available during waking hours.</p>	<p>direct care staff person may be the administrator if the administrator provides direct care services.</p> <p>(b) Direct care staff persons shall be available to provide at least 1 hour per day of assisted living services to each mobile resident.</p> <p>(c) Direct care staff persons shall be available to provide at least 2 hours per day of assisted living services to each resident who has mobility needs.</p> <p>(d) At least 75% of the assisted living service hours specified in subsections (b) and (c) shall be available during waking hours.</p>	
<p><b>§ 2600.58. Awake staff persons.</b></p> <p>(a) If a home serves 16 or more residents, all direct care staff persons on duty in the home shall be awake at all times one or more residents are present in the home.</p>	<p><b>§ 2800.58. Awake staff persons.</b></p> <p><u><b>Direct care staff persons on duty in the residence shall be awake at all times.</b></u></p>	<p>In the ALR setting direct care staff persons must be awake at all times.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
(b) If a home serves one or more but less than 16 residents with mobility needs, at least one direct care staff person shall be awake at all times residents are present in the home.		
<p><b>§ 2600.59. Multiple buildings.</b></p> <p>(a) For a home with multiple buildings on the same premises that are within 300 feet of one another, the direct care staff person required in § 2600.57 (relating to direct care staffing) shall be on the premises and available by a two-way communication system at all times one, two or three mobile residents are present in the home.</p> <p>(b) For a home with multiple buildings on the same premises regardless of the distance between buildings, the direct care staffing requirements in § 2600.57 apply at all times four or more mobile residents, or one or more residents with mobility needs, are present in the home.</p>	<p><b>§ 2800.59. Multiple buildings.</b></p> <p><u><i>For a residence with multiple buildings on the same premises regardless of the distance between buildings, the direct care staffing requirements in § 2800.57 (relating to direct care staffing) apply at all times residents are present in the residence.</i></u></p>	<p>In the ALR setting, there are no exceptions for multiple buildings to the direct care staffing requirements contained in §2800.57.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.60. Additional staffing based on the needs of the residents.</b></p> <p>(a) Staffing shall be provided to meet the needs of the residents as specified in the resident's assessment and support plan.</p> <p>(b) The Department may require additional staffing as necessary to protect the health, safety and well-being of the residents. Requirements for additional staffing will be based on the resident's assessment and support plan, the design and construction of the home and the operation and management of the home.</p> <p>(c) Additional staff hours, or contractual hours, shall be provided as necessary to meet the laundry, food service, housekeeping and maintenance needs of the home.</p>	<p><b>§ 2800.60. Additional staffing based on the needs of the residents.</b></p> <p>(a) Staffing shall be provided to meet the needs of the residents as specified in the resident's assessment and support plan. <u><b>Residence staff or service providers who provide services to the residents in the residence shall meet the applicable professional licensure requirements.</b></u></p> <p>(b) <u><b>The staffing level in this chapter is minimum only.</b></u> The Department may require additional staffing as necessary to protect the health, safety and well-being of the residents. Requirements for additional staffing will be based on the resident's assessment and support plan, the design and construction of the residence and the operation and management of the residence.</p> <p>(c) Additional staff hours, or contractual hours, shall be provided as necessary to meet the transportation, laundry, food service, housekeeping and maintenance needs of the residents.</p>	<p>In the ALR setting, language is included to address supplemental health care services provided by outside parties.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>(d) In addition to the staffing requirements in this chapter, the residence shall have a licensed nurse available in the building or on call at all times. The licensed nurse shall be either an employee of the residence or under contract with the residence.</i></u></p> <p><u><i>(e) The residence shall have a dietician on staff or under contract to provide for any special dietary needs of a resident as indicated in his support plan.</i></u></p>	In the ALR setting, ALRs are required to have a licensed nurse available in the building or on call at all times and a dietician on staff or under contract.
<p><b>§ 2600.61. Substitute personnel.</b></p> <p>When regularly scheduled direct care staff persons are absent, the administrator shall arrange for coverage by substitute personnel who meet the direct care staff qualifications and training requirements as specified in § § 2600.54 and § 2600.65 (relating to qualifications for direct care staff persons; and direct care staff person training and orientation).</p>	<p><b>§ 2800.61. Substitute personnel.</b></p> <p>When regularly scheduled direct care staff persons are absent, the administrator shall arrange for coverage by substitute personnel who meet the direct care staff qualifications and training requirements as specified in §§ 2800.54 and 2800.65 (relating to qualifications for direct care staff persons; and <u><i>staff orientation</i></u> and direct care staff person training and orientation).</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.62. List of staff persons.</b></p> <p>The administrator shall maintain a current list of the names, addresses and telephone numbers of staff persons including substitute personnel and volunteers.</p>	<p><b>§ 2800.62. List of staff persons.</b></p> <p>The administrator shall maintain a current list of the names, addresses and telephone numbers of staff persons including substitute personnel and volunteers.</p>	
<p><b>§ 2600.63. First aid, CPR and obstructed airway training.</b></p> <p>(a) At least one staff person for every 50 residents who is trained in first aid and certified in obstructed airway techniques and CPR shall be present in the home at all times.</p> <p>(b) Current training in first aid and certification in obstructed airway techniques and CPR shall be provided by an individual certified as a trainer by a hospital or other recognized health care organization.</p> <p>(c) Licensed, certified and registered medical personnel meet the qualifications in subsection (a) and are exempt from the</p>	<p><b>§ 2800.63. First aid, CPR and obstructed airway training.</b></p> <p>(a) <u><i>For every 35 residents, there shall be at least one staff person</i></u> trained in first aid and certified in obstructed airway techniques and CPR present in the residence at all times to meet the needs of the residents.</p> <p>(b) Current training in first aid and certification in obstructed airway techniques and CPR shall be provided by an individual certified as a trainer by a hospital or other recognized health care organization.</p> <p>(c) Licensed, certified and registered medical personnel meet the qualifications in subsection (a) and are exempt from the</p>	<p>In the ALR setting, the first aid and CPR staffing requirements are 1-35 compared to the PCH first aid and CPR staffing requirements of 1-50.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>training requirements in subsections (a) and (b).</p> <p>(d) A staff person who is trained in first aid or certified in obstructed airway techniques or CPR shall provide those services in accordance with his training, unless the resident has a do not resuscitate order.</p>	<p>training requirements in subsections (a) and (b).</p> <p>(d) A staff person who is trained in first aid or certified in obstructed airway techniques or CPR shall provide those services in accordance with his training, unless the resident has a do not resuscitate order.</p>	
<p><b>§ 2600.64. Administrator training and orientation.</b></p> <p>(a) Prior to initial employment as an administrator, a candidate shall successfully complete the following:</p> <p>(1) An orientation program approved and administered by the Department.</p> <p>(2) A 100-hour standardized Department-approved administrator training course.</p> <p>(3) A Department-approved competency-based training test with a passing score.</p> <p>(4) Paragraphs (1), (2) and (3) do not</p>	<p><b>§ 2800.64. Administrator training and orientation.</b></p> <p>(a) Prior to initial employment as an administrator, a candidate shall successfully complete the following:</p> <p>(1) An orientation program approved and administered by the Department.</p> <p>(2) A 100-hour standardized Department-approved administrator training course.</p> <p><b><u>The training provided for in § 2800.69 (relating to additional dementia-specific training) shall be in addition to the 100-hour training course.</u></b></p> <p>(3) A Department-approved competency-based training test with a passing score.</p>	<p>In the ALR setting, in addition to the 100-hour training course the administrator is required to have at least 4 hours of dementia-specific training within 30 days of hire and at least 2 hours of dementia-specific training annually thereafter.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>apply to an administrator hired or promoted prior to October 24, 2005.</p> <p>(b) The standardized Department-approved administrator training course specified in subsection (a)(2) shall include the following:</p> <p>(1) Fire prevention and emergency preparedness.</p> <p>(2) Medication procedures, medication effects and side effects, universal precautions and personal hygiene.</p> <p>(3) Certification in CPR and obstructed airway techniques and training in first aid.</p> <p>(4) Personal care services.</p> <p>(5) Local, State and Federal laws and regulations pertaining to the operation of a home.</p> <p>(6) Nutrition, food handling and sanitation.</p> <p>(7) Recreation.</p> <p>(8) Care for residents with mental illness.</p> <p>(9) Resident rights.</p> <p>(10) Care for residents with dementia, cognitive impairments and other special needs.</p> <p>(11) Care for residents with mental</p>	<p>(b) The standardized Department-approved administrator training course specified in subsection (a)(2) must include the following:</p> <p>(1) Fire prevention and emergency preparedness.</p> <p>(2) Medication procedures, medication effects and side effects, universal precautions and personal hygiene.</p> <p>(3) Certification in CPR and obstructed airway techniques and training in first aid.</p> <p>(4) <u><b>Assisted living services.</b></u></p> <p>(5) Local, State and Federal laws and regulations pertaining to the operation of a residence.</p> <p>(6) Nutrition, food handling and sanitation.</p> <p>(7) Recreation.</p> <p>(8) Care for residents with mental illness.</p> <p>(9) Resident rights.</p> <p>(10) Care for residents with cognitive <u><b>and neurological</b></u> impairments and other special needs.</p> <p>(11) Care for residents with mental</p>	<p>In the ALR setting, the administrator training course must include the following additional topics: assisted living services, care for residents with neurological impairments, infection control, training specific to the residents of the ALR, person-centered care, informed consent, aging in place, the availability of services to support aging in place, and incident management and reporting.</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>retardation.</p> <p>(12) Community resources, social services and activities in the community.</p> <p>(13) Staff supervision and staff person training including developing orientation and training guidelines for staff.</p> <p>(14) Budgeting, financial recordkeeping and resident records including:</p> <p>(i) Writing, completing and implementing initial assessments, annual assessments and support plans.</p> <p>(ii) Resident-home contracts.</p> <p>(15) Gerontology.</p> <p>(16) Abuse and neglect prevention and reporting.</p> <p>(17) Cultural competency.</p> <p>(18) The requirements of this chapter.</p>	<p>retardation.</p> <p>(12) Community resources, social services and activities in the community.</p> <p>(13) Staff supervision and staff person training including developing orientation and training guidelines for staff.</p> <p>(14) Budgeting, financial recordkeeping and resident records including:</p> <p>(i) Writing, completing and implementing initial assessments, annual assessments and support plans.</p> <p>(ii) Resident-residence contracts.</p> <p>(15) Gerontology.</p> <p>(16) Abuse and neglect prevention and reporting.</p> <p>(17) Cultural competency.</p> <p><b><u>(18) Infection control.</u></b></p> <p><b><u>(19) Training specific to the resident composition.</u></b></p> <p><b><u>(20) Training on person-centered care, informed consent, aging in place and the availability of services to support aging in place.</u></b></p> <p><b><u>(21) Incident management and incident reporting.</u></b></p> <p>(22) The requirements of this chapter.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(c) An administrator shall have at least 24 hours of annual training relating to the job duties. The Department-approved administrator training course specified in subsection (a) fulfills the annual training requirement for the first year.</p> <p>(d) Annual training shall be provided by Department-approved training sources listed in the Department's personal care home training resource directory or by an accredited college or university.</p> <p>(e) An administrator who has successfully completed the training in subsections (a)—(d) shall provide written verification of successful completion to the Department's personal care home regional office.</p>	<p>(c) An administrator shall have at least 24 hours of annual training relating to the job duties. The Department-approved administrator training course specified in subsection (a) fulfills the annual training requirement for the first year.</p> <p>(d) Annual training shall be provided by Department-approved training sources listed in the <b><u>Department's assisted living residence training resource directory</u></b> or by an accredited college or university, <b><u>courses approved for credit by National Continuing Education Review Service/National Association of Boards of Examiners of Long-Term Care Administrators or the Bureau of Professional and Occupational Affairs in the Department of State.</u></b></p> <p>(e) An administrator who has successfully completed the training in subsections (a)—(d) shall provide written verification of successful completion to the <b><u>Department's Assisted Living Residence Licensing Office.</u></b></p>	<p>In the ALR setting, courses approved for credit by National Continuing Education Review Service/National Association of Boards of Examiners of Long-Term Care Administrators or the Bureau of Professional and Occupational Affairs in the Department of State are acceptable courses for the annual administrator training requirement.</p> <p>The Office of Long Term Living is the licensing agency for ALRs.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(f) A record of training including the individual trained, date, source, content, length of each course and copies of certificates received shall be kept.</p> <p>(g) A licensed nursing home administrator who is employed as an administrator prior to October 24, 2006, is exempt from the training and educational requirements of this chapter if the administrator continues to meet the requirements of the Department of State. A licensed nursing home administrator hired as an administrator after October 23, 2006, shall complete and pass the Department-approved personal care home administrator competency-based training test.</p>	<p>(f) A record of training including the individual trained, date, source, content, length of each course and copies of certificates received shall be kept.</p> <p>(g) A licensed nursing home administrator who is employed as an administrator <u><b>prior to January 18, 2011</b></u>, is exempt from the qualification and training requirements under §§ 2800.53 and 2800.64 (relating to qualifications and responsibilities of administrators; and administrator training and orientation) if the administrator continues to meet the applicable licensing requirements. A licensed nursing home administrator hired as an administrator <u><b>after January 18, 2011</b></u>, shall complete and pass the approved assisted living administrator competency-based test.</p>	<p>In the ALR setting, a NHA employed as an administrator prior to January 18, 2011, is exempt from the qualification and training requirements. A NHA hired as an administrator after January 18, 2011, must complete and pass the approved AL administrator competency-based test.</p>
<p><b>§ 2600.65. Direct care staff person training and orientation.</b></p> <p>(a) Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute</p>	<p><b>§ 2800.65. <u>Staff orientation and</u> direct care staff person training and orientation.</b></p> <p>(a) Prior to or during the first work day, direct care staff persons and other staff persons including ancillary staff persons,</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:</p> <p>(1) Evacuation procedures.</p> <p>(2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.</p> <p>(3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.</p> <p>(4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.</p> <p>(5) The location and use of fire extinguishers.</p> <p>(6) Smoke detectors and fire alarms.</p> <p>(7) Telephone use and notification of emergency services.</p>	<p>substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:</p> <p>(1) Evacuation procedures.</p> <p>(2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location, if applicable.</p> <p>(3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.</p> <p>(4) Smoking safety procedures, the residence's smoking policy and location of smoking areas, if applicable.</p> <p>(5) The location and use of fire extinguishers.</p> <p>(6) Smoke detectors and fire alarms.</p> <p>(7) Telephone use and notification of emergency services.</p> <p><b><u>(b) Direct care staff persons shall complete an initial orientation approved by the Department before providing direct care to residents.</u></b></p>	<p>In the ALR setting, before providing direct care services a direct care staff person must complete an initial orientation and be certified in first aid and CPR.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:</p> <p>(1) Resident rights.</p> <p>(2) Emergency medical plan.</p> <p>(3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102).</p> <p>(4) Reporting of reportable incidents and conditions.</p>	<p><b><u>(c) Direct care staff persons shall be certified in first aid and CPR before providing direct care to residents.</u></b></p> <p><b><u>(d) A sufficient number of direct care staff persons shall be certified in obstructed airway techniques to meet the staff to resident ratios under § 2800.63(a) (relating to first aid, CPR and obstructed airway training) before providing direct care to residents.</u></b></p> <p>(e) Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation training that includes the following:</p> <p>(1) Resident rights.</p> <p>(2) Emergency medical plan.</p> <p>(3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. §§ 10225.101—10225.5102).</p> <p>(4) Reporting of reportable incidents and conditions.</p> <p><b><u>(5) Safe management techniques.</u></b></p> <p><b><u>(6) Core competency training that</u></b></p>	<p>In the ALR setting, the orientation training for direct care staff must include the following additional topics: Safe management techniques; Core competency training that includes person-centered care, communication, problem solving, relationship skills, and nutritional support according to resident preference.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(c) Ancillary staff persons shall have a general orientation to their specific job functions as it relates to their position prior to working in that capacity.</p> <p>(d) Direct care staff persons hired after April 24, 2006, may not provide unsupervised ADL services until completion of the following:</p> <p>(1) Training that includes a demonstration of job duties, followed by supervised practice.</p> <p>(2) Successful completion and passing the Department-approved direct care training course and passing of the competency test.</p> <p>(3) Initial direct care staff person training to include the following:</p> <p>(i) Safe management techniques.</p> <p>(ii) ADLs and IADLs.</p> <p>(iii) Personal hygiene.</p>	<p><b><u>includes the following:</u></b></p> <p><b><u>(i) Person-centered care.</u></b></p> <p><b><u>(ii) Communication, problem solving and relationship skills.</u></b></p> <p><b><u>(iii) Nutritional support according to resident preference.</u></b></p> <p>(f) Ancillary staff persons shall have a general orientation to their specific job functions as it relates to their position prior to working in that capacity.</p> <p>(g) Direct care staff persons may not provide unsupervised assisted living services <b><u>until completion of 18 hours of training</u></b> in the following areas:</p> <p>(1) Training that includes a demonstration of job duties, followed by supervised practice.</p> <p>(2) Successful completion and passing the Department-approved direct care training course and passing of the competency test.</p> <p>(3) Initial direct care staff person training to include the following:</p> <p>(i) Safe management techniques.</p> <p>(ii) <b><u>Assisting with</u></b> ADLs and IADLs.</p> <p>(iii) Personal hygiene.</p>	<p>In the ALR setting, direct care staff persons must complete 18 hours of training in the areas listed before they provide unsupervised assisted living services. Some additional training topics include: The signs and symptoms of infections and infection control; Behavioral management techniques; Understanding of the resident's assessment and how to implement the resident's support plan; Person-centered care and aging in place.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<ul style="list-style-type: none"> <li>(iv) Care of residents with dementia, mental illness, cognitive impairments, mental retardation and other mental disabilities.</li> <li>(v) The normal aging-cognitive, psychological and functional abilities of individuals who are older.</li> <li>(vi) Implementation of the initial assessment, annual assessment and support plan.</li> <li>(vii) Nutrition, food handling and sanitation.</li> <li>(viii) Recreation, socialization, community resources, social services and activities in the community.</li> <li>(ix) Gerontology.</li> <li>(x) Staff person supervision, if applicable.</li> <li>(xi) Care and needs of residents with special emphasis on the residents being served in the home.</li> <li>(xii) Safety management and hazard prevention.</li> <li>(xiii) Universal precautions.</li> <li>(xiv) The requirements of this chapter.</li> <li>(xv) Infection control.</li> <li>(xvi) Care for individuals with mobility</li> </ul>	<ul style="list-style-type: none"> <li>(iv) Care of residents with mental illness, <b><u>neurological</u></b> impairments, mental retardation and other mental disabilities.</li> <li>(v) The normal aging-cognitive, psychological and functional abilities of individuals who are older.</li> <li>(vi) Implementation of the initial assessment, annual assessment and support plan.</li> <li>(vii) Nutrition, food handling and sanitation.</li> <li>(viii) Recreation, socialization, community resources, social services and activities in the community.</li> <li>(ix) Gerontology.</li> <li>(x) Staff person supervision, if applicable.</li> <li>(xi) Care and needs of residents with special emphasis on the residents being served in the residence.</li> <li>(xii) Safety management and hazard prevention.</li> <li>(xiii) Universal precautions.</li> <li>(xiv) The requirements of this chapter.</li> <li>(xv) <b><u>The signs and symptoms of infections and</u></b> infection control.</li> <li>(xvi) Care for individuals with mobility</li> </ul>	

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## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>needs, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration, if applicable to the residents served in the home.</p> <p>(e) Direct care staff persons shall have at least 12 hours of annual training relating to their job duties.            (1) Staff person orientation shall be included in the 12 hours of training for the first year of employment.            (2) On the job training for direct care staff persons may count for 6 out of the 12 training hours required annually.</p> <p>(f) Training topics for the annual training for direct care staff persons shall include the following:            (1) Medication self-administration training.</p>	<p>needs, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration, if applicable to the residents served in the residence.  <u><i>(xvii) Behavioral management techniques.</i></u>  <u><i>(xviii) Understanding of the resident's assessment and how to implement the resident's support plan.</i></u>  <u><i>(xix) Person-centered care and aging in place.</i></u></p> <p>(h) Direct care staff persons shall have at least <b><u>16 hours of annual training</u></b> relating to their job duties. <b><u>The training required in § 2800.69 (relating to additional dementia-specific training) shall be in addition to the 16 hour annual training.</u></b></p> <p>(i) Training topics for the annual training for direct care staff persons must include the following:            (1) Medication self-administration training.</p>	<p>In the ALR setting, direct care staff persons must have at least 16 hours of annual training, this training is in addition to the dementia-specific training requirement of 4 hours within 30 days of hire and at least 2 hours annually.</p>



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## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.</p> <p>(3) Care for residents with dementia and cognitive impairments.</p> <p>(4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.</p> <p>(5) Personal care service needs of the resident.</p> <p>(6) Safe management techniques</p> <p>(7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.</p> <p>(g) Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:</p> <p>(1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. Videos prepared by a fire safety expert are acceptable for the</p>	<p>(2) Instruction on meeting the needs of the residents as described in the assessment tool, medical evaluation and support plan.</p> <p>(3) Care for residents with dementia, cognitive <u><b>and neurological</b></u> impairments.</p> <p>(4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.</p> <p>(5) <u><b>Assisted living service</b></u> needs of the resident.</p> <p>(6) Safe management techniques.</p> <p>(7) Care for residents with mental illness or mental retardation, or both, if the population is served in the residence.</p> <p>(j) Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:</p> <p>(1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. Videos prepared by a fire safety expert are acceptable for the</p>	

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## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>training if accompanied by an onsite staff person trained by a fire safety expert.</p> <p>(2) Emergency preparedness procedures and recognition and response to crises and emergency situations.</p> <p>(3) Resident rights.</p> <p>(4) The Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102).</p> <p>(5) Falls and accident prevention.</p> <p>(6) New population groups that are being served at the home that were not previously served, if applicable.</p> <p>(h) If a staff person has completed the required initial direct care staff person training within the past year as a direct care staff person at another home, the requirement for initial direct care staff person training in this section does not apply if the staff person provides written verification of completion of the training.</p> <p>(i) A record of training including the staff person trained, date, source, content, length of each course and copies of any certificates received, shall be kept.</p>	<p>training if accompanied by an onsite staff person trained by a fire safety expert.</p> <p>(2) Emergency preparedness procedures and recognition and response to crises and emergency situations.</p> <p>(3) Resident rights.</p> <p>(4) The Older Adult Protective Services Act (35 P.S. §§ 10225.101—10225.708).</p> <p>(5) Falls and accident prevention.</p> <p>(6) New population groups that are being served at the residence that were not previously served, if applicable.</p> <p>(k) If a staff person has completed the required initial direct care staff person training within the past year as a direct care staff person at another residence, the requirement for initial direct care staff person training in this section does not apply if the staff person provides written verification of completion of the training.</p> <p>(l) A record of training including the staff person trained, date, source, content, length of each course and copies of any certificates received, shall be kept.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.66. Staff training plan.</b></p> <p>(a) A staff training plan shall be developed annually.</p> <p>(b) The plan must include training aimed at improving the knowledge and skills of the home's direct care staff persons in carrying out their job responsibilities. The staff training plan must include the following:</p> <p>(1) The name, position and duties of each direct care staff person.</p> <p>(2) The required training courses for each staff person.</p> <p>(3) The dates, times and locations of the scheduled training for each staff person for the upcoming year.</p> <p>(c) Documentation of compliance with the staff training plan shall be kept.</p>	<p><b>§ 2800.66. Staff training plan.</b></p> <p>(a) A staff training plan shall be developed annually.</p> <p>(b) The plan must include training aimed at improving the knowledge and skills of the residence's direct care staff persons in carrying out their job responsibilities. The staff training plan must include the following:</p> <p>(1) The name, position and duties of each direct care staff person.</p> <p>(2) The required training courses for each staff person.</p> <p>(3) The dates, times and locations of the scheduled training for each staff person for the upcoming year.</p> <p>(c) Documentation of compliance with the staff training plan shall be kept.</p>	
<p><b>§ 2600.67. Training institution registration.</b></p> <p>(a) An institution and the course of study offered by an educational institution,</p>	<p><b>§ 2800.67. Training institution registration.</b></p> <p>(a) An institution and the course of study offered by an educational institution,</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>association, professional society or organization for the purpose of educating and qualifying applicants for certification as personal care home administrators shall be registered and approved by the Department prior to offering the course of study.</p> <p>(b) An application for registration of an institution and approval of a course of study shall be submitted to the Department on a form provided by the Department and include the following information:</p> <p>(1) The full name, address, telephone number, facsimile number and electronic mail address of the prospective training provider, each instructor and the program coordinator.</p> <p>(2) The training objectives, instructional materials, content and teaching methods to be used and the number of clock hours.</p> <p>(3) The recommended class size.</p> <p>(4) The attendance certification method.</p> <p>(5) Proof that each course instructor is certified by the Department to conduct administrator training.</p>	<p>association, professional society or organization for the purpose of educating and qualifying applicants for certification as assisted living residence administrators shall be registered and approved by the Department prior to offering the course of study.</p> <p>(b) An application for registration of an institution and approval of a course of study shall be submitted to the Department on a form provided by the Department and include the following information:</p> <p>(1) The full name, address, telephone number, facsimile number and electronic mail address of the prospective training provider, each instructor and the program coordinator.</p> <p>(2) The training objectives, instructional materials, content and teaching methods to be used and the number of clock hours.</p> <p>(3) The recommended class size.</p> <p>(4) The attendance certification method.</p> <p>(5) Proof that each course instructor is certified by the Department to conduct administrator training.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

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Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(6) The subject that each instructor will teach and documentation of the instructor's academic credentials, instructional experience and work experience to teach the subject.</p> <p>(7) The location of the training site, which shall accommodate the number of anticipated participants.</p> <p>(c) A request to amend a Department-approved course of study shall be submitted for the Department's review and approval prior to implementation of a change in the course of study.</p> <p>(d) The training institution shall issue a training certificate to each participant who successfully completes the Department-approved course and passes the competency test. Each training certificate must indicate the participant's name, the name of the training institution, the date and location of the training and the number of clock hours completed for each training topic.</p>	<p>(6) The subject that each instructor will teach and documentation of the instructor's academic credentials, instructional experience and work experience to teach the subject.</p> <p>(7) The location of the training site, which shall accommodate the number of anticipated participants.</p> <p>(c) A request to amend a Department-approved course of study shall be submitted for the Department's review and approval prior to implementation of a change in the course of study.</p> <p>(d) The training institution shall issue a training certificate to each participant who successfully completes the Department-approved course and passes the competency test. Each training certificate must indicate the participant's name, the name of the training institution, the date and location of the training and the number of clock hours completed for each training topic.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.68. Instructor approval.</b></p> <p>(a) Training for personal care home administrators provided by an individual who is not certified as an instructor by the Department will not be considered valid training.</p> <p>(b) To receive the Department's certification as an approved instructor for personal care home administrators, an instructor shall successfully complete the Department's train-the-trainer course. The train-the-trainer course is designed to provide and reinforce basic training skills, including the roles and responsibilities of the trainer, training methodology, the use of instructional aids and recordkeeping.</p> <p>(c) An instructor shall demonstrate competent instructional skills and knowledge of the applicable topic and meet the Department's qualifications for the topic being taught.</p> <p>(d) An instructor is subject to unannounced monitoring by the</p>	<p><b>§ 2800.68. Instructor approval.</b></p> <p>(a) Training for assisted living residence administrators provided by an individual who is not certified as an instructor by the Department will not be considered valid training.</p> <p>(b) To receive the Department's certification as an approved instructor for assisted living residence administrators, an instructor shall successfully complete the Department's train-the-trainer course. The train-the-trainer course is designed to provide and reinforce basic training skills, including the roles and responsibilities of the trainer, training methodology, the use of instructional aids and recordkeeping.</p> <p>(c) An instructor shall demonstrate competent instructional skills and knowledge of the applicable topic and meet the Department's qualifications for the topic being taught.</p> <p>(d) An instructor is subject to unannounced monitoring by the</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

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Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>Department while conducting training.</p> <p>(e) The Department will establish approval standards that include the following:</p> <p>(1) The mechanism to measure the quality of the training being offered.</p> <p>(2) The criteria for selecting and evaluating instructors, subject matter and instructional materials.</p> <p>(3) The criteria for evaluating requests to amend a course.</p> <p>(4) The criteria for evaluating the effectiveness of each course.</p> <p>(5) The instructor qualifications for each subject being taught.</p> <p>(f) The Department may withdraw approval under the following conditions:</p> <p>(1) Failure to follow the approved curriculum.</p> <p>(2) Lack of trainer competency.</p> <p>(3) A pattern of violations of this chapter by a home conducting the training.</p>	<p>Department while conducting training.</p> <p>(e) The Department will establish approval standards that include the following:</p> <p>(1) The mechanism to measure the quality of the training being offered.</p> <p>(2) The criteria for selecting and evaluating instructors, subject matter and instructional materials.</p> <p>(3) The criteria for evaluating requests to amend a course.</p> <p>(4) The criteria for evaluating the effectiveness of each course.</p> <p>(5) The instructor qualifications for each subject being taught.</p> <p>(f) The Department may withdraw approval under the following conditions:</p> <p>(1) Failure to follow the approved curriculum.</p> <p>(2) Lack of trainer competency.</p> <p>(3) A pattern of violations of this chapter by a residence conducting the training.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<b>Chapter 2600 – no corresponding Section</b>	<p><b>§ 2800.69. Additional dementia-specific training.</b></p> <p><u><i>Administrative staff, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall receive at least 4 hours of dementia-specific training within 30 days of hire and at least 2 hours of dementia-specific training annually thereafter in addition to the training requirements of this chapter.</i></u></p>	<p>In the ALR setting, 4 hours of dementia-specific training is required for administrative staff, direct care staff, ancillary staff, substitute personal and volunteers within 30 days of hire and at least 2 hours annually thereafter.</p>
<b>Physical Site</b>		
<p><b>§ 2600.81. Physical accommodations and equipment.</b></p> <p>(a) The home shall provide or arrange for physical site accommodations and equipment necessary to meet the health and safety needs of a resident with a disability and to allow safe movement within the home and exiting from the home.</p> <p>(b) Wheelchairs, walkers, prosthetic devices and other apparatus used by</p>	<p><b>§ 2800.81. Physical accommodations and equipment.</b></p> <p>(a) The residence shall provide or arrange for physical site accommodations and equipment necessary to meet the health and safety needs of a resident with a disability and to allow safe movement within the residence and exiting from the residence.</p> <p>(b) Wheelchairs, walkers, prosthetic devices and other apparatus used by</p>	



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
residents must be clean, in good repair and free of hazards.	residents must be clean, in good repair and free of hazards.	
<p><b>§ 2600.82. Poisons.</b></p> <p>(a) Poisonous materials shall be stored in their original, labeled containers.</p> <p>(b) Poisonous materials shall be stored separately from food, food preparation surfaces and dining surfaces.</p> <p>(c) Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.</p>	<p><b>§ 2800.82. Poisons.</b></p> <p>(a) Poisonous materials shall be stored in their original, labeled containers.</p> <p>(b) Poisonous materials shall be stored separately from food, food preparation surfaces and dining surfaces.</p> <p>(c) Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the residence are able to safely use or avoid poisonous materials.</p>	
<p><b>§ 2600.83. Temperature.</b></p> <p>(a) The indoor temperature, in areas used by the residents, must be at least 70°F when residents are present in the home.</p> <p>(b) If a home does not provide air conditioning, fans shall be made available</p>	<p><b>§ 2800.83. Temperature.</b></p> <p>(a) The indoor temperature, in areas used by the residents, must be at least 70° F when residents are present in the residence.</p> <p>(b) <u><b>A residence in existence prior to January 18, 2011, shall provide central</b></u></p>	<p>In the ALR setting, the ALR must provide air conditioning – there are no provisions</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
to residents when the indoor temperature exceeds 80°F.	<u><i>air conditioning. If central air conditioning is not feasible or is cost prohibitive, window air conditioning units shall be provided. The residence shall submit justification to the Department for the use of window air conditioning units.</i></u>  <u><i>(c) For new construction after January 18, 2011, the residence shall provide central air conditioning.</i></u>	to allow for fans.
<b>§ 2600.84. Heat sources.</b>  Heat sources, such as steam and hot heating pipes, water pipes, fixed space heaters, hot water heaters and radiators exceeding 120°F that are accessible to the resident must be equipped with protective guards or insulation to prevent the resident from coming in contact with the heat source.	<b>§ 2800.84. Heat sources.</b>  Heat sources, such as steam and hot heating pipes, water pipes, fixed space heaters, hot water heaters and radiators exceeding 120°F that are accessible to the resident must be equipped with protective guards or insulation to prevent the resident from coming in contact with the heat source.	
<b>§ 2600.85. Sanitation.</b>  (a) Sanitary conditions shall be maintained.	<b>§ 2800.85. Sanitation.</b>  (a) Sanitary conditions shall be maintained.	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) There may be no evidence of infestation of insects or rodents in the home.</p> <p>(c) Trash shall be removed from the premises at least once a week.</p> <p>(d) Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.</p> <p>(e) Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.</p> <p>(f) For a home serving 9 or more residents that is not connected to a public sewer system there shall be a written sanitation approval for its sewage system by the sewage enforcement official of the municipality in which the home is located.</p>	<p>(b) There may be no evidence of infestation of insects or rodents in the residence.</p> <p>(c) Trash shall be removed from the premises at least once a week.</p> <p>(d) Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.</p> <p>(e) Trash outside the residence shall be kept in covered receptacles that prevent the penetration of insects and rodents.</p> <p>(f) For a residence serving 9 or more residents that is not connected to a public sewer system, there shall be a written sanitation approval for its sewage system by the sewage enforcement official of the municipality in which the residence is located.</p>	
<b>§ 2600.86. Ventilation.</b>	<b>§ 2800.86. Ventilation.</b>	
(a) All areas of the home that are used by	(a) All areas of the residence that are used	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
the resident shall be ventilated. Ventilation includes an operable window, air conditioner, fan or mechanical ventilation that ensures airflow. (b) A bathroom that does not have an operable, outside window shall be equipped with an exhaust fan for ventilation.	by the resident shall be ventilated. Ventilation includes an operable window, air conditioner, fan or mechanical ventilation that ensures airflow. (b) A bathroom that does not have an operable, outside window must be equipped with an exhaust fan for ventilation.	
<b>§ 2600.87. Lighting.</b>  The home's rooms, hallways, interior stairs, outside steps, outside doorways, porches, ramps, evacuation routes, outside walkways and fire escapes shall be lighted and marked to ensure that residents, including those with vision impairments, can safely move through the home and safely evacuate.	<b>§ 2800.87. Lighting.</b>  The residence's rooms, hallways, interior stairs, outside steps, outside doorways, porches, ramps, evacuation routes, outside walkways and fire escapes <u><b>must be</b></u> lighted and marked to ensure that residents, including those with vision impairments, can safely move through the residence and safely evacuate.	
<b>§ 2600.88. Surfaces.</b>  (a) Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.	<b>§ 2800.88. Surfaces.</b>  (a) Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
(b) The home may not use asbestos products for renovations or new construction.	(b) The residence may not use asbestos products for renovations or new construction.  <b><u>(c) If asbestos is found in a residence or contained in any part of the residence, the residence shall have a certification from an asbestos remediation company that the residence is safe for residents and that the asbestos does not pose a risk.</u></b>	In the ALR setting, provisions are included to address what the ALR must do if asbestos is found.
<b>§ 2600.89. Water.</b>  (a) The home must have hot and cold water under pressure in each bathroom, kitchen and laundry area to accommodate the needs of the residents in the home.  (b) Hot water temperature in areas accessible to the resident may not exceed 120°F.  (c) A home that is not connected to a public water system shall have a coliform water test at least every 3 months, by a Department of Environmental Protection-	<b>§ 2800.89. Water.</b>  (a) The residence must have hot and cold water under pressure in each bathroom, kitchen and laundry area to accommodate the needs of the residents in the residence.  (b) Hot water temperature in areas accessible to the resident may not exceed 120°F.  (c) A residence that is not connected to a public water system shall have a coliform water test at least every 3 months, by a Department of Environmental Protection-	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>certified laboratory, stating that the water is below maximum contaminant levels. A public water system is a system that provides water to the public for human consumption, which has at least 15 service connections or regularly serves an average of at least 25 individuals daily at least 60 days out of the year.</p> <p>(d) If the water is found to be above maximum contaminant levels, the home shall conduct remediation activity to reduce the level of contaminants to below the maximum contaminant level. During remediation activity, an alternate source of drinking water shall be provided to the residents.</p> <p>(e) The home shall keep documentation of the laboratory certification, in addition to the results and corrections made to ensure safe water for drinking.</p>	<p>certified laboratory, stating that the water is below maximum contaminant levels. A public water system is a system that provides water to the public for human consumption, which has at least 15 service connections or regularly serves an average of at least 25 individuals daily at least 60 days out of the year.</p> <p>(d) If the water is found to be above maximum contaminant levels, the residence shall conduct remediation activity to reduce the level of contaminants to below the maximum contaminant level. During remediation activity, an alternate source of drinking water shall be provided to the residents.</p> <p>(e) The residence shall keep documentation of the laboratory certification, in addition to the results and corrections made to ensure safe water for drinking.</p>	
<b>§ 2600.90. Communication system.</b>	<b>§ 2800.90. Communication system.</b>	
(a) The home shall have a working,	(a) The residence shall have a working,	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>noncoin operated, landline telephone that is accessible in emergencies and accessible to individuals with disabilities.</p> <p>(b) For a home serving 9 or more residents, there shall be a system or method of communication that enables staff persons to immediately contact other staff persons in the home for assistance in an emergency.</p>	<p>noncoin operated, landline telephone that is accessible in emergencies and accessible to individuals with disabilities.</p> <p>(b) For a residence serving nine or more residents, there shall be a system or method of communication <u><i>such as an intercom, public address, pager or cell phone system</i></u> that enables staff persons to immediately contact other staff persons in the residence for assistance in an emergency.</p>	<p>In the ALR setting, clarifying language was added regarding examples of systems or methods of communication.</p>
<p><b>§ 2600.91. Emergency telephone numbers.</b></p> <p>Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.</p>	<p><b>§ 2800.91. Emergency telephone numbers.</b></p> <p>Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and assisted living residence complaint hotline shall be posted on or by each telephone with an outside line.</p>	
<p><b>§ 2600.92. Windows and screens.</b></p> <p>Windows, including windows in doors,</p>	<p><b>§ 2800.92. Windows and screens.</b></p> <p>Windows, including windows in doors,</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
must be in good repair and securely screened when doors or windows are open.	must be in good repair and securely screened when doors or windows are open.	
<b>§ 2600.93. Handrails and railings.</b>  (a) Each ramp, interior stairway and outside steps must have a well-secured handrail.  (b) Each porch must have a well-secured railing.	<b>§ 2800.93. Handrails and railings.</b>  (a) Each ramp, interior stairway, hallway and outside steps must have a well-secured handrail.  (b) Each porch must have a well-secured railing.	
<b>§ 2600.94. Landings and stairs.</b>  (a) Interior and exterior doors that open directly into a stairway and are used for exit doors, resident areas and fire exits must have a landing, which is a minimum of 3 feet by 3 feet.  (b) Interior stairs, exterior steps and ramps must have nonskid surfaces.	<b>§ 2800.94. Landings and stairs.</b>  (a) Interior and exterior doors that open directly into a stairway and are used for exit doors, resident areas and fire exits must have a landing, which is a minimum of 3 feet by 3 feet.  (b) Interior stairs, exterior steps and ramps must have nonskid surfaces.  <u><b>(c) Stairs must have strips for those with vision impairments.</b></u>	In the ALR setting, all stairs must have strips to assist residents with vision impairments.



## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.95. Furniture and equipment.</b></p> <p>Furniture and equipment must be in good repair, clean and free of hazards.</p>	<p><b>§ 2800.95. Furniture and equipment.</b></p> <p>Furniture and equipment must be in good repair, clean and free of hazards.</p>	
<p><b>§ 2600.96. First aid kit.</b></p> <p>(a) The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.</p> <p>(b) Staff persons shall know the location of the first aid kit.</p> <p>(c) The first aid kit must be in a location that is easily accessible to staff persons.</p>	<p><b>§ 2800.96. First aid kit.</b></p> <p>(a) The residence shall have a first aid kit <u><b>in each building on the premises</b></u> that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers. <u><b>The residence shall have an automatic external defibrillation device located in each building on the premises.</b></u></p> <p>(b) Staff persons shall know the location of the first aid kit.</p> <p>(c) The first aid kit must be in a location that is easily accessible to staff persons.</p>	<p>In the ALR setting, the ALR must have a first aid kit and an automatic external defibrillation device in each building.</p>
<p><b>§ 2600.97. Elevators and stair glides.</b></p> <p>Each elevator and stair glide must have a certificate of operation from the</p>	<p><b>§ 2800.97. Elevators and stair glides.</b></p> <p>Each elevator and stair glide must have a certificate of operation from the</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
Department of Labor and Industry or the appropriate local building authority in accordance with 34 Pa. Code Chapter 405 (relating to elevators and other lifting devices).	Department of Labor and Industry or the appropriate local building authority in accordance with 34 Pa. Code Chapter 405 (relating to elevators and other lifting devices).	
<p><b>§ 2600.98. Indoor activity space.</b></p> <p>(a) The home shall have indoor activity space for activities such as reading, recreation and group activities.</p> <p>(b) The home shall have at least one furnished living room or lounge area for residents, their families and visitors. The combined living room or lounge areas shall accommodate all residents at one time. These rooms or areas shall contain tables, chairs and lighting to accommodate the residents, their families and visitors.</p>	<p><b>§ 2800.98. Indoor activity space.</b></p> <p>(a) The residence shall have <u><b>at least two indoor wheelchair accessible common rooms</b></u> for all residents for activities such as reading, recreation and group activities. <u><b>One of the common rooms shall be available for resident use at any time, provided the use does not affect or disturb others.</b></u></p> <p>(b) The residence shall have at least one furnished living room or lounge area for residents, their families and visitors. The combined living room or lounge areas must accommodate all residents at one time. <u><b>There must be at least 15 square feet per living unit for up to 50 living units. There must be a total of 750 square feet if there are more than 50 living units.</b></u> These rooms or areas must</p>	<p>In the ALR setting, the ALR must have at least two indoor wheelchair accessible common rooms. One of which must be available for resident use at any time.</p> <p>In the ALR setting, the living room or lounge area must have at least 15 square feet per living unit for up to 50 units. For more than 50 units there must be a total of 750 square feet.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
(c) The home shall have a working television and radio available to residents in a living room or lounge area.	contain tables, chairs and lighting to accommodate the residents, their families and visitors.  (c) The residence shall have a working television and radio available to residents in a living room or lounge area.	
<b>§ 2600.99. Recreation space.</b>  The home shall provide regular access to outdoor and indoor recreation space and recreational items, such as books, newspapers, magazines, puzzles, games, cards and crafts.	<b>§ 2800.99. Recreation space.</b>  The residence shall provide regular access to outdoor and indoor recreation space and recreational items, such as books, newspapers, magazines, puzzles, games, cards and crafts.	
<b>§ 2600.100. Exterior conditions.</b>  (a) The exterior of the building and the building grounds or yard must be in good repair and free of hazards.  (b) The home shall ensure that ice, snow and obstructions are removed from outside walkways, ramps, steps, recreational areas and exterior fire escapes.	<b>§ 2800.100. Exterior conditions.</b>  (a) The exterior of the building and the building grounds or yard must be in good repair and free of hazards.  (b) The residence shall ensure that ice, snow and obstructions are removed from outside walkways, ramps, steps, recreational areas and exterior fire escapes.	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.101. Resident bedrooms.</b></p> <p>(a) Each single bedroom must have at least 80 square feet of floor space measured wall to wall, including space occupied by furniture.</p> <p>(b) Each shared bedroom must have at least 60 square feet of floor space per resident measured wall to wall, including space occupied by furniture.</p> <p>(c) Each bedroom for one or more residents with a mobility need must have at least 100 square feet per resident, to allow for easy passage between beds and other furniture, and for comfortable use of a resident's assistive devices, including wheelchairs, walkers, special furniture or oxygen equipment. This requirement does not apply if there is a medical order from the attending physician that states the resident can maneuver without the necessity of the additional space. A legal entity with a personal care home license for the home as of October 24, 2005, that has one or more bedrooms serving a</p>	<p><b>§ 2800.101. Resident living units.</b></p> <p>(a) A residence shall provide a resident with the resident's own living unit unless the conditions of subsection (c) are met.</p> <p><b><u>(b) The following conditions apply to a residence:</u></b></p> <p><b><u>(1) For new construction of residences after January 18, 2011, each living unit for a single resident must have at least 225 square feet of floor space measured wall-to-wall, excluding bathrooms and closet space. If two residents share a living unit, there must be a total of 300 square feet in the living unit. Exceptions to the size of the living unit may be made at the Department's discretion.</u></b></p> <p><b><u>(2) For facilities in existence prior to January 18, 2011, each living unit must have at least 160 square feet measured wall to wall, excluding bathrooms and closet space. If two residents share a living unit, there must be a total of 210 square feet in the living unit. Exceptions to the size of the living unit may be made at the Department's discretion.</u></b></p>	<p>In the ALR setting, the living units in a newly constructed residence must have at least 225 square feet of floor space, excluding bathrooms and closets. If two residents share a unit there must be a total of 300 square feet. Exceptions to the size of the unit may be made by the Department at their discretion.</p> <p>In the ALR setting existing facilities must have at least 160 square feet of floor space. If two residents share a unit there must be a total of 210 square feet. Exceptions to the size of the unit may be made by the Department at their discretion.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>resident with physical mobility needs as of October 24, 2005, shall be exempt from the requirements specified in this subsection for the bedroom. If a bedroom is exempt in accordance with this subsection, additional square footage may be required sufficient to accommodate the assistive devices of the resident with mobility needs.</p> <p>(d) No more than four residents may share a bedroom.</p>	<p><b><u>(3) Each living unit must have a telephone jack and individually controlled thermostats for heating and cooling.</u></b></p> <p><b><u>(4) The doors in living units, including entrance doors, must be accessible or adaptable for wheelchair use.</u></b></p> <p><b><u>(c) Two residents may voluntarily agree to share one living unit provided that the agreement is in writing and contained in each of the resident-residence contract of those residents. A licensee may not require residents to share a living unit. The maximum number of residents in any living unit shall be two residents.</u></b></p> <p><b><u>(d) Kitchen capacity requirements are as follows:</u></b></p> <p><b><u>(1) New construction. For new construction of residences after January 18, 2011, the kitchen capacity, at a minimum, must contain a cabinet for food storage, a small bar-type sink with hot and cold running water and space</u></b></p>	<p>In the ALR setting, the maximum number of residents permitted per living unit is two. If and only if the two residents voluntarily agree to share the living unit and the agreement is in writing.</p> <p>In the ALR setting, a newly constructed ALR must provide kitchen capacity that at a minimum includes the following: a cabinet for food storage, a small bar-type sink with hot and cold running water, and space with electrical outlets for small appliances, such as a microwave and a small refrigerator.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>with electrical outlets suitable for small appliances such as a microwave oven and a small refrigerator.</u></p> <p><u>(i) Upon entering the assisted living residence, the resident or his designated person shall be asked if the resident wishes to have a cooking appliance or small refrigerator, or both. The cooking appliance or small refrigerator, or both, shall be provided by the residence if desired by the resident or his designated person. If the resident or the designated person wishes to provide his own cooking appliance or small refrigerator, or both, it shall meet the residence's safety standards.</u></p> <p><u>(ii) An appliance shall be designed so it can be disconnected and removed for resident safety or if the resident chooses not to have the appliance within his living unit.</u></p> <p><u>(2) Existing facilities. Facilities that convert to residences after January 18, 2011, must meet the following requirements related to kitchen capacity:</u></p> <p><u>(i) The residence shall provide space with electrical outlets suitable for small</u></p>	<p>The ALR must ask the resident if they want a cooking appliance and/or a small refrigerator and provide them if the resident desires. The resident shall be permitted to provide their own cooking appliance or small refrigerator if they wish – provided they meet the ALR's safety standards.</p> <p>An existing facility that converts to an ALR must provide space with electrical outlets for small appliances – such as microwave and small refrigerator. The ALR must ask the resident if they want a cooking appliance and/or small</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>appliances, such as a microwave oven and small refrigerator.</u></p> <p><u>(A) Upon entering the assisted living residence, the resident or his designated person shall be asked if the resident wishes to have a cooking appliance or small refrigerator, or both. The cooking appliance or small refrigerator, or both, shall be provided by the residence if desired by the resident or his designated person. If the resident or his designated person wishes to provide his own cooking appliance or small refrigerator, or both, it must meet the residence's safety standards.</u></p> <p><u>(B) An appliance shall be designed so it can be disconnected and removed for resident safety or if the resident chooses not to have the appliance within his living unit.</u></p> <p><u>(ii) The residence shall provide access to a sink for dishes, a stovetop for hot food preparation and a food preparation area in a common area. A common resident kitchen may not include the kitchen used by the residence staff for the preparation of resident or employee meals, or the</u></p>	<p>refrigerator and provide them if the resident so desires. The resident shall be permitted to provide their own cooking appliance and/or small refrigerator if they wish – provided they meet the ALR's safety standards.</p> <p>An existing facility that converts to an ALR must also provide the resident access to a sink, a stove and a food preparation area in a common area. The common kitchen may not be the kitchen used by staff for resident or employee meals.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(e) Ceiling height in each bedroom must be an average of at least 7 feet.</p> <p>(f) Each bedroom must have a window with direct exposure to natural light.</p> <p>(g) A resident's bedroom shall be used only by the occupying resident and not for activities common to other residents.</p> <p>(h) A resident shall be able to access toilet, hand washing and bathing facilities without having to pass through another resident's bedroom.</p> <p>(i) A resident shall have access to his bedroom at all times.</p>	<p><b><u>storage of goods.</u></b></p> <p>(e) Ceiling height in each living unit must be an average of at least 7 feet.</p> <p>(f) Each living unit must have at least one window with direct exposure to natural light.</p> <p>(g) A resident's bedroom in the living unit shall be used only by the occupying resident <b><u>unless two consenting adult residents agree to share a bedroom and the requirements of subsection (c) are met.</u></b></p> <p><b><u>(h) Each living unit must have a door with a lock, except where a lock in a unit under a special care designation would pose a risk or be unsafe. The administrator shall maintain a master key that can open all locks in the event of an emergency.</u></b></p> <p>(i) A resident shall have access to his living unit at all times.</p>	<p>In the ALR setting, the living units must have a door that locks, unless a special care unit. The administrator must maintain a master key to open all living units.</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(j) Each resident shall have the following in the bedroom:</p> <p>(1) A bed with a solid foundation and fire retardant mattress that is in good repair, clean and supports the resident. A legal entity with a personal care home license for the home as of October 24, 2005, shall be exempt from the requirement for a fire retardant mattress.</p> <p>(2) A chair for each resident that meets the resident's needs.</p> <p>(3) Pillows, bed linens and blankets that are clean and in good repair.</p> <p>(4) A storage area for clothing that includes a chest of drawers and a closet or wardrobe space with clothing racks or shelves accessible to the resident.</p> <p>(5) A bedside table or a shelf.</p> <p>(6) A mirror.</p> <p>(7) An operable lamp or other source of lighting that can be turned on at bedside.</p> <p>(8) If a resident shares a bedroom with other residents, the items specified in paragraphs (4)—(7) may be shared with one other resident.</p> <p>(k) Cots and portable beds are prohibited.</p>	<p>(j) Each resident shall have the following in the living unit:</p> <p>(1) A bed with a solid foundation and fire retardant mattress that is in good repair, clean and supports the resident. <u><b>An exception will be permitted for residents who wish to provide their own mattresses.</b></u></p> <p>(2) A chair for each resident that meets the resident's needs.</p> <p>(3) Pillows, bed linens and blankets that are clean and in good repair.</p> <p>(4) A storage area for clothing that includes a chest of drawers and a closet or wardrobe space with clothing racks or shelves accessible to the resident.</p> <p>(5) A bedside table or a shelf.</p> <p>(6) A mirror.</p> <p>(7) An operable lamp or other source of lighting that can be turned on at bedside.</p> <p>(8) If a resident shares a bedroom with another resident, the items specified in paragraphs (4)—(7) may be shared with one other resident.</p> <p>(k) Cots and portable beds are prohibited.</p>	<p>In the ALR setting, residents may provide their own mattresses.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(l) Bunk beds or other raised beds that require residents to climb steps or ladders to get into or out of bed are prohibited.</p> <p>(m) A bedroom may not be used as a exit from or used as a passageway to another part of the home unless in an emergency situation.</p> <p>(n) A resident may not be required to share a bedroom with an individual of the opposite sex.</p> <p>(o) The bedrooms must have walls, floors and ceilings, which are finished, clean and in good repair.</p> <p>(p) There must be doors on the bedrooms.</p> <p>(q) Space for storage of personal property shall be provided in a dry, protected area.</p> <p>(r) There must be drapes, shades, curtains, blinds or shutters on the bedroom windows. Window coverings must be</p>	<p>(l) Bunk beds or other raised beds that require residents to climb steps or ladders to get into or out of bed are prohibited.</p> <p>(m) A living unit may not be used as an exit from or used as a passageway to another part of the residence unless in an emergency situation.</p> <p>(n) The living unit must have walls, floors and ceilings, which are finished, clean and in good repair.</p> <p>(o) <b><u>In living units with a separate bedroom</u></b>, there must be a door on the bedroom.</p> <p>(p) Space for storage of personal property shall be provided in a dry, protected area.</p> <p>(q) There must be drapes, shades, curtains, blinds or shutters on the living unit windows. Window coverings must be</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
clean, in good repair, provide privacy and cover the entire window when drawn.	clean, in good repair, provide privacy and cover the entire window when drawn.  <b><u>(r) Each living unit must be equipped with an emergency notification system to notify staff in the event of an emergency.</u></b>	In the ALR setting, each living unit must be equipped with an emergency notification system.
<b>§ 2600.102. Bathrooms.</b>  (a) There shall be at least one functioning flush toilet for every six or fewer users, including residents, staff persons and household members.  (b) There shall be at least one sink and wall mirror for every six or fewer users including residents, staff persons and household members.  (c) There shall be at least one bathtub or shower for every ten or fewer users, including residents, staff persons and household members.  (d) Toilet and bath areas must have grab bars, hand rails or assist bars. Bathtubs and showers must have slip-resistant	<b>§ 2800.102. Bathrooms.</b>  (a) There must be one functioning flush toilet <b><u>in the bathroom in the living unit.</u></b>  (b) There must be at least one sink and wall mirror <b><u>in the bathroom of the living unit.</u></b>  (c) There must be at least one bathtub or shower <b><u>in the bathroom of the living unit.</u></b>  (d) Toilet and bath areas in the living unit must have grab bars, hand rails or assist bars. Bathtubs and showers must have	In the ALR setting each living unit must have a bathroom with a flush toilet, a sink and wall mirror, and a bathtub or shower.

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>surfaces.</p> <p>(e) Privacy shall be provided for toilets, showers and bathtubs by partitions or doors.</p> <p>(f) An individual towel, washcloth and soap shall be provided for each resident.</p> <p>(g) Individual toiletry items including toothpaste, toothbrush, shampoo, deodorant, comb and hairbrush shall be made available to residents who are not recipients of SSI. If the home charges for these items, the charges shall be indicated in the resident-home contract. Availability of toiletry items for residents who are recipients of SSI is specified in § 2600.27(d)(1) (relating to SSI recipients).</p>	<p>slip-resistant surfaces.</p> <p>(e) Privacy in the living unit must be provided for toilets, showers and bathtubs by partitions or doors. <b><u>Bathroom doors in a double occupancy living unit must be lockable by the resident, unless contraindicated by the support plan.</u></b></p> <p>(f) An individual towel, washcloth and soap shall be provided for each resident <b><u>unless the resident provides his own supplies of these items.</u></b></p> <p>(g) Individual toiletry items including toothpaste, toothbrush, shampoo, deodorant, comb and hairbrush shall be made available to residents who are not recipients of SSI. If the residence charges for these items, the charges shall be indicated in the resident-residence contract. Availability of toiletry items for residents who are recipients of SSI is specified in § 2800.27(d)(1) (relating to SSI recipients).</p>	<p>If two residents are sharing a living unit the bathroom doors must be lockable by the resident – unless contraindicated by the support plan.</p> <p>In the ALR setting the resident has the option to provide their own towel, washcloth and soap.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(h) Toilet paper shall be provided for every toilet.</p> <p>(i) A dispenser with soap shall be provided within reach of each bathroom sink. Bar soap is not permitted unless there is a separate bar clearly labeled for each resident who shares a bathroom.</p> <p>(j) Towels and washcloths shall be in the possession of the resident in the resident's living space unless the resident has access to the home's linen supply.</p> <p>(k) Use of a common towel is prohibited.</p> <p>(l) Shelves or hooks for the resident's towel and clothing shall be provided.</p> <p>(m) A legal entity with a personal care home license for the home as of October 24, 2005, shall be exempt from the requirements specified in subsection (c). If a home is exempt in accordance with this subsection, there shall be at least one</p>	<p>(h) Toilet paper shall be provided for every toilet.</p> <p>(i) <b><u>Bar soap or</u></b> a dispenser with soap shall be provided within reach of each bathroom sink. Bar soap, however, is not permitted when a living unit is shared unless there is a separate bar clearly labeled for each resident sharing the living unit.</p> <p>(j) Towels and washcloths shall be in the possession of the resident in the resident's living unit unless the resident has access to the residence's linen supply.</p> <p>(k) Use of a common towel is prohibited.</p> <p>(l) Shelves or hooks for the resident's towel and clothing shall be provided.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
bathtub or shower for every 15 or fewer users.	<p><u><i>(m) A residence shall have at least one public restroom that is convenient to common areas and wheelchair accessible.</i></u></p> <p><u><i>(n) Each bathroom must be equipped with an emergency notification system to notify staff in the event of an emergency.</i></u></p>	<p>In the ALR setting, there must be one wheelchair accessible public restroom convenient to common areas.</p> <p>In the ALR setting, each bathroom must be equipped with an emergency notification system.</p>
<p><b>§ 2600.103. Food service.</b></p> <p>(a) A home shall have access on the grounds to an operable kitchen with a refrigerator, sink, stove, oven, cooking equipment and cabinets or shelves for storage. If the kitchen is not in the home, the home shall have a kitchen area with a refrigerator, cooking equipment, a sink and food storage space.</p> <p>(b) Kitchen surfaces must be of a nonporous material and cleaned and sanitized after each meal.</p> <p>(c) Food shall be protected from contamination while being stored,</p>	<p><b>§ 2800.103. Food service.</b></p> <p>(a) A residence shall have access on the grounds to an operable kitchen with a refrigerator, sink, stove, oven, cooking equipment and cabinets or shelves for storage. If the kitchen is not in the residence, the residence shall have a kitchen area with a refrigerator, cooking equipment, a sink and food storage space.</p> <p>(b) Kitchen surfaces must be of a nonporous material and cleaned and sanitized after each meal.</p> <p>(c) Food shall be protected from contamination while being stored,</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>prepared, transported and served.</p> <p>(d) Food shall be stored off the floor.</p> <p>(e) Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.</p> <p>(f) Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.</p> <p>(g) Food shall be stored in closed or sealed containers.</p> <p>(h) Food shall be thawed either in the refrigerator, microwave, under cool water or as part of the cooking process.</p> <p>(i) Outdated or spoiled food or dented cans may not be used.</p> <p>(j) Eating, drinking and cooking utensils shall be washed, rinsed and sanitized after each use by a method specified in 7 Pa.</p>	<p>prepared, transported and served.</p> <p>(d) Food shall be stored off the floor.</p> <p>(e) Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.</p> <p>(f) Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.</p> <p>(g) Food shall be stored in closed or sealed containers.</p> <p>(h) Food shall be thawed either in the refrigerator, microwave oven, under cool water or as part of the cooking process.</p> <p>(i) Outdated or spoiled food or dented cans may not be used.</p> <p>(j) Eating, drinking and cooking utensils shall be washed, rinsed and sanitized after each use by a method specified in 7</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
Code Chapter 46, Subchapter D (relating to equipment, utensils and linen).	Pa.Code Chapter 46, Subchapter D (relating to equipment, utensils and linens).	
<p><b>§ 2600.104. Dining room.</b></p> <p>(a) A dining room area shall be equipped with tables and chairs and able to accommodate the maximum number of residents scheduled for meals at any one time.</p> <p>(b) Dishes, glassware and utensils shall be provided for eating, drinking, preparing and serving food. These utensils must be clean, and free of chips and cracks. Plastic and paper plates, utensils and cups for meals may not be used on a regular basis.</p> <p>(c) Condiments shall be available at the dining table.</p>	<p><b>§ 2800.104. Dining room.</b></p> <p>(a) <u><i>An assisted living residence shall have an accessible common dining space outside the resident living units.</i></u> A dining room area must be equipped with tables and chairs and able to accommodate the maximum number of residents scheduled for meals at any one time. <u><i>There must be at least 15 square feet per person for residents scheduled for meals at any one time.</i></u></p> <p>(b) Dishes, glassware and utensils shall be provided for eating, drinking, preparing and serving food. These utensils must be clean, and free of chips and cracks. Plastic and paper plates, utensils and cups for meals may not be used on a regular basis.</p> <p>(c) Condiments shall be available at the dining table.</p>	<p>In the ALR setting, the dining space outside the living units must provide at least 15 square feet per resident scheduled for meals at any one time.</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(d) Adaptive eating equipment or utensils shall be available, if needed, to assist residents in eating at the table.</p> <p>(e) Breakfast, midday and evening meals shall be served to residents in a dining room except in the following situations:            (1) Service in the resident's room shall be available at no additional charge when the resident is unable to come to the dining room due to illness.            (2) When room service is available in a home, a resident may choose to have a meal served in the resident's room. This service shall be provided at the resident's request and may not replace daily meals in a dining room.</p>	<p>(d) Adaptive eating equipment or utensils shall be available, if needed, to assist residents in eating at the table.</p> <p>(e) Breakfast, midday and evening meals shall be served to residents in a dining room except in the following situations:            (1) Service in the resident's living unit shall be available at no additional charge when the resident is unable to come to the dining room due to illness.            (2) When room service is available in a residence, a resident may choose to have a meal served in the resident's living unit. This service shall be provided at the resident's request and may not replace daily meals in a dining room.</p>	
<p><b>§ 2600.105. Laundry.</b></p> <p>(a) Laundry service for bed linens, towels and personal clothing shall be provided by the home, at no additional charge, to residents who are recipients of or eligible applicants for SSI benefits. Laundry service does not include dry cleaning.</p>	<p><b>§ 2800.105. Laundry.</b></p> <p>(a) Laundry service for bed linens, towels and personal clothing shall be provided by the residence, at no additional charge, to residents who are recipients of or eligible applicants for SSI benefits. Laundry service does not include dry cleaning.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) Laundry service for bed linens, towels and personal clothing for the residents who are not recipients of SSI shall be provided by the home unless otherwise indicated in the resident-home contract.</p> <p>(c) The supply of bed linens and towels shall be sufficient to ensure a complete change of bed linen and towels at least once per week.</p> <p>(d) Bed linens and towels shall be changed at least once every week and more often as needed to maintain sanitary conditions.</p> <p>(e) Clean linens and towels shall be stored in an area separate from soiled linen and clothing.</p> <p>(f) Measures shall be implemented to ensure that residents' clothing are not lost</p>	<p>(b) Laundry service for bed linens, towels and personal clothing for the residents who are not recipients of SSI shall be provided by the residence unless otherwise indicated in the resident-residence contract. <u><i>If a residence provides laundry facilities, there may not be a prohibition against residents doing their own laundry.</i></u></p> <p>(c) The supply of bed linens and towels must be sufficient to ensure a complete change of bed linen and towels at least once per week.</p> <p>(d) Bed linens and towels shall be changed at least once every week and more often as needed to maintain sanitary conditions.</p> <p>(e) Clean linens and towels shall be stored in an area separate from soiled linen and clothing.</p> <p>(f) Measures shall be implemented to ensure that residents' clothing are not lost or misplaced during laundering or</p>	<p>In the ALR setting, if the ALR provides laundry facilities the residents must be permitted to do their own laundry.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>or misplaced during laundering or cleaning. The resident's clean clothing shall be returned to the resident within 24 hours after laundering.</p> <p>(g) To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.</p>	<p>cleaning. The resident's clean clothing shall be returned to the resident within 24 hours after laundering.</p> <p>(g) To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.</p>	
<p><b>§ 2600.106. Swimming areas.</b></p> <p>If a home operates a swimming area, the following requirements apply:</p> <p>(1) Swimming areas shall be operated in accordance with applicable laws and regulations.</p> <p>(2) Written policy and procedures to protect the health, safety and well-being of the residents shall be developed and implemented.</p>	<p><b>§ 2800.106. Swimming areas.</b></p> <p>If a residence operates a swimming area, the following requirements apply:</p> <p>(1) Swimming areas shall be operated in accordance with applicable laws and regulations.</p> <p>(2) Written policy and procedures to protect the health, safety and well-being of the residents shall be developed and implemented.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.107. Emergency preparedness.</b></p> <p>(a) The administrator shall have a copy and be familiar with the emergency preparedness plan for the municipality in which the home is located.</p> <p>(b) The home shall have written emergency procedures that include the following:</p> <p>(1) Contact information for each resident's designated person.</p> <p>(2) The home's plan to provide the emergency medical information for each resident that ensures confidentiality.</p> <p>(3) Contact telephone numbers of local and State emergency management agencies and local resources for housing and emergency care of residents.</p> <p>(4) Means of transportation in the event that relocation is required.</p> <p>(5) Duties and responsibilities of staff persons during evacuation, transportation and at the emergency location. These duties and responsibilities shall be specific to each resident's emergency needs.</p> <p>(6) Alternate means of meeting resident</p>	<p><b>§ 2800.107. Emergency preparedness.</b></p> <p>(a) The administrator shall have a copy and be familiar with the emergency preparedness plan for the municipality in which the residence is located.</p> <p>(b) The residence shall have written emergency procedures that include the following:</p> <p>(1) Contact information for each resident's designated person.</p> <p>(2) The residence's plan to provide the emergency medical information for each resident that ensures confidentiality.</p> <p>(3) Contact telephone numbers of local and State emergency management agencies and local resources for housing and emergency care of residents.</p> <p>(4) Means of transportation in the event that relocation is required.</p> <p>(5) Duties and responsibilities of staff persons during evacuation, transportation and at the emergency location. These duties and responsibilities shall be specific to each resident's emergency needs.</p> <p>(6) Alternate means of meeting resident</p>	

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## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>needs in the event of a utility outage.</p> <p>(c) The home shall maintain at least a 3-day supply of nonperishable food and drinking water for residents.</p> <p>(d) The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.</p>	<p>needs in the event of a utility outage.</p> <p>(c) The residence shall maintain at least a 3-day supply of nonperishable food and drinking water for residents.</p> <p>(d) The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.</p>	
<p><b>§ 2600.108. Firearms and weapons.</b></p>	<p><b>§ 2800.108. Firearms and weapons.</b></p> <p><u><i>(a) A residence shall have a written policy regarding firearms, weapons and ammunition where these items are on the premises or in possession of any resident or staff member. A residence is not required to permit firearms, weapons and ammunition.</i></u></p> <p><u><i>(b) The policy must include, at a minimum, procedures regarding the safety, access and use of firearms, weapons and ammunition.</i></u></p>	<p>In the ALR setting, the ALR is not required to permit firearms – the ALR must have a written policy regarding firearms, weapons and ammunition.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>Firearms, weapons and ammunition shall be permitted on the licensed premises of a home only when the following conditions are met:</p> <p>(1) Firearms and weapons shall be contained in a locked cabinet located in a place other than the residents' room or in a common living area.</p> <p>(2) Ammunition shall be contained in a locked area separate from firearms and weapons, and located in a place other than the residents' room or in a common living area.</p> <p>(3) The key to the locked cabinet containing the firearms, weapons and ammunition shall be in the possession of the administrator or a designee.</p> <p>(4) The administrator or a designee shall be the only individual permitted to open the locked cabinet containing the firearms and weapons and the locked area containing the ammunition.</p> <p>(5) If a firearm, weapon or ammunition is the property of a resident, there shall be a written policy and procedures regarding the safety, access and use of firearms,</p>	<p>(c) Firearms, weapons and ammunition shall be permitted on the licensed premises of a residence only when the following conditions are met:</p> <p>(1) Firearms and weapons shall be contained in a locked cabinet located in a place other than the residents' living unit or in a common living area.</p> <p>(2) Ammunition shall be contained in a locked area separate from firearms and weapons, and located in a place other than the residents' living unit or in a common living area.</p> <p>(3) The key to the locked cabinet containing the firearms, weapons and ammunition shall be in the possession of the administrator or a designee.</p> <p>(4) The administrator or designee shall be the only individual permitted to open the locked cabinet containing the firearms and weapons and the locked area containing the ammunition.</p> <p>(d) If a firearm, weapon or ammunition is the property of a resident, there shall be a written policy and procedures regarding the safety, access and use of firearms,</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
weapons and ammunition. A resident may not take a firearm, weapon or ammunition out of the locked cabinet into living areas.	weapons and ammunition. A resident may not take a firearm, weapon or ammunition out of the locked cabinet into the common living area.	
<p><b>§ 2600.109. Pets.</b></p> <p>(a) The home rules shall specify whether the home permits pets on the premises.</p> <p>(b) Cats and dogs present at the home shall have a current rabies vaccination. A current certificate of rabies vaccination from a licensed veterinarian shall be kept.</p> <p>(c) Pets that are accessible to the residents shall be in good health and nonaggressive to the residents.</p> <p>(d) If a home has additional charges for pets, the charges shall be included in the resident-home contract.</p>	<p><b>§ 2800.109. Pets.</b></p> <p>(a) The residence rules must specify whether the residence permits pets on the premises.</p> <p>(b) Cats and dogs present at the residence shall have a current rabies vaccination. A current certificate of rabies vaccination from a licensed veterinarian shall be kept.</p> <p>(c) Pets that are accessible to the residents shall be in good health and nonaggressive to the residents.</p> <p>(d) If a residence has additional charges for pets, the charges shall be included in the resident-residence contract.</p> <p><u><b>(e) A residence shall disclose to applicants whether pets are permitted and present in the residence.</b></u></p>	<p>In the ALR setting, the ALR must disclose, at time of application, whether pets are permitted and present in the ALR.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<b>Fire Safety</b>		
<p><b>§ 2600.121. Unobstructed egress.</b></p> <p>(a) Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.</p> <p>(b) Doors used for egress routes from rooms and from the building may not be equipped with key-locking devices, electronic card operated systems or other devices which prevent immediate egress of residents from the building, unless the home has written approval or a variance from the Department of Labor and Industry, the Department of Health or the appropriate local building authority.</p>	<p><b>§ 2800.121. Unobstructed egress.</b></p> <p>(a) Stairways, hallways, doorways, passageways and egress routes from living units and from the building must be unlocked and unobstructed.</p> <p>(b) <u><b>Except as provided in § 2800.101 (relating to resident living units),</b></u> doors used for egress routes from living units and from the building may not be equipped with key-locking devices, electronic card operated systems or other devices which prevent immediate egress of residents from the building, unless the residence has written approval or a variance from the Department of Labor and Industry, the Department of Health or the appropriate local building authority.</p>	<p>In the ALR setting, there is an exception regarding key-locking devices, except for resident living units. See § 2800.101</p>
<p><b>§ 2600.122. Exits.</b></p> <p>Unless otherwise regulated by the Department of Labor and Industry, the Department of Health or the appropriate local building authority, all buildings must</p>	<p><b>§ 2800.122. Exits.</b></p> <p>Unless otherwise regulated by the Department of Labor and Industry, the Department of Health or the appropriate local building authority, all buildings must</p>	



## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
have at least two independent and accessible exits from every floor, arranged to reduce the possibility that both will be blocked in an emergency situation.	have at least two independent and accessible exits from every floor, arranged to reduce the possibility that both will be blocked in an emergency situation.	
<p><b>§ 2600.123. Emergency evacuation.</b></p> <p>(a) Exit doors must be equipped so that they can be easily opened by residents from the inside without the use of a key or other manual device that can be removed, misplaced or lost.</p> <p>(b) Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.</p> <p>(c) For a home serving nine or more residents, an emergency evacuation diagram of each floor showing corridors, line of travel to exit doors and location of the fire extinguishers and pull signals shall be posted in a conspicuous and public place on each floor.</p>	<p><b>§ 2800.123. Emergency evacuation.</b></p> <p>(a) Exit doors must be equipped so that they can be easily opened by residents from the inside without the use of a key or other manual device that can be removed, misplaced or lost.</p> <p>(b) Copies of the emergency procedures as specified in § 2800.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the residence and a copy shall be kept.</p> <p>(c) For a residence serving nine or more residents, an emergency evacuation diagram of each floor showing corridors, line of travel to exit doors and location of the fire extinguishers and pull signals shall be posted in a conspicuous and public place on each floor.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
(d) If the home serves one or more residents with mobility needs above or below grade level of the home, there shall be a fire-safe area, as specified in writing within the past year by a fire safety expert, on the same floor as each resident with mobility needs.	(d) If the residence serves one or more residents with mobility needs above or below grade level of the residence, there shall be a fire-safe area, as specified in writing within the past year by a fire safety expert, on the same floor as each resident with mobility needs.	
<p><b>§ 2600.124. Notification of local fire officials.</b></p> <p>The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.</p>	<p><b>§ 2800.124. Notification of local fire officials.</b></p> <p>The residence shall notify the local fire department in writing of the address of the residence, location of the living units and bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.</p>	
<p><b>§ 2600.125. Flammable and combustible materials.</b></p> <p>(a) Combustible and flammable materials may not be located near heat sources or hot water heaters.</p> <p>(b) Combustible materials shall be inaccessible to residents.</p>	<p><b>§ 2800.125. Flammable and combustible materials.</b></p> <p>(a) Combustible and flammable materials may not be located near heat sources or hot water heaters.</p> <p>(b) Combustible materials shall be inaccessible to residents.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.126. Furnaces.</b></p> <p>(a) A professional furnace cleaning company or trained maintenance staff person shall inspect furnaces at least annually. Documentation of the inspection shall be kept.</p> <p>(b) Furnaces shall be cleaned according to the manufacturer's instructions. Documentation of the cleaning shall be kept.</p>	<p><b>§ 2800.126. Furnaces.</b></p> <p>(a) A professional furnace cleaning company or trained maintenance staff person shall inspect furnaces at least annually. Documentation of the inspection shall be kept.</p> <p>(b) Furnaces shall be cleaned according to the manufacturer's instructions. Documentation of the cleaning shall be kept.</p>	
<p><b>§ 2600.127. Space heaters.</b></p> <p>(a) Portable space heaters are prohibited.</p> <p>(b) Nonportable space heaters must be well vented and installed with permanent connections and protectors.</p>	<p><b>§ 2800.127. Space heaters.</b></p> <p>(a) Portable space heaters are prohibited.</p> <p>(b) Nonportable space heaters must be well vented and installed with permanent connections and protectors.</p>	
<p><b>§ 2600.128. Supplemental heating sources.</b></p> <p>(a) The use of kerosene burning heaters is prohibited.</p>	<p><b>§ 2800.128. Supplemental heating sources.</b></p> <p>(a) The use of kerosene burning heaters is prohibited.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) Wood and coal burning stoves shall be used only if a local fire department or other municipal fire safety authority, professional cleaning company or trained maintenance staff person inspects and approves them annually. Wood and coal burning stoves that are used as a regular heating source shall be cleaned every year according to the manufacturer's instructions. Documentation of wood and coal burning stove inspections and cleanings shall be kept.</p> <p>(c) Wood and coal burning stoves must be securely screened or equipped with protective guards while in use.</p>	<p>(b) Wood and coal burning stoves shall be used only if a local fire department or other municipal fire safety authority, professional cleaning company or trained maintenance staff person inspects and approves them annually. Wood and coal burning stoves that are used as a regular heating source shall be cleaned every year according to the manufacturer's instructions. Documentation of wood and coal burning stove inspections and cleanings shall be kept.</p> <p>(c) Wood and coal burning stoves must be securely screened or equipped with protective guards while in use.</p>	
<p><b>§ 2600.129. Fireplaces.</b></p> <p>(a) A fireplace must be securely screened or equipped with protective guards while in use.</p> <p>(b) A fireplace chimney and flue shall be cleaned when there is an accumulation of creosote. Written documentation of the cleaning shall be kept.</p>	<p><b>§ 2800.129. Fireplaces.</b></p> <p>(a) A fireplace must be securely screened or equipped with protective guards while in use.</p> <p>(b) A fireplace chimney and flue shall be cleaned when there is an accumulation of creosote. Written documentation of the cleaning shall be kept.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<b><u>(c) A fireplace chimney and flue that is used must be serviced annually and written documentation of the servicing shall be kept.</u></b>	In the ALR setting, the fireplace chimney and flue must be serviced annually.
<p><b>§ 2600.130. Smoke detectors and fire alarms.</b></p> <p>(a) There shall be an operable automatic smoke detector located within 15 feet of each bedroom door.</p> <p>(b) The smoke detectors specified in subsection (a) shall be located in hallways.</p> <p>(c) Smoke detectors and fire alarms must be of a type approved by the Department of Labor and Industry, the appropriate local building authority or local fire safety expert, or listed by Underwriters Laboratories.</p> <p>(d) If the home serves nine or more residents, there shall be at least one smoke detector on each floor interconnected and audible throughout the home or an</p>	<p><b>§ 2800.130. Smoke detectors and fire alarms.</b></p> <p>(a) There shall be an operable automatic smoke detector <b><u>located in each living unit.</u></b></p> <p>(b) Smoke detectors and fire alarms must be of a type approved by the Department of Labor and Industry, the appropriate local building authority or local fire safety expert, or listed by Underwriters Laboratories.</p> <p>(c) If the residence serves nine or more residents, there shall be at least one smoke detector on each floor interconnected and audible throughout the residence or an</p>	<p>In the ALR setting there must be a smoke detector in each living unit.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>automatic fire alarm system that is interconnected and audible throughout the home.</p> <p>(e) If one or more residents or staff persons are not able to hear the smoke detector or fire alarm system, a signaling device approved by a fire safety expert shall be used and tested so that each resident and staff person with a hearing impairment will be alerted in the event of a fire.</p> <p>(f) Smoke detectors and fire alarms shall be tested for operability at least once per month. A written record of the monthly testing shall be kept.</p> <p>(g) If a smoke detector or fire alarm becomes inoperative, repair shall be completed within 48 hours of the time the detector or alarm was found to be inoperative.</p> <p>(h) The home's emergency procedures shall indicate the procedures that will be immediately implemented until the smoke</p>	<p>automatic fire alarm system that is interconnected and audible throughout the residence.</p> <p>(d) If one or more residents or staff persons are not able to hear the smoke detector or fire alarm system, a signaling device approved by a fire safety expert shall be used and tested so that each resident and staff person with a hearing impairment will be alerted in the event of a fire.</p> <p>(e) Smoke detectors and fire alarms shall be tested for operability at least once per month. A written record of the monthly testing shall be kept.</p> <p>(f) If a smoke detector or fire alarm becomes inoperative, repair shall be completed within 48 hours of the time the detector or alarm was found to be inoperative.</p> <p>(g) The residence's emergency procedures <u>must</u> indicate the procedures that will be immediately implemented until the smoke</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>detector or fire alarms are operable.</p> <p>(i) In homes housing five or more residents with mobility needs, the fire alarm system shall be directly connected to the local fire department or 24-hour monitoring service approved by the local fire department, if this service is available in the community.</p>	<p>detector or fire alarms are operable.</p> <p>(h) In residences housing five or more residents with mobility needs, the fire alarm system shall be directly connected to the local fire department or 24-hour monitoring service approved by the local fire department, if this service is available in the community.</p>	
<p><b>§ 2600.131. Fire extinguishers.</b></p> <p>(a) There shall be at least one operable fire extinguisher with a minimum 2-A rating for each floor, including the basement and attic.</p> <p>(b) If the indoor floor area on a floor including the basement or attic is more than 3,000 square feet, there shall be an additional fire extinguisher with a minimum 2-A rating for each additional 3,000 square feet of indoor floor space.</p> <p>(c) A fire extinguisher with a minimum 2A-10BC rating shall be located in each</p>	<p><b>§ 2800.131. Fire extinguishers.</b></p> <p>(a) There shall be at least one operable fire extinguisher with a minimum 2-A rating for each floor, <u>including public walkways and common living areas every 3,000 square feet</u>, the basement and attic.</p> <p>(b) If the indoor floor area on a floor including the basement or attic is more than 3,000 square feet, there shall be an additional fire extinguisher with a minimum 2-A rating for each additional 3,000 square feet of indoor floor space.</p> <p>(c) A fire extinguisher with a minimum 2A-10BC rating shall be located in each</p>	<p>In the ALR setting there must be fire extinguishers every 3,000 square feet including public walkways and common living areas.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>kitchen. The kitchen extinguisher must meet the requirements for one floor as required in subsection (a).</p> <p>(d) Fire extinguishers must be listed by Underwriters Laboratories or approved by Factory Mutual Systems.</p> <p>(e) Fire extinguishers shall be accessible to staff persons. Fire extinguishers shall be kept locked if access to the extinguisher by a resident could cause a safety risk to the resident. If fire extinguishers are kept locked, each staff person shall be able to immediately unlock the fire extinguisher in the event of a fire emergency.</p> <p>(f) Fire extinguishers shall be inspected and approved annually by a fire safety expert. The date of the inspection shall be on the extinguisher.</p>	<p>kitchen of the residence. The kitchen extinguisher must meet the requirements for one floor as required in subsection (a).</p> <p>(d) Fire extinguishers must be listed by Underwriters Laboratories or approved by Factory Mutual Systems.</p> <p>(e) Fire extinguishers shall be accessible to staff persons. Fire extinguishers shall be kept locked if access to the extinguisher by a resident could cause a safety risk to the resident. If fire extinguishers are kept locked, each staff person shall be able to immediately unlock the fire extinguisher in the event of a fire emergency.</p> <p>(f) Fire extinguishers shall be inspected and approved annually by a fire safety expert. The date of the inspection shall be on the extinguisher.</p>	
<p><b>§ 2600.132. Fire drills.</b></p> <p>(a) An unannounced fire drill shall be held at least once a month.</p>	<p><b>§ 2800.132. Fire drills.</b></p> <p>(a) An unannounced fire drill shall be held at least once a month.</p>	



## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.</p> <p>(c) A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.</p> <p>(d) Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert. For purposes of this subsection, the fire safety expert may not be a staff person of the home.</p>	<p>(b) A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.</p> <p>(c) A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the residence at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.</p> <p>(d) Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert. For purposes of this subsection, the fire safety expert may not be a staff person of the residence.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(e) A fire drill shall be held during sleeping hours once every 6 months.</p> <p>(f) Alternate exit routes shall be used during fire drills.</p> <p>(g) Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.</p> <p>(h) Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.</p> <p>(i) A fire alarm or smoke detector shall be set off during each fire drill.</p> <p>(j) Elevators may not be used during a fire drill or a fire.</p>	<p>(e) A fire drill shall be held during sleeping hours once every 6 months.</p> <p>(f) Alternate exit routes shall be used during fire drills.</p> <p>(g) Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.</p> <p>(h) Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.</p> <p>(i) A fire alarm or smoke detector shall be set off during each fire drill.</p> <p>(j) Elevators may not be used during a fire drill or a fire.</p>	
<p><b>§ 2600.133. Exit signs.</b></p> <p>The following requirements apply for a</p>	<p><b>§ 2800.133. Exit signs.</b></p> <p>The following requirements apply for a</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>home serving nine or more residents:</p> <p>(1) Signs bearing the word “EXIT” in plain legible letters shall be placed at all exits.</p> <p>(2) If the exit or way to reach the exit is not immediately visible, access to exits shall be marked with readily visible signs indicating the direction to travel.</p> <p>(3) Exit sign letters must be at least 6 inches in height with the principal strokes of letters at least 3/4 inch wide.</p>	<p>residence serving nine or more residents:</p> <p>(1) Signs bearing the word "EXIT" in plain legible letters shall be placed at all exits.</p> <p>(2) Access to exits <u><b>shall be marked</b></u> with readily visible signs indicating the direction to travel.</p> <p>(3) Exit sign letters must be at least 6 inches in height with the principal strokes of letters at least 3/4 inch wide.</p>	<p>In the ALR setting, the ALR must mark access exits with readily visible signs. This includes exits that are immediately visible.</p>
Resident Health		
<p><b>§ 2600.141. Resident medical evaluation and health care.</b></p> <p>(a) A resident shall have a medical evaluation by a physician, physician’s assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:</p> <p>(1) A general physical examination by a physician, physician’s assistant or nurse practitioner.</p>	<p><b>§ 2800.141. Resident medical evaluation and health care.</b></p> <p>(a) A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, <u><b>subject to the provisions of § 2800.22 (relating to application and admission).</b></u> The evaluation must include the following:</p> <p>(1) A general physical examination by a physician, physician's assistant or nurse practitioner.</p>	<p>Under the ALR regulation the resident’s medical evaluation must be conducted within 60 days prior to admission or within 15 days after admission if one of the following conditions applies:</p> <p>The resident is being admitted directly from an acute care setting.</p> <p>The resident is being admitted to escape from an abusive situation.</p> <p>The resident has no alternative living arrangement.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(2) Medical diagnosis including physical or mental disabilities of the resident, if any.</p> <p>(3) Medical information pertinent to diagnosis and treatment in case of an emergency.</p> <p>(4) Special health or dietary needs of the resident.</p> <p>(5) Allergies.</p> <p>(6) Immunization history.</p> <p>(7) Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.</p> <p>(8) Body positioning and movement stimulation for residents, if appropriate.</p> <p>(9) Health status.</p> <p>(10) Mobility assessment, updated annually or at the Department's request.</p>	<p>(2) Medical diagnosis including physical or mental disabilities of the resident, if any.</p> <p>(3) Medical information pertinent to diagnosis and treatment in case of an emergency.</p> <p>(4) Special health or dietary needs of the resident.</p> <p>(5) Allergies.</p> <p>(6) Immunization history.</p> <p>(7) Medication regimen, contraindicated medications, medication side effects and the ability to self administer medications.</p> <p>(8) Body positioning and movement stimulation or residents, if appropriate.</p> <p>(9) Health status.</p> <p>(10) Mobility assessment, updated annually or at the Department's request.</p> <p><b><u>(11) An indication that a tuberculin skin test has been administered with negative results within 2 years; or if the tuberculin skin test is positive, the result of a chest X-ray. In the event a tuberculin skin test has not been administered, the test shall be administered within 15 days after admission.</u></b></p>	<p>In the ALR setting, the medical evaluation must indicate the results of a tuberculin skin test- taken within the past 2 years – if a positive result the evaluation must include the result of a chest x-ray. If a test was not administered the ALR must administer the test within 15 days.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) A resident shall have a medical evaluation:</p> <p>(1) At least annually.</p> <p>(2) If the medical condition of the resident changes prior to the annual medical evaluation.</p>	<p><b><u>(12) Information about a resident's day-to-day assisted living service needs.</u></b></p> <p>(b) A resident shall have a medical evaluation:</p> <p>(1) At least annually.</p> <p>(2) If the medical condition of the resident changes prior to the annual medical evaluation.</p>	<p>In the ALR setting the medical evaluation must indicate the resident's day-to-day service needs.</p>
<p><b>§ 2600.142. Assistance with health care.</b></p>	<p><b>§ 2800.142. Assistance with medical care and supplemental health care services.</b></p> <p><b><u>(a) Each residence shall demonstrate the ability to provide or arrange for the provision of supplemental health care services in a manner protective of the health, safety and well-being of its residents utilizing employees, independent contractors or contractual arrangements with other health care facilities or practitioners licensed, registered or certified to the extent required by law to provide the service.</u></b></p>	<p>In the ALR setting, the ALR must provide or arrange for supplemental health care services to their residents based on the needs of the residents, as indicated in the resident's support plan.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(a) The home shall assist the resident to secure medical care if a resident's health status declines. The home shall document the resident's need for the medical care, including updating the resident's assessment and support plan.</p>	<p>(b) The residence shall assist the resident to secure medical care <u><b>and supplemental health care services.</b></u>  <u><b>(1) The residence shall permit a resident to select or retain his primary care physician.</b></u>  <u><b>(2) To the extent prominently displayed in the written admission agreement, a residence may require residents to use providers of supplemental health care services approved or designated by the residence.</b></u>  <p>(3) The residence shall document the resident's need for the medical care, including updating the resident's assessment and support plan.</p> </p>	<p>In the ALR setting, the resident is permitted to select or retain their primary care physician.</p> <p>The ALR may develop a network of supplemental health care providers that the resident must choose from to provide the supplemental health care services they need.</p>
<p>(b) If a resident refuses routine medical or dental examination or treatment, the refusal and the continued attempts to educate and inform the resident about the need for health care shall be documented in the resident's record.</p>	<p>(c) If a resident refuses routine medical or dental examination or treatment, the refusal and the continued attempts to educate and inform the resident about the need for medical care shall be documented in the resident's record.</p>	
<p>(c) If a resident has a serious medical or dental condition, reasonable efforts shall be made to obtain consent for treatment</p>	<p>(d) If a resident has a serious medical or dental condition, reasonable efforts shall be made to obtain consent for treatment</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>from the resident or the resident's designated person.</p> <p>(d) The home shall assist the resident to secure preventative medical, dental, vision and behavioral health care as requested by a physician, physician's assistant or certified registered nurse practitioner.</p>	<p>from the resident or the resident's designated person.</p> <p>(e) The residence shall assist the resident to secure preventative medical, dental, vision and behavioral health care as requested by a physician, physician's assistant or certified registered nurse practitioner.</p>	
<p><b>§ 2600.143. Emergency medical plan.</b></p> <p>(a) The home shall have a written emergency medical plan that includes the following:</p> <p>(1) The hospital or source of health care that will be used in an emergency. This shall be the resident's choice, if possible.</p> <p>(2) Emergency transportation to be used.</p> <p>(3) An emergency-staffing plan.</p> <p>(b) The following current emergency medical and health information shall be available at all times for each resident and shall accompany the resident when the resident needs emergency medical attention:</p>	<p><b>§ 2800.143. Emergency medical plan.</b></p> <p>(a) The residence shall have a written emergency medical plan that includes the following:</p> <p>(1) The hospital or source of health care that will be used in an emergency. This shall be the resident's choice, if possible.</p> <p>(2) Emergency transportation to be used.</p> <p>(3) An emergency staffing plan.</p> <p>(b) The following current emergency medical and health information shall be available at all times for each resident and shall accompany the resident when the resident needs emergency medical attention:</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(1) The resident's name and birth date.</p> <p>(2) The resident's Social Security number.</p> <p>(3) The resident's medical diagnosis.</p> <p>(4) The resident's physician's name and telephone number.</p> <p>(5) Current medication, including the dosage and frequency.</p> <p>(6) A list of allergies.</p> <p>(7) Other relevant medical conditions.</p> <p>(8) Insurance or third party payer and identification number.</p> <p>(9) The power of attorney for health care or health care proxy, if applicable.</p> <p>(10) The resident's designated person with current address and telephone number.</p> <p>(11) Personal information and related instructions regarding advance directives, do not resuscitate orders or organ donation, if applicable.</p>	<p>(1) The resident's name and birth date.</p> <p>(2) The resident's Social Security number.</p> <p>(3) The resident's medical diagnosis.</p> <p>(4) The resident's physician's name and telephone number.</p> <p>(5) Current medication, including the dosage and frequency.</p> <p>(6) A list of allergies.</p> <p>(7) Other relevant medical conditions.</p> <p>(8) Insurance or third party payer and identification number.</p> <p>(9) A power of attorney for health care or health care proxy, if applicable.</p> <p>(10) The resident's designated person with current address and telephone number.</p> <p>(11) Personal information and related instructions regarding advance directives, do not resuscitate orders or organ donation, if applicable.</p> <p><b><u>(12) A speech, hearing or vision need which requires accommodation or awareness, such as written communication or American sign language.</u></b></p> <p><b><u>(13) A language need which requires accommodation or awareness, such as an interpreter of translation.</u></b></p>	<p>In the ALR setting, the information that must accompany the resident in the case of an emergency must include information regarding the resident's speech, language, hearing and/or vision needs.</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.144. Use of tobacco.</b></p> <p>(a) A home may permit smoking tobacco in a designated smoking room of the home.</p> <p>(b) The home rules shall specify whether the home is designated as smoking or nonsmoking.</p> <p>(c) A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include the following:</p> <p>(1) Proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.</p> <p>(2) Location of a smoking room or outside smoking area a safe distance from heat</p>	<p><b>§ 2800.144. Use of tobacco.</b></p> <p>(a) A residence may permit smoking tobacco in a designated smoking room of the residence.</p> <p>(b) The residence rules must specify whether the residence is designated as smoking or nonsmoking.</p> <p>(c) A residence that permits smoking inside or outside of the residence shall develop and implement written fire safety policy and procedures that include the following:</p> <p>(1) Proper safeguards inside and outside of the residence to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the residence, extinguishing procedures, fire resistant furniture both inside and outside the residence and fire extinguishers in the smoking rooms.</p> <p>(2) Location of a smoking room or outside smoking area a safe distance from heat</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
sources, hot water heaters, combustible or flammable materials and away from common walkways and exits. (3) Prohibition of the use of tobacco during transportation by the home.  (d) Smoking outside of the smoking room is prohibited.	sources, hot water heaters, combustible or flammable materials and away from common walkways and exits. (3) Prohibition of the use of tobacco during transportation by the residence.  (d) Smoking outside of the smoking room is prohibited.	
<b>Nutrition</b>		
<b>§ 2600.161. Nutritional adequacy.</b>  (a) Meals shall be offered that meet the recommended dietary allowances established by the United States Department of Agriculture.  (b) At least three nutritionally well-balanced meals shall be offered daily to the resident. Each meal shall include an alternative food and drink item from which the resident may choose.  (c) Additional portions of meals and beverages at mealtimes shall be available for the resident.	<b>§ 2800.161. Nutritional adequacy.</b>  (a) Meals shall be offered that meet the recommended dietary allowances established by the United States Department of Agriculture.  (b) At least three nutritionally well-balanced meals shall be offered daily to the resident. Each meal shall include an alternative food and drink item from which the resident may choose.  (c) Additional portions of meals and beverages at mealtimes shall be available for the resident.	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(d) A resident's special dietary needs as prescribed by a physician, physician's assistant, certified registered nurse practitioner or dietitian shall be met. Documentation of the resident's special dietary needs shall be kept in the resident's record.</p> <p>(e) Dietary alternatives shall be available for a resident who has special health needs or religious beliefs regarding dietary restrictions.</p> <p>(f) Drinking water shall be available to the residents at all times.</p>	<p>(d) A resident's special dietary needs as prescribed by a physician, physician's assistant, certified registered nurse practitioner or dietitian shall be met. Documentation of the resident's special dietary needs shall be kept in the resident's record.</p> <p>(e) Dietary alternatives shall be available for a resident who has special health needs or religious beliefs regarding dietary restrictions.</p> <p>(f) Drinking water shall be available to the resident at all times.</p> <p><b><u>(g) Between-meal snacks and beverages shall be available at all times for each resident, unless medically contraindicated as documented in the resident's support plan.</u></b></p> <p><b><u>(h) Residents have the right to purchase groceries and prepare their own food in addition to the three meal plan required in § 2800.220(b) (relating to service provision) in their living units unless it</u></b></p>	<p>In the ALR setting, snacks and beverages must be made available to residents at all times.</p> <p>In the ALR setting, in addition to the 3 meals the ALR must provide, the residents have the right to purchase groceries and prepare their food.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<u><i>would be unsafe for them to do so consistent with their support plan.</i></u>	
<p><b>§ 2600.162. Meals.</b></p> <p>(a) There may not be more than 15 hours between the evening meal and the first meal of the next day. There may not be more than 6 hours between breakfast and lunch, and between lunch and supper. This requirement does not apply if a resident's physician has prescribed otherwise.</p> <p>(b) When a resident misses a meal, food adequate to meet daily nutritional requirements shall be available and offered to the resident.</p> <p>(c) Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.</p>	<p><b>§ 2800.162. Meals.</b></p> <p>(a) There may not be more than 15 hours between the evening meal and the first meal of the next day. There may not be more than 6 hours between breakfast and lunch, and between lunch and supper. This requirement does not apply if a resident's physician has prescribed otherwise.</p> <p>(b) When a resident misses a meal, food adequate to meet daily nutritional requirements shall be available and offered to the resident.</p> <p>(c) Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the residence.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(d) Past menus of meals that were served, including changes, shall be kept for at least 1 month.</p> <p>(e) A change to a menu shall be posted in a conspicuous and public place in the home and shall be accessible to a resident in advance of the meal. Meal substitutions shall be made in accordance with § 2600.161 (relating to nutritional adequacy).</p>	<p>(d) Past menus of meals that were served, including changes, shall be kept for at least 1 month.</p> <p>(e) A change to a menu shall be posted in a conspicuous and public place in the residence and shall be accessible to a resident in advance of the meal. Meal substitutions shall be made in accordance with § 2800.161 (relating to nutritional adequacy).</p> <p><u><i>(f) A resident shall receive adequate physical assistance with eating or be provided with appropriate adaptive devices, or both, as indicated in the resident's support plan.</i></u></p> <p><u><i>(g) Appropriate cueing shall be used to encourage and remind residents to eat and drink, as indicated in the resident's support plan.</i></u></p>	<p>In the ALR setting, the ALR must provide the resident adequate physical assistance with eating and appropriate cueing to encourage and remind the resident to eat and drink.</p>
<p><b>§ 2600.163. Personal hygiene for food service workers.</b></p> <p>(a) Staff persons, volunteers and residents involved in the storage, preparation,</p>	<p><b>§ 2800.163. Personal hygiene for food service workers.</b></p> <p>(a) Staff persons, volunteers and residents involved in the storage, preparation,</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>serving and distributing of food shall wash their hands with hot water and soap prior to working in the kitchen areas and after using the bathroom.</p> <p>(b) Staff persons, volunteers and residents shall follow sanitary practices while working in the kitchen areas.</p> <p>(c) Staff persons, volunteers and residents involved with the storage, preparation, serving and distributing of food shall be in good health.</p> <p>(d) Staff persons, volunteers and residents who have a discharging or infected wound, sore, lesion on hands, arms or any exposed portion of their body may not work in the kitchen areas in any capacity.</p>	<p>serving and distributing of food shall wash their hands with hot water and soap prior to working in the kitchen areas and after using the bathroom.</p> <p>(b) Staff persons, volunteers and residents shall follow sanitary practices while working in the kitchen areas.</p> <p>(c) Staff persons, volunteers and residents involved with the storage, preparation, serving and distributing of food shall be in good health.</p> <p>(d) Staff persons, volunteers and residents who have a discharging or infected wound, sore, lesion on hands, arms or any exposed portion of their body may not work in the kitchen areas in any capacity.</p>	
<p><b>§ 2600.164. Withholding or forcing of food prohibited.</b></p> <p>(a) A home may not withhold meals, beverages, snacks or desserts as punishment. Food and beverages may be withheld in accordance with prescribed</p>	<p><b>§ 2800.164. Withholding or forcing of food prohibited.</b></p> <p>(a) A residence may not withhold meals, beverages, snacks or desserts as punishment. Food and beverages may be withheld in accordance with prescribed</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>medical or dental procedures.</p> <p>(b) A resident may not be forced to eat food.</p> <p>(c) If a resident refuses to eat or drink continuously during a 24-hour period, the resident's primary care physician and the resident's designated person shall be immediately notified.</p> <p>(d) If a resident has a cognitive impairment that affects the resident's ability to consume adequate amounts of food and water, a staff person shall encourage and remind the resident to eat and drink.</p>	<p>medical or dental procedures.</p> <p>(b) A resident may not be forced to eat food.</p> <p>(c) If a resident refuses to eat or drink continuously during a 24-hour period, the resident's primary care physician and the resident's designated person shall be immediately notified.</p> <p>(d) If a resident has a cognitive impairment that affects the resident's ability to consume adequate amounts of food and water, a staff person shall encourage and remind the resident to eat and drink.</p>	
<b>Transportation</b>		
<p><b>§ 2600.171. Transportation.</b></p> <p>(a) A home may not be required to provide transportation.</p>	<p><b>§ 2800.171. Transportation.</b></p> <p><b><u>(a) A residence shall be required to provide or arrange for transportation on a regular weekly basis that permits residents to schedule medical and social appointments within a reasonable local area.</u></b></p>	<p>In the ALR setting, ALRs are required to provide or arrange for transportation on a regular weekly basis – allowing residents to schedule medical and social appointments within a reasonable local area.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) The following requirements apply whenever staff persons or volunteers of the home provide transportation for the resident:</p> <p>(1) The occupants of the vehicle shall be in an appropriate safety restraint at all times the vehicle is in motion.</p> <p>(2) The driver of a vehicle shall be 18 years of age or older and possess a valid driver's license.</p> <p>(3) The driver of the home vehicle cannot be a resident.</p> <p>(4) At least one staff member transporting or accompanying the residents shall have completed the initial new hire direct care staff person training as specified in § 2600.65 (relating to direct care staff training and orientation).</p> <p>(5) The vehicle must have a first aid kit with the contents as specified in § 2600.96 (relating to first aid kit).</p> <p>(6) During vehicle operations, the driver may only use a hands-free cellular telephone.</p>	<p>(b) The following requirements apply whenever staff persons or volunteers of the residence provide transportation for the resident:</p> <p>(1) The occupants of the vehicle shall be in an appropriate safety restraint at all times the vehicle is in motion.</p> <p>(2) The driver of a vehicle shall be 18 years of age or older and possess a valid driver's license.</p> <p>(3) The driver of the residence vehicle cannot be a resident.</p> <p>(4) At least one staff member transporting or accompanying the residents shall have completed the initial new hire direct care staff person training as specified in § 2800.65 (relating to staff orientation and direct care staff person training and orientation).</p> <p>(5) The vehicle must have a first aid kit with the contents as specified in § 2800.96 (relating to first aid kit). <b><u>The inclusion of an automatic external defibrillation device in a vehicle is optional.</u></b></p> <p>(6) During vehicle operations, the driver may only use a hands-free cellular telephone.</p>	<p>In the ALR setting, the ALR has the option whether or not to include an automatic external defibrillation device in the vehicle used to transport residents.</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(7) Transportation shall include, when necessary, an assistant to the driver who assists the driver to escort residents in and out of the home and provides assistance during the trip.</p> <p>(c) The home shall maintain current copies of the following documentation for each of the home's vehicles used to transport residents:</p> <ol style="list-style-type: none"> <li>(1) Vehicle registration.</li> <li>(2) Valid driver's license for vehicle operator.</li> <li>(3) Vehicle insurance.</li> <li>(4) Current inspection.</li> <li>(5) Commercial driver's license for vehicle operator if applicable.</li> </ol> <p>(d) The home shall assist a resident with the coordination of transportation to and from medical appointments, if requested by the resident, or if indicated in the resident's support plan.</p>	<p>(7) Transportation must include, when necessary, an assistant to the driver who assists the driver to escort residents in and out of the residence and provides assistance during the trip.</p> <p>(c) The residence shall maintain current copies of the following documentation for each of the residence's vehicles used to transport residents:</p> <ol style="list-style-type: none"> <li>(1) Vehicle registration.</li> <li>(2) Valid driver's license for vehicle operator.</li> <li>(3) Vehicle insurance.</li> <li>(4) Current inspection.</li> <li>(5) Commercial driver's license for vehicle operator if applicable.</li> </ol> <p><b><u>(d) If a residence supplies its own vehicles for transporting residents to and from medical and social appointments, a minimum of one vehicle used for this purpose shall be accessible to resident wheelchair users and any other assistive equipment the resident may need.</u></b></p> <p><b><u>(1) The residence shall schedule a pick-up time to transport the resident to the</u></b></p>	<p>In the ALR setting, if the ALR uses its own vehicle to transport residents, at least one of the vehicles must be wheelchair accessible and support any other assistive equipment the residents may need.</p> <p>In the ALR setting, if the ALR uses its own vehicle to transport residents, the</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>medical or social appointment. The residence shall make every reasonable effort to pick-up the resident within 15 minutes before or after the scheduled pick-up time.</i></u></p> <p><u><i>(2) The resident may not be dropped off at the medical or social appointment more than 1 hour prior to the time of the appointment.</i></u></p> <p><u><i>(3) The residence shall make every reasonable effort to pick-up a resident from a medical appointment no later than 1 hour after the medical appointment.</i></u></p> <p><u><i>(4) The residence shall make every reasonable effort to pick-up a resident from a social appointment no later than 1 hour after the end of the social appointment.</i></u></p> <p><u><i>(e) If a residence arranges for transportation for residents to and from medical and social appointments the following apply:</i></u></p> <p><u><i>(1) The residence shall schedule a pick-up time for the resident to be transported to the medical or social appointment. The</i></u></p>	<p>pick-up time to transport the resident and the timing to pick-up the resident after the appointment must meet certain requirements- as defined in the regulatory language contained in Subsection (d).</p> <p>In the ALR setting, if the ALR arranges for resident transportation, the pick-up time to transport the resident and the timing to pick –up the resident after the appointment must meet certain requirements- as defined in the regulatory language contained in Subsection (e).</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>residence shall make every reasonable effort for a resident to be picked-up within 15 minutes before or after the scheduled pick-up time.</i></u></p> <p><u><i>(2) The residence shall make every reasonable effort for a resident to not be dropped off at the medical or social appointment more than 1 hour prior to the time of the appointment.</i></u></p> <p><u><i>(3) The residence shall make every reasonable effort for a resident to be picked-up from the medical appointment no later than 1 hour after the medical appointment.</i></u></p> <p><u><i>(4) The residence shall make every reasonable effort for a resident to be picked-up from the social appointment no later than 1 hour after the end of the social appointment.</i></u></p>	
<b>Medications</b>		
<p><b>§ 2600.181. Self-administration.</b></p> <p>(a) A home shall provide residents with assistance, as needed, with medication prescribed for the resident's self-administration. This assistance includes</p>	<p><b>§ 2800.181. Self-administration.</b></p> <p>(a) A residence shall provide residents with assistance, as needed, with medication prescribed for the resident's self-administration. This assistance</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>helping the resident to remember the schedule for taking the medication, storing the medication in a secure place and offering the resident the medication at the prescribed times.</p> <p>(b) If assistance includes helping the resident to remember the schedule for taking the medication, the resident shall be reminded of the prescribed schedule.</p> <p>(c) The resident's assessment shall identify if the resident is able to self-administer medications as specified in § 2600.227(e) (relating to development of the support plan). A resident who desires to self-administer medications shall be assessed by a physician, physician's assistant or certified registered nurse practitioner regarding the ability to self-administer and the need for medication reminders.</p>	<p>includes helping the resident to remember the schedule for taking the medication, storing the medication in a secure place and offering the resident the medication at the prescribed times.</p> <p>(b) If assistance includes helping the resident to remember the schedule for taking the medication, the resident shall be reminded of the prescribed schedule. <b><u>Appropriate cueing shall be used to remind residents to take their medication.</u></b></p> <p>(c) The resident's assessment shall identify if the resident is able to self-administer medications as specified in § 2800.227(e) (relating to development of the final support plan). A resident who desires to self-administer medications shall be assessed by a physician, physician's assistant or certified registered nurse practitioner regarding the ability to self-administer and the need for medication reminders.</p>	<p>In the ALR setting, the ALR must provide appropriate cueing to residents to remind them to take their medication.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(d) If the resident does not need assistance with medication, medication may be stored in a resident's room for self-administration. Medications stored in the resident's room shall be kept locked in a safe and secure location to protect against contamination, spillage and theft.</p> <p>(e) To be considered capable to self-administer medications, a resident shall:</p> <ol style="list-style-type: none"> <li>(1) Be able to recognize and distinguish his medication.</li> <li>(2) Know how much medication is to be taken.</li> <li>(3) Know when medication is to be taken.</li> </ol> <p>(f) The resident's record shall include a current list of prescription, CAM and OTC medications for each resident who is self-administering his medication.</p>	<p>(d) If the resident does not need assistance with medication, medication may be stored in a resident's living unit for self-administration. Medications stored in the resident's living unit shall be kept in a safe and secure location to protect against contamination, spillage and theft. <b><u>The residence shall provide a lockable storage unit for this purpose.</u></b></p> <p>(e) To be considered capable to self-administer medications, a resident shall:</p> <ol style="list-style-type: none"> <li>(1) Be able to recognize and distinguish his medication.</li> <li>(2) Know how much medication is to be taken.</li> <li>(3) Know when medication is to be taken.</li> </ol> <p>(f) The resident's record shall include a current list of prescription, CAM and OTC medications for each resident who is self-administering his medication.</p>	<p>In the ALR setting, the ALR must provide the resident with a lockable storage box to store their medication in their living unit, if the resident doesn't need assistance with their medications.</p>
<p><b>§ 2600.182. Medication administration.</b></p> <p>(a) A home may provide medication administration services for a resident who</p>	<p><b>§ 2800.182. Medication administration.</b></p> <p>(a) A residence <b><u>shall provide medication administration services</u></b> for a resident who</p>	<p>In the ALR, the ALR <b>must</b> provide medication administration services to</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>is assessed to need medication administration services in accordance with § 2600.181 (relating to self-administration) and for a resident who chooses not to self-administer medications. If a home does not provide medication administration services, the resident shall be referred to an appropriate assessment agency.</p> <p>(b) Prescription medication that is not self-administered by a resident shall be administered by one of the following:            (1) A physician, licensed dentist, licensed physician's assistant, registered nurse, certified registered nurse practitioner, licensed practical nurse or licensed paramedic.            (2) A graduate of an approved nursing program functioning under the direct supervision of a professional nurse who is present in the home.            (3) A student nurse of an approved nursing program functioning under the direct supervision of a member of the nursing school faculty who is present in the home.</p>	<p>is assessed to need medication administration services in accordance with § 2800.181 (relating to self-administration) and for a resident who chooses not to self-administer medications.</p> <p>(b) Prescription medication that is not self-administered by a resident shall be administered by one of the following:            (1) A physician, licensed dentist, licensed physician's assistant, RN, certified registered nurse practitioner, LPN or licensed paramedic.            (2) A graduate of an approved nursing program functioning under the direct supervision of a professional nurse who is present in the residence.            (3) A student nurse of an approved nursing program functioning under the direct supervision of a member of the nursing school faculty who is present in the residence.</p>	<p>residents who either need medication administration or request it.</p>

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## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(4) A staff person who has completed the medication administration training as specified in § 2600.190 (relating to medication administration training) for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.</p> <p>(c) Medication administration includes the following activities, based on the needs of the resident:</p> <p>(1) Identify the correct resident.</p> <p>(2) If indicated by the prescriber's orders, measure vital signs and administer medications accordingly.</p> <p>(3) Remove the medication from the original container.</p> <p>(4) Crush or split the medication as ordered by the prescriber.</p> <p>(5) Place the medication in a medication cup or other appropriate container, or in the resident's hand.</p> <p>(6) Place the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the</p>	<p>(4) A staff person who has completed the medication administration training as specified in § 2800.190 (relating to medication administration training) for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.</p> <p>(c) Medication administration includes the following activities, based on the needs of the resident:</p> <p>(1) Identify the correct resident.</p> <p>(2) If indicated by the prescriber's orders, measure vital signs and administer medications accordingly.</p> <p>(3) Remove the medication from the original container.</p> <p>(4) Crush or split the medication as ordered by the prescriber.</p> <p>(5) Place the medication in a medication cup or other appropriate container, or in the resident's hand.</p> <p>(6) Place the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the</p>	

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### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
limitations specified in subsection (b)(4). (7) Complete documentation in accordance with § 2600.187 (relating to medication records).	limitations specified in subsection (b)(4). (7) Complete documentation in accordance with § 2800.187 (relating to medication records).	
<p><b>§ 2600.183. Storage and disposal of medications and medical supplies.</b></p> <p>(a) Prescription medications, OTC medications and CAM shall be kept in their original labeled containers and may not be removed more than 2 hours in advance of the scheduled administration. Assistance with insulin and epinephrine injections and sterile liquids shall be provided immediately upon removal of the medication from its container.</p> <p>(b) Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.</p> <p>(c) Prescription medications, OTC medications and CAM stored in a refrigerator shall be kept in an area or</p>	<p><b>§ 2800.183. Storage and disposal of medications and medical supplies.</b></p> <p>(a) Prescription medications, OTC medications and CAM shall be kept in their original labeled containers and may not be removed more than 2 hours in advance of the scheduled administration. Assistance with insulin and epinephrine injections and sterile liquids shall be provided immediately upon removal of the medication from its container.</p> <p>(b) Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes unless kept in the resident's living unit.</p> <p>(c) Prescription medications, OTC medications and CAM stored in a refrigerator shall be kept in an area or</p>	



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### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>container that is locked.</p> <p>(d) Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.</p> <p>(e) Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.</p> <p>(f) Prescription medications, OTC medications and CAM that are discontinued, expired or for residents who are no longer served at the home shall be destroyed in a safe manner according to the Department of Environmental Protection and Federal and State regulations. When a resident permanently leaves the home, the resident's medications shall be given to the resident,</p>	<p>container that is locked <u><i>unless the resident has the capacity to store the medications in the resident's own refrigerator in the resident's living unit.</i></u></p> <p>(d) Only current prescription, OTC medications, sample and CAM for individuals living in the residence may be kept in the residence.</p> <p>(e) Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.</p> <p>(f) Prescription medications, OTC medications and CAM that are discontinued, expired or for residents who are no longer served at the residence shall be destroyed in a safe manner according to the Department of Environmental Protection and Federal and State regulations. When a resident permanently leaves the residence, the resident's medications shall be given to the resident,</p>	<p>In the ALR setting, the residents may store their medications in their own refrigerator in their living unit.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>the designated person, if any, or the person or entity taking responsibility for the new placement on the day of departure from the home.</p> <p>(g) Subsections (a) and (e) do not apply to a resident who self-administers medication and stores the medication in his room.</p>	<p>the designated person, if any, or the person or entity taking responsibility for the new placement on the day of departure from the residence.</p> <p>(g) Subsections (a) and (e) do not apply to a resident who self-administers medication and stores the medication in his living unit.</p>	
<p><b>§ 2600.184. Labeling of medications.</b></p> <p>(a) The original container for prescription medications shall be labeled with a pharmacy label that includes the following:</p> <ol style="list-style-type: none"> <li>(1) The resident's name.</li> <li>(2) The name of the medication.</li> <li>(3) The date the prescription was issued.</li> <li>(4) The prescribed dosage and instructions for administration.</li> <li>(5) The name and title of the prescriber.</li> </ol> <p>(b) If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name.</p>	<p><b>§ 2800.184. Labeling of medications.</b></p> <p>(a) The original container for prescription medications must be labeled with a pharmacy label that includes the following:</p> <ol style="list-style-type: none"> <li>(1) The resident's name.</li> <li>(2) The name of the medication.</li> <li>(3) The date the prescription was issued.</li> <li>(4) The prescribed dosage and instructions for administration.</li> <li>(5) The name and title of the prescriber.</li> </ol> <p>(b) If the OTC medications and CAM belong to the resident, they must be identified with the resident's name.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
(c) Sample prescription medications shall have written instructions from the prescriber that include the components specified in subsection (a).	(c) Sample prescription medications must have written instructions from the prescriber that include the components specified in subsection (a).	
<p><b>§ 2600.185. Accountability of medication and controlled substances.</b></p> <p>(a) The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.</p> <p>(b) At a minimum, the procedures must include:</p> <p>(1) Documentation of the receipt of controlled substances and prescription medications.</p> <p>(2) A process to investigate and account for missing medications and medication errors.</p> <p>(3) Limited access to medication storage areas.</p> <p>(4) Documentation of the administration of prescription medications, OTC medications and CAM for residents who</p>	<p><b>§ 2800.185. Accountability of medication and controlled substances.</b></p> <p>(a) The residence shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.</p> <p>(b) At a minimum, the procedures must include:</p> <p>(1) Documentation of the receipt of controlled substances and prescription medications.</p> <p>(2) A process to investigate and account for missing medications and medication errors.</p> <p>(3) Limited access to medication storage areas.</p> <p>(4) Documentation of the administration of prescription medications, OTC medications and CAM for residents who</p>	

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## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>receive medication administration services or assistance with self-administration. This requirement does not apply to a resident who self-administers medication without the assistance of a staff person and stores the medication in his room.</p>	<p>receive medication administration services or assistance with self-administration. This requirement does not apply to a resident who self-administers medication without the assistance of a staff person and stores the medication in his living unit.</p> <p><b><u>(5) To the extent indicated in the resident's support plan, the residence shall obtain prescribed medication for residents and keep an adequate supply of resident medication on hand at all times.</u></b></p>	<p>In the ALR setting, the ALR must keep an adequate supply of their residents' medication on hand at all times, if indicated in the resident's support plan.</p>
<p><b>§ 2600.186. Prescription medications.</b></p> <p>(a) Each prescription medication must be prescribed in writing by an authorized prescriber. Prescription orders shall be kept current.</p> <p>(b) Prescription medications shall be used only by the resident for whom the prescription was prescribed.</p> <p>(c) Changes in medication may only be made in writing by the prescriber, or in the case of an emergency, an alternate</p>	<p><b>§ 2800.186. Prescription medications.</b></p> <p>(a) Each prescription medication must be prescribed in writing by an authorized prescriber. Prescription orders shall be kept current.</p> <p>(b) Prescription medications shall be used only by the resident for whom the prescription was prescribed.</p> <p>(c) Changes in medication may only be made in writing by the prescriber, or in the case of an emergency, an alternate</p>	

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### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
prescriber, except for circumstances in which oral orders may be accepted by nurses in accordance with regulations of the Department of State. The resident's medication record shall be updated as soon as the home receives written notice of the change.	prescriber, except for circumstances in which oral orders may be accepted by nurses in accordance with regulations of the Department of State. The resident's medication record shall be updated as soon as the residence receives written notice of the change.	
<p><b>§ 2600.187. Medication records.</b></p> <p>(a) A medication record shall be kept to include the following for each resident for whom medications are administered:</p> <ol style="list-style-type: none"> <li>(1) Resident's name.</li> <li>(2) Drug allergies.</li> <li>(3) Name of medication.</li> <li>(4) Strength.</li> <li>(5) Dosage form.</li> <li>(6) Dose.</li> <li>(7) Route of administration.</li> <li>(8) Frequency of administration.</li> <li>(9) Administration times.</li> <li>(10) Duration of therapy, if applicable.</li> <li>(11) Special precautions, if applicable.</li> <li>(12) Diagnosis or purpose for the medication, including pro re nata (PRN).</li> <li>(13) Date and time of medication</li> </ol>	<p><b>§ 2800.187. Medication records.</b></p> <p>(a) A medication record shall be kept to include the following for each resident for whom medications are administered:</p> <ol style="list-style-type: none"> <li>(1) Resident's name.</li> <li>(2) Drug allergies.</li> <li>(3) Name of medication.</li> <li>(4) Strength.</li> <li>(5) Dosage form.</li> <li>(6) Dose.</li> <li>(7) Route of administration.</li> <li>(8) Frequency of administration.</li> <li>(9) Administration times.</li> <li>(10) Duration of therapy, if applicable.</li> <li>(11) Special precautions, if applicable.</li> <li>(12) Diagnosis or purpose for the medication, including pro re nata (PRN).</li> <li>(13) Date and time of medication</li> </ol>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>administration.</p> <p>(14) Name and initials of the staff person administering the medication.</p> <p>(b) The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.</p> <p>(c) If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.</p> <p>(d) The home shall follow the directions of the prescriber.</p>	<p>administration.</p> <p>(14) Name and initials of the staff person administering the medication.</p> <p>(b) The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.</p> <p>(c) If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.</p> <p>(d) The residence shall follow the directions of the prescriber.</p>	
<p><b>§ 2600.188. Medication errors.</b></p> <p>(a) Medication errors include the following:</p> <p>(1) Failure to administer a medication.</p> <p>(2) Administration of the wrong</p>	<p><b>§ 2800.188. Medication errors.</b></p> <p>(a) Medication errors include the following:</p> <p>(1) Failure to administer a medication.</p> <p>(2) Administration of the wrong</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>medication.</p> <p>(3) Administration of the wrong amount of medication.</p> <p>(4) Failure to administer a medication at the prescribed time.</p> <p>(5) Administration to the wrong resident.</p> <p>(6) Administration through the wrong route.</p> <p>(b) A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.</p> <p>(c) Documentation of medication errors and the prescriber's response shall be kept in the resident's record.</p> <p>(d) There shall be a system in place to identify and document medication errors and the home's pattern of error.</p> <p>(e) There shall be documentation of the follow-up action that was taken to prevent future medication errors.</p>	<p>medication.</p> <p>(3) Administration of the wrong amount of medication.</p> <p>(4) Failure to administer a medication at the prescribed time.</p> <p>(5) Administration to the wrong resident.</p> <p>(6) Administration through the wrong route.</p> <p>(b) A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.</p> <p>(c) Documentation of medication errors and the prescriber's response shall be kept in the resident's record.</p> <p>(d) There shall be a system in place to identify and document medication errors and the residence's pattern of error.</p> <p>(e) There shall be documentation of the follow-up action that was taken to prevent future medication errors.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.189. Adverse reaction.</b></p> <p>(a) If a resident has a suspected adverse reaction to a medication, the home shall immediately consult a physician or seek emergency medical treatment. The resident's designated person shall be notified, if applicable.</p> <p>(b) The home shall document adverse reactions, the prescriber's response and any action taken in the resident's record.</p>	<p><b>§ 2800.189. Adverse reaction.</b></p> <p>(a) If a resident has a suspected adverse reaction to a medication, the residence shall immediately consult a physician or seek emergency medical treatment. The resident's designated person shall be notified, if applicable.</p> <p>(b) The residence shall document adverse reactions, the prescriber's response and any action taken in the resident's record.</p>	
<p><b>§ 2600.190. Medication administration training.</b></p> <p>(a) A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.</p>	<p><b>§ 2800.190. Medication administration training.</b></p> <p>(a) A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.</p>	



## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) A staff person is permitted to administer insulin injections following successful completion of a Department-approved medications administration course that includes the passing of a written performance-based competency test within the past 2 years, as well as successful completion of a Department-approved diabetes patient education program within the past 12 months.</p> <p>(c) A record of the training shall be kept including the staff person trained, the date, source, name of trainer and documentation that the course was successfully completed.</p>	<p>(b) A staff person is permitted to administer insulin injections following successful completion of a Department-approved medications administration course that includes the passing of a written performance-based competency test within the past 2 years, as well as successful completion of a Department-approved diabetes patient education program within the past 12 months.</p> <p>(c) A record of the training shall be kept including the staff person trained, the date, source, name of trainer and documentation that the course was successfully completed.</p>	
<p><b>§ 2600.191. Resident education.</b></p> <p>The home shall educate the resident of the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.</p>	<p><b>§ 2800.191. Resident education.</b></p> <p>The residence shall educate the resident of the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<b>Safe Management Techniques</b>		
<p><b>§ 2600.201. Safe management techniques.</b></p> <p>The home shall use positive interventions to modify or eliminate a behavior that endangers the resident himself or others. Positive interventions include improving communications, reinforcing appropriate behavior, redirection, conflict resolution, violence prevention, praise, deescalation techniques and alternative techniques or methods to identify and defuse potential emergency situations.</p>	<p><b>§ 2800.201. Safe management techniques.</b></p> <p>The residence shall use positive interventions to modify or eliminate a behavior that endangers the resident himself or others. Positive interventions include improving communications, reinforcing appropriate behavior, redirection, conflict resolution, violence prevention, praise, deescalation techniques and alternative techniques or methods to identify and defuse potential emergency situations.</p>	
<p><b>§ 2600.202. Prohibitions.</b></p> <p>The following procedures are prohibited: (1) Seclusion, defined as involuntary confinement of a resident in a room from which the resident is physically prevented from leaving, is prohibited. This does not include the admission of a resident in a secured dementia care unit in accordance with § 2600.231 (relating to admission).</p>	<p><b>§ 2800.202. Prohibitions.</b></p> <p>The following procedures are prohibited: (1) Seclusion, defined as involuntary confinement of a resident in a room <u><b>or living unit</b></u> from which the resident is physically prevented from leaving, is prohibited. This does not include the admission of a resident in a secured dementia care unit in accordance with § 2800.231 (relating to admission).</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(2) Aversive conditioning, defined as the application of startling, painful or noxious stimuli, is prohibited.</p> <p>(3) Pressure point techniques, defined as the application of pain for the purpose of achieving compliance, is prohibited.</p> <p>(4) A chemical restraint, defined as use of drugs or chemicals for the specific and exclusive purpose of controlling acute or episodic aggressive behavior, is prohibited. A chemical restraint does not include a drug ordered by a physician or dentist to treat the symptoms of a specific mental, emotional or behavioral condition, or as pretreatment prior to a medical or dental examination or treatment.</p> <p>(5) A mechanical restraint, defined as a device that restricts the movement or function of a resident or portion of a resident's body, is prohibited. Mechanical restraints include geriatric chairs, handcuffs, anklets, wristlets, camisoles, helmet with fasteners, muffs and mitts with fasteners, poseys, waist straps, head straps, papoose boards, restraining sheets, chest restraints and other types of locked restraints. A mechanical restraint does not</p>	<p>(2) Aversive conditioning, defined as the application of startling, painful or noxious stimuli, is prohibited.</p> <p>(3) Pressure point techniques, defined as the application of pain for the purpose of achieving compliance, is prohibited.</p> <p>(4) A chemical restraint, defined as use of drugs or chemicals for the specific and exclusive purpose of controlling acute or episodic aggressive behavior, is prohibited. A chemical restraint does not include a drug ordered by a physician or dentist to treat the symptoms of a specific mental, emotional or behavioral condition, or as pretreatment prior to a medical or dental examination or treatment.</p> <p>(5) A mechanical restraint, defined as a device that restricts the movement or function of a resident or portion of a resident's body, is prohibited. Mechanical restraints include geriatric chairs, handcuffs, anklets, wristlets, camisoles, helmet with fasteners, muffs and mitts with fasteners, poseys, waist straps, head straps, papoose boards, restraining sheets, chest restraints and other types of locked restraints. A mechanical restraint</p>	

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## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>include a device used to provide support for the achievement of functional body position or proper balance that has been prescribed by a medical professional as long as the resident can easily remove the device.</p> <p>(6) A manual restraint, defined as a hands-on physical means that restricts, immobilizes or reduces a resident's ability to move his arms, legs, head or other body parts freely, is prohibited. A manual restraint does not include prompting, escorting or guiding a resident to assist in the ADLs or IADLs.</p>	<p>does not include a device used to provide support for the achievement of functional body position or proper balance that has been prescribed by a medical professional as long as the resident can easily remove the device <u><i>or the resident or his designee understands the need for the device and consents to its use.</i></u></p> <p>(6) A manual restraint, defined as a hands-on physical means that restricts, immobilizes or reduces a resident's ability to move his arms, legs, head or other body parts freely, is prohibited. A manual restraint does not include prompting, escorting or guiding a resident to assist in the ADLs or IADLs.</p>	<p>In the ALR setting, the ALR may use a device to provide support for the achievement of functional body position or proper balance – prescribed by a medical professional – as long as the resident can easily remove the device OR the resident OR his designee consents to the use of the device and understands the need.</p>
<p><b>Bed Rail Provisions in LMI under § 2600.202.</b></p> <p>Use of any bed rail length longer than ½ the length of the bed is considered a restraint, and is prohibited. This also includes mesh bedside guards. Use of</p>	<p><b>§ 2800.203. Bedside rails.</b></p> <p><u><i>(a) Bedside rails may not be used unless the resident can raise and lower the rails on his own. Bedside rails may not be used to keep a resident in bed.</i></u> Use of any length rail longer than half the length of the bed is considered a restraint and is prohibited. Use of more than one rail on</p>	<p>In the ALR setting, the use of bedside rails are permitted if the requirements and conditions set forth in § 2800.203 are met.</p>

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## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
more than one rail on the same side of the bed is prohibited.	<p>the same side of the bed is not permitted.</p> <p><u><i>(b) Half-length rails are permitted only if the following conditions are met:</i></u>  <u><i>(1) The resident's assessment or support plan, or both, addresses the medical symptoms necessitating the use of half-length rails and the health and safety protection necessary in order to safely use half-length rails.</i></u>  <u><i>(2) The residence has attempted to use less restrictive alternatives.</i></u>  <u><i>(3) The resident or legal representative consented to the use of half-length rails after the risk, benefits and alternatives were explained.</i></u></p>	
<b>Services</b>		
<b>Chapter 2600 – No corresponding section.</b>	<p><b>§ 2800.220. Service provision.</b></p> <p><u><i>(a) Services. The residence shall provide assisted living services as specified in subsection (b). The residence shall offer and provide the core service packages specified in subsection (c). The residence shall provide or arrange for the provision of supplemental health care services as</i></u></p>	<p>In the ALR setting, the ALR must be able to provide assisted living services as provided for in subsection (b).</p> <p>The ALR must offer an Independent Core Service Package and an Enhanced Core Service Package which include the</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>specified in subsection (e). Other individuals or agencies may furnish services directly or under arrangements with the residence in accordance with a mutually agreed upon charge or fee between the residence, resident and other individual or agency. These other services shall be supplemental to the assisted living services provided by the residence and do not supplant them.</i></u></p> <p><u><i>(b) Assisted living services. The residence shall, at a minimum, provide the following services:</i></u></p> <p><u><i>(1) Nutritious meals and snacks in accordance with §§ 2800.161 and 2800.162 (relating to nutritional adequacy; and meals).</i></u></p> <p><u><i>(2) Laundry services in accordance with § 2800.105 (relating to laundry).</i></u></p> <p><u><i>(3) A daily program of social and recreational activities in accordance with § 2800.221 (relating to activities program).</i></u></p> <p><u><i>(4) Assistance with performing ADLs and IADLs in accordance with §§ 2800.23 and 2800.24 (relating to</i></u></p>	<p>provision of certain assisted living services as provided for in subsection (c).</p> <p>The ALR must permit a resident to opt-out of services – meals, housekeeping, and/or laundry as outlined in subsection (d).</p> <p>The ALR must provide or arrange for supplemental health care services as provided for in subsection (e). The ALR may contract with other providers to provide these services to their residents. The ALR may develop a network of supplemental providers that the resident must choose to receive services from.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>activities; and personal hygiene).</u></p> <p><u>(5) Assistance with self-administration of medication or medication administration as indicated in the resident's assessment and support plan in accordance with §§ 2800.181 and 2800.182 (relating to self administration;</u></p> <p><u>and medication administration).</u></p> <p><u>(6) Housekeeping services essential for the health, safety and comfort of the resident based upon the resident's needs and preferences.</u></p> <p><u>(7) Transportation in accordance with § 2800.171 (relating to transportation).</u></p> <p><u>(8) Financial management in accordance with § 2800.20 (relating to financial management).</u></p> <p><u>(9) 24-hour supervision, monitoring and emergency response.</u></p> <p><u>(10) Activities and socialization.</u></p> <p><u>(11) Basic cognitive support services as defined in § 2800.4 (relating to definitions).</u></p> <p><u>(c) Core service packages. The residence shall, at a minimum, provide the following core service packages:</u></p>	<p>The ALR must provide the Independent Core Package to residents that do not require ADL assistance or that may have a</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><b><u>(1) Independent Core Package. This core package shall be provided to residents who do not require assistance with ADLs. The services must include the following:</u></b></p> <p><b><u>(i) 24-hour supervision, monitoring and emergency response.</u></b></p> <p><b><u>(ii) Nutritious meals and snacks in accordance with §§ 2800.161 and 2800.162.</u></b></p> <p><b><u>(iii) Housekeeping services essential for the health, safety and comfort of the resident based upon the resident's needs and preferences.</u></b></p> <p><b><u>(iv) Laundry services in accordance with § 2800.105.</u></b></p> <p><b><u>(v) Assistance with unanticipated ADLs for a defined recovery period.</u></b></p> <p><b><u>(vi) A daily program of social and recreational activities in accordance with § 2800.221.</u></b></p> <p><b><u>(vii) Basic cognitive support services as defined in § 2800.4.</u></b></p> <p><b><u>(2) Enhanced Core Package. This core package shall be available to residents who require assistance with ADLs. The services must include the following:</u></b></p>	<p>need for assistance with unanticipated ADLs for a defined recovery period. See Paragraph (c)(1) for the list of services.</p> <p>The ALR must provide the Enhanced Core Package to residents that require assistance with ADLs. See Paragraph (c)(2) for the list of services.</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>(i) The services provided in the basic core package under paragraph (c)(1)(i)—(vii).</u></p> <p><u>(ii) Assistance with ADLs and unanticipated ADLs for an undefined period of time.</u></p> <p><u>(iii) Transportation in accordance with § 2800.171.</u></p> <p><u>(iv) Assistance with self-administration of medication or medication administration as indicated in the resident's assessment and support plan in accordance with §§ 2800.181 and 2800.182.</u></p> <p><u>(d) Opt-out. If a resident wishes not to have the residence provide a service under subsection (c)(1)(ii)—(iv), the resident-residence contract must state the following:</u></p> <p><u>(1) The service not being provided.</u></p> <p><u>(2) The corresponding fee schedule charge adjustment that takes into account the reduction in service.</u></p> <p><u>(e) Supplemental health care services. The residence shall provide or arrange for the provision of supplemental health</u></p>	<p>The ALR must allow the resident to opt-out of receiving meals, housekeeping services and/or laundry services. The requirements for the opt-out provisions are found in Subsection (d). Note: A Statement of Policy is to be published to address when it is inappropriate for the ALR to allow the resident to opt-out of any or all of the three services.</p> <p>In the ALR setting, the ALR must provide OR arrange for the provision of supplemental health care services. See</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><b><u>care services, including, but not limited to, the following:</u></b></p> <p><b><u>(1) Hospice services.</u></b></p> <p><b><u>(2) Occupational therapy.</u></b></p> <p><b><u>(3) Skilled nursing services.</u></b></p> <p><b><u>(4) Physical therapy.</u></b></p> <p><b><u>(5) Behavioral health services.</u></b></p> <p><b><u>(6) Home health services.</u></b></p> <p><b><u>(7) Escort service if indicated in the resident's support plan or requested by the resident to and from medical appointments.</u></b></p> <p><b><u>(8) Specialized cognitive support services as defined in § 2800.4.</u></b></p>	<p>Subsection (e) for a list of the services. Note this list is not all inclusive.</p>
<p><b>§ 2600.221. Activities program.</b></p> <p>(a) The administrator shall develop a program of activities designed to promote each resident's active involvement with other residents, the resident's family and the community.</p>	<p><b>§ 2800.221. Activities program.</b></p> <p>(a) The residence shall develop a program of daily activities designed to promote each resident's active involvement with other residents, the resident's family and the community <b><u>and provide the necessary space and equipment for the activities in accordance with §§ 2800.98 and 2800.99 (relating to indoor activity space; and recreation space).</u></b> <b><u>The residence shall offer the opportunity for the residents'</u></b></p>	<p>In the ALR setting, the ALR must provide the necessary space and equipment for resident activities and must offer their residents the opportunity to actively participate in the development of the daily activities calendar. The programs provided must be based on the residents interests and encourage active participation in the community at large. The ALR must provide necessary cueing to residents to remind them of the</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) The program must provide social, physical, intellectual and recreational activities in a planned, coordinated and structured manner.</p> <p>(c) A current weekly activity calendar shall be posted in a conspicuous and public place in the home.</p>	<p><b><u>active participation in the development of the daily activities calendar.</u></b></p> <p>(b) The program <b><u>must be based upon individual and group interests</u></b> and provide social, physical, intellectual and recreational activities in a planned, coordinated and structured manner <b><u>and shall encourage active participation in the community at large.</u></b></p> <p>(c) The week's daily activity calendar shall be posted in advance in a conspicuous and public place in the residence. <b><u>The residence shall provide verbal cueing and reminders of activities, their start times and locations within the residence.</u></b></p>	<p>activities and their start times and locations.</p>
<p><b>§ 2600.222. Community social services.</b></p> <p>Residents shall be encouraged and assisted in the access to and use of social services in the community which may benefit the resident, including a county mental health and mental retardation program, a drug and alcohol program, a</p>	<p><b>§ 2800.222. Community social services.</b></p> <p>Residents shall be encouraged and assisted in the access to and use of social services in the community which may benefit the resident, including a county mental health and mental retardation program, a drug and alcohol program, a</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
senior citizens center, an area agency on aging or a home health care agency.	senior citizens center, an area agency on aging or a home health care agency.	
<p><b>§ 2600.223. Description of services.</b></p> <p>(a) The home shall have a current written description of services and activities that the home provides including the following:</p> <p>(1) The scope and general description of the services and activities that the home provides.</p> <p>(2) The criteria for admission and discharge.</p> <p>(3) Specific services that the home does not provide, but will arrange or coordinate.</p> <p>(b) The home shall develop written procedures for the delivery and management of services from admission to discharge.</p>	<p><b>§ 2800.223. Description of services.</b></p> <p>(a) The residence shall have a current written description of services and activities that the residence provides including the following:</p> <p>(1) The scope and general description of the services and activities that the residence provides.</p> <p>(2) The criteria for admission and discharge.</p> <p>(3) Specific services that the residence does not provide, but will arrange or coordinate.</p> <p>(b) The residence shall develop written procedures for the delivery and management of services from admission to discharge.</p>	
<b>§ 2600.224. Preadmission screening.</b>	<p><b>§ 2800.224. Initial assessment and preliminary support plan.</b></p> <p><b><u>(a) Initial assessment.</u></b></p>	In the ALR setting, preadmission screening is replaced with the initial assessment and preliminary support plan.

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(a) A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.</p> <p>(b) An applicant whose personal care service needs cannot be met by the home shall be referred to a local appropriate assessment agency.</p> <p>(c) The preadmission screening shall be completed by the administrator or designee. If the resident is referred by a State-operated facility, a county mental health and mental retardation program, a drug and alcohol program or an area agency on aging, a representative of the referral agent may complete the preadmission screening.</p>	<p><b><u>(1) The administrator, administrator designee, or LPN, under the supervision of an RN, or an RN shall complete the initial assessment.</u></b></p> <p><b><u>(2) An individual shall have a written initial assessment that is documented on the Department's assessment form within 30 days prior to admission unless one of the conditions contained in paragraph (3) apply.</u></b></p> <p><b><u>(3) A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days after admission if one of the following conditions applies:</u></b></p> <p><b><u>(i) The resident is being admitted directly to the residence from an acute care hospital.</u></b></p> <p><b><u>(ii) The resident is being admitted to escape from an abusive situation.</u></b></p> <p><b><u>(iii) The resident has no alternative living arrangement.</u></b></p> <p><b><u>(4) A residence may use its own assessment form if it includes the same information as the Department's assessment form.</u></b></p> <p><b><u>(5) The written initial assessment must,</u></b></p>	<p>The initial assessment and the preliminary support plan must be completed by the ALR within 30 days prior to admission unless certain conditions apply as set forth in Paragraph (a)(3). If one of the conditions apply the initial assessment and preliminary support plan must be completed within 15 days after admission.</p> <p>The ALR may use its own assessment form as long as it includes the same information as the Department's form.</p> <p>The assessment must include the</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>at a minimum include the following:</u></p> <p><u>(i) The individual's need for assistance with ADLs and IADLs.</u></p> <p><u>(ii) The mobility needs of the individual.</u></p> <p><u>(iii) The ability of the individual to self-administer medication.</u></p> <p><u>(iv) The individual's medical history, medical conditions, and current medical status and how they impact or interact with the individual's service needs.</u></p> <p><u>(v) The individual's need for supplemental health care services.</u></p> <p><u>(vi) The individual's need for special diet or meal requirements.</u></p> <p><u>(vii) The individual's ability to safely operate key-locking devices.</u></p> <p><u>(viii) The individual's ability to evacuate from the residence.</u></p> <p><u>(b) An initial assessment will not be required to commence supplemental health care services to a resident of a residence under any of the following circumstances:</u></p> <p><u>(1) If the resident was not receiving the services at the time of the resident's admission.</u></p>	<p>information contained in Paragraph (a)(5).</p> <p>In the ALR setting, an initial assessment is not required to initiate supplemental health care services if the resident was not receiving services at time of admission; OR is being transferred from another part of the ALR; OR is being transferred from a PCH licensed by the same operator.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>(2) To transfer a resident from a portion of a residence that does not provide supplemental health care services to a portion of the residence that provides such service.</u></p> <p><u>(3) To transfer a resident from a personal care home to a residence licensed by the same operator.</u></p> <p><u>(c) Preliminary support plan.</u></p> <p><u>(1) An individual requiring services shall have a written preliminary support plan developed within 30 days prior to admission to the residence unless one of the conditions contained in paragraph (2) applies.</u></p> <p><u>(2) A resident requiring services shall have a written preliminary support plan developed within 15 days after admission if one of the following conditions applies:</u></p> <p><u>(i) The resident is being admitted directly to the residence from an acute care hospital.</u></p> <p><u>(ii) The resident is being admitted to escape from an abusive situation.</u></p> <p><u>(iii) Any other situation where the</u></p>	<p>In the ALR setting, the ALR must develop a preliminary support plan for an individual within 30 days prior to admission to the ALR unless certain conditions apply as set forth in Paragraph (c)(2). If one of the conditions apply the preliminary support plan must be completed within 15 days after admission.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>resident has no alternative living arrangement.</i></u></p> <p><u><i>(3) The written preliminary support plan must document the dietary, medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the individual, or referrals for the individual to outside services if the individual's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a residence to pay for the cost of these medical and behavioral care services. The preliminary support plan must document the assisted living services and supplemental health care services, if applicable, that will be provided to the individual.</i></u></p> <p><u><i>(4) The preliminary support plan shall be documented on the Department's support plan form.</i></u></p> <p><u><i>(5) A residence may use its own support plan form if it includes the same information as the Department's support plan form. An LPN, under the supervision of an RN, or an RN shall</i></u></p>	<p>In the ALR setting, the contents of the preliminary support plan are similar to the contents of the support plan requirements in the PCH setting with some additions.</p> <p>In the ALR setting the preliminary support plan must document the assisted living services and supplemental health care services that will be provided to the individual, if any.</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>review and approve the preliminary support plan.</u></p> <p><u>(6) An individual's preliminary support plan must document the ability of the individual to self-administer medications or the need for medication reminders or medication administration and the ability of the resident to safely operate key-locking devices.</u></p> <p><u>(7) An individual shall be encouraged to participate in the development of the preliminary support plan. An individual may include a designated person or family member in making decisions about services.</u></p> <p><u>(8) Individuals who participate in the development of the preliminary support plan shall sign and date the preliminary support plan.</u></p> <p><u>(9) If an individual or designated person is unable or chooses not to sign the preliminary support plan, a notation of inability or refusal to sign shall be documented.</u></p> <p><u>(10) The residence shall give a copy of the preliminary support plan to the resident and the resident's designated</u></p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<u><i>person.</i></u>	
<p><b>§ 2600.225. Initial and annual assessment.</b></p> <p>(a) A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.</p> <p>(b) A home may use its own assessment form if it includes the same information as the Department's assessment form.</p> <p>(c) The resident shall have additional assessments as follows:</p> <p>(1) Annually.</p> <p>(2) If the condition of the resident significantly changes prior to the annual assessment.</p> <p>(3) At the request of the Department upon cause to believe that an update is required.</p> <p>(d) If the resident's physician or appropriate assessment agency determines that the resident requires a higher level of</p>	<p><b>§ 2800.225. Additional assessments.</b></p> <p>(a) The administrator or administrator designee, or an LPN, under the supervision of an RN, or an RN shall complete additional written assessments for each resident. A residence may use its own assessment form if it includes the same information as the Department's assessment form.</p> <p>Additional written assessments shall be completed as follows:</p> <p>(1) Annually.</p> <p>(2) If the condition of the resident significantly changes prior to the annual assessment.</p> <p>(3) At the request of the Department upon cause to believe that an update is required.</p>	<p>In the ALR regulation the minimum components of the resident's assessment are outlined in Subsection (b) below.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
care, a plan for placement shall be made as soon as possible by the administrator in conjunction with the resident or designated person, or both.	<p><u><i>(b) The assessment must, at a minimum include the following:</i></u></p> <p><u><i>(1) The resident's need for assistance with ADLs and IADLs.</i></u></p> <p><u><i>(2) The mobility needs of the resident.</i></u></p> <p><u><i>(3) The ability of the resident to self-administer medication.</i></u></p> <p><u><i>(4) The resident's medical history, medical conditions, and current medical status and how these impact or interact with the individual's service needs.</i></u></p> <p><u><i>(5) The resident's need for supplemental health care services.</i></u></p> <p><u><i>(6) The resident's need for special diet or meal requirements.</i></u></p> <p><u><i>(7) The resident's ability to safely operate key-locking devices.</i></u></p>	
<p><b>§ 2600.226. Mobility criteria.</b></p> <p>(a) The resident shall be assessed for mobility needs as part of the resident's assessment.</p>	<p><b>§ 2800.226. Mobility criteria.</b></p> <p>(a) The resident shall be assessed for mobility needs as part of the resident's assessment.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) If a resident is determined to have mobility needs as part of the initial or annual assessment, specific requirements relating to the care, health and safety of the resident shall be met immediately.</p> <p>(c) The administrator shall notify the Department's personal care home regional office within 30 days after a resident with mobility needs is admitted to the home or the date when a resident develops mobility needs.</p>	<p>(b) If a resident is determined to have mobility needs as part of the resident's initial or annual assessment, specific requirements relating to the care, health and safety of the resident shall be met immediately.</p> <p>(c) The administrator <u><i>or the administrator designee</i></u> shall notify the Department within 30 days after a resident with mobility needs is admitted to the residence <u><i>and compile a monthly list of when a resident develops mobility needs.</i></u></p>	<p>In the ALR setting, the ALR administrator or the administrator must compile a monthly list of when a resident develops mobility needs.</p>
<p><b>§ 2600.227. Development of the support plan.</b></p> <p>(a) A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department's support plan form.</p> <p>(b) A home may use its own support plan form if it includes the same information as the Department's support plan form.</p>	<p><b>§ 2800.227. Development of the final support plan.</b></p> <p>(a) Each resident requiring services shall have a written final support plan developed and implemented within 30 days after admission to the residence. The final support plan shall be documented on the Department's support plan form.</p> <p>(b) A residence may use its own support plan form if it includes the same information as the Department's support</p>	<p>In the ALR setting, the ALR must develop a final support plan for a resident within 30 days after admission. The final support plan is subsequent to the preliminary support plan that must be developed within 30 days prior to admission unless certain conditions exist. The final support plan provisions for an ALR are similar to the support plan provisions for a PCH.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(c) The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.</p> <p>(d) Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.</p>	<p>plan form. <u><b>An LPN, under the supervision of an RN, shall review and approve the final support plan.</b></u></p> <p>(c) The final support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment. <u><b>The residence shall review each resident's final support plan on a quarterly basis and modify as necessary to meet the resident's needs.</b></u></p> <p>(d) Each residence shall document in the resident's final support plan the dietary, medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a residence to pay for the cost of these medical and behavioral care services. <u><b>The final support plan must document the assisted</b></u></p>	<p>The final support plan in an ALR setting must be reviewed and approved by an LPN, under the supervision of an RN.</p> <p>In the ALR setting the resident's final support plan must be reviewed on a quarterly basis and modified as necessary.</p> <p>In the ALR setting, the final support plan must include documentation regarding the</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(e) The resident's support plan must document the ability of the resident to self-administer medications or the need for medication reminders or medication administration.</p> <p>(f) A resident may participate in the development and implementation of the support plan. A resident may include a designated person in making decisions about services.</p> <p>(g) Individuals who participate in the development of the support plan shall sign and date the support plan.</p>	<p><u><b>living services and supplemental health care services, if applicable, that will be provided to the resident.</b></u></p> <p>(e) The resident's final support plan must document the ability of the resident to self-administer medications or the need for medication reminders or medication administration <u><b>and the ability of the resident to safely operate key-locking devices. Strategies that promote interactive communication on the part of and between direct care staff and individual residents shall also be included in the final support plan.</b></u></p> <p>(f) A resident <u><b>shall be encouraged to</b></u> participate in the development and implementation of the final support plan. A resident may include a designated person or family member in making decisions about services.</p> <p>(g) Individuals who participate in the development of the final support plan shall sign and date the support plan.</p>	<p>assisted living services and supplemental health care services, if any, the resident will receive.</p> <p>In the ALR setting, the final support plan must document the ability of the resident to operate key-locking devices. The final support plan must also include strategies that promote interactive communication between the resident and direct care staff.</p> <p>In the ALR setting, the resident must be encouraged to participate in the development of their support plan.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(h) If a resident or designated person is unable or chooses not to sign the support plan, a notation of inability or refusal to sign shall be documented.</p> <p>(i) The support plan shall be accessible by direct care staff persons at all times.</p> <p>(j) The home shall give a copy of the support plan to the resident and the resident's designated person upon request.</p>	<p>(h) If a resident or designated person is unable or chooses not to sign the final support plan, a notation of inability or refusal to sign shall be documented.</p> <p>(i) The final support plan shall be accessible by direct care staff persons at all times.</p> <p><b><u>(j) A resident or a designated person has a right to request the review and modification of his support plan.</u></b></p> <p>(k) The residence shall give a copy of the final support plan to the resident and the resident's designated person. <b><u>The final support plan shall be attached to or incorporated into and serve as part of the resident-residence contract.</u></b></p>	<p>In the ALR setting, the resident or his designated person has the right to request that their support plan be reviewed and modified.</p> <p>In the ALR setting, the resident's final support plan must be attached to or incorporated into the resident-residence contract.</p>
<p><b>§ 2600.228. Notification of termination.</b></p> <p>(a) At the resident's request, the home shall provide assistance in relocating to the resident's own home or to another residence that meets the needs of the resident.</p>	<p><b>§ 2800.228. Transfer and discharge.</b></p> <p>(a) The facility shall ensure that a transfer or discharge is safe and orderly and that the transfer or discharge is appropriate to meet the resident's needs. <b><u>This includes ensuring that a resident is transferred or</u></b></p>	<p>In the ALR setting, the transfer and discharge provisions are expanded.</p> <p>If a resident is transferred or discharged the ALR must allow the resident to participate in the decision related to their</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) If the home initiates a discharge or transfer of a resident, or if the legal entity chooses to close the home, the home shall provide a 30-day advance written notice to the resident, the resident's designated person and the referral agent citing the reasons for the discharge or transfer. This shall be stipulated in the resident-home contract.</p>	<p><b><u>discharged with all his medications, durable medical equipment and personal property. The residence shall permit the resident to participate in the decision relating to the relocation.</u></b></p> <p>(b) If the residence initiates a transfer or discharge of a resident, or if the legal entity chooses to close the residence, the residence shall provide a 30-day advance written notice to the resident, the resident's family or designated person and the referral agent citing the reasons for the transfer or discharge. This shall be stipulated in the resident-residence contract.</p> <p><b><u>(1) The 30-day advance written notice must be written in language in which the resident understands, or performed in American Sign Language or presented orally in a language the resident understands if the resident does not speak standard English. The notice must include the following:</u></b></p> <p><b><u>(i) The specific reason for the transfer or discharge.</u></b></p> <p><b><u>(ii) The effective date of the transfer or</u></b></p>	<p>relocation and must ensure that the resident has all his/her medications, durable medical equipment and personal property.</p> <p>In the ALR setting, a 30-day notice must be provided in language the resident understands and must include the information set forth in Paragraph (b)(1).</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>discharge.</u></p> <p><u>(iii) The location to which the resident will be transferred or discharged.</u></p> <p><u>(iv) An explanation of the measures the resident or the resident's designated person can take if they disagree with the residence decision to transfer or discharge which includes the name, mailing address, and telephone number of the State and local long-term care ombudsman.</u></p> <p><u>(v) The resident's transfer or discharge rights, as applicable.</u></p> <p><u>(2) Prior to initiating a transfer or discharge of a resident, the residence shall make reasonable accommodation for aging in place that may include services from outside providers. The residence shall demonstrate through support plan modification and documentation the attempts to resolve the reason for the transfer or discharge. Supplemental services may be provided by the resident's family, residence staff or private duty staff as agreed to by the resident and the residence. This shall be</u></p>	<p>In the ALR setting, before the ALR discharges a resident the ALR must make reasonable accommodations to allow the resident to age in place. This must be demonstrated through support plan modification and documentation.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>A 30-day advance written notice is not required if a delay in discharge or transfer would jeopardize the health, safety or well-being of the resident or others in the home, as certified by a physician or the Department. This may occur when the resident needs psychiatric or long-term care or is abused in the home, or the Department initiates closure of the home.</p> <p>(c) A home shall give the Department written notice of its intent to close the home, at least 60 days prior to the anticipated date of closing.</p> <p>(d) A home may not require a resident to leave the home prior to 30 days following the resident's receipt of a written notice from the home regarding the intended closure of the home, except when the Department determines that removal of the resident at an earlier time is necessary for the protection of the health, safety and well-being of the resident.</p>	<p><u><b>stipulated in the resident-residence contract.</b></u></p> <p><u><b>(3) Practicable notice, rather than a 30-day advance written notice is required</b></u> if a delay in transfer or discharge would jeopardize the health, safety or well-being of the resident or others in the residence, as certified by a physician or the Department. This may occur when the resident needs psychiatric services or is abused in the residence, or the Department initiates closure of the residence.</p> <p>(c) A residence shall give the Department written notice of its intent to close the residence, at least 60 days prior to the anticipated date of closing.</p> <p>(d) A residence may not require a resident to leave the residence prior to 30 days following the resident's receipt of a written notice from the residence regarding the intended closure of the residence, except when the Department determines that removal of the resident at an earlier time is necessary for the protection of the health, safety and well-</p>	<p>In the ALR setting, if a delay in transfer or discharge would jeopardize the health or well being of the resident or others in the ALR, practicable notice rather than a 30-day notice is required.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(e) The date and reason for the discharge or transfer, and the destination of the resident, if known, shall be recorded in the resident record.</p> <p>(f) If the legal entity chooses to voluntarily close the home or if the Department has initiated legal action to close the home, the Department working in conjunction with appropriate local authorities, will offer relocation assistance to the residents. Except in the case of an emergency, each resident may participate in planning the transfer, and shall have the right to choose among the available alternatives after an opportunity to visit the alternative homes. These procedures shall apply even if the resident is placed in a temporary living situation.</p> <p>(g) Within 30 days of the home's closure, the legal entity shall return the license to</p>	<p>being of the resident.</p> <p>(e) The date and reason for the transfer or discharge, and the destination of the resident, if known, shall be recorded in the resident record <u><b>and tracked in a transfer and discharge tracking chart that the residence shall maintain and make available to the Department.</b></u></p> <p>(f) If the legal entity chooses to voluntarily close the residence or if the Department has initiated legal action to close the residence, the Department working in conjunction with appropriate local authorities, will offer relocation assistance to the residents. Except in the case of an emergency, each resident may participate in planning the transfer, and shall have the right to choose among the available alternatives after an opportunity to visit the alternative residences. These procedures apply even if the resident is placed in a temporary living situation.</p> <p>(g) Within 30 days of the residence's closure, the legal entity shall return the</p>	<p>In the ALR setting, the ALR must maintain a transfer and discharge tracking chart and make it available to the Department. The information the ALR must maintain includes the following: Date of transfer or discharge; reason for transfer or discharge; and destination of the resident.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>the Department's personal care home regional office.</p> <p>(h) The only grounds for discharge or transfer of a resident from a home are for the following conditions:</p> <p>(1) If a resident is a danger to himself or others.</p> <p>(2) If the legal entity chooses to voluntarily close the home, or a portion of the home.</p> <p>(3) If a home determines that a resident's functional level has advanced or declined so that the resident's needs cannot be met in the home. If a resident or the resident's designated person disagrees with the home's decision to discharge or transfer, consultation with an appropriate assessment agency or the resident's physician shall be made to determine if the resident needs a higher level of care. A plan for other placement shall be made as soon as possible by the administrator in conjunction with the resident and the</p>	<p>license to the Department.</p> <p>(h) The only grounds for transfer or discharge of a resident from a residence are for the following conditions:</p> <p>(1) If a resident is a danger to himself or others <b><u>and the behavior cannot be managed through interventions, services planning or informed consent agreements.</u></b></p> <p>(2) If the legal entity chooses to voluntarily close the residence, or a portion of the residence.</p> <p>(3) If a residence determines that a resident's functional level has advanced or declined so that <b><u>the resident's needs cannot be met in the residence under § 2800.229 (relating to excludable conditions; exceptions) or within the scope of licensure for a residence. In that case, the residence shall notify the resident and the resident's designated person. The residence shall provide justification for the residence's determination that the needs of the resident cannot be met.</u></b> In the event that</p>	<p>In the ALR setting, the provisions related to grounds for transfer and discharges have been amended to allow the resident to age in place. With the exceptions found in paragraphs (h)(1) and (3). If transfer or discharge is a result of (h)(1) or (h)(3), the ALR must obtain certification from any of the following individuals that the resident can no longer be retained in the residence:</p> <p>(1) The administrator acting in consultation with supplemental health care providers.</p> <p>(2) The resident's physician or certified registered nurse practitioner.</p> <p>(3) The medical director of the residence. See Subsection (i).</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>resident's designated person, if any. If assistance with relocation is needed, the administrator shall contact appropriate local agencies, such as the area agency on aging, county mental health/mental retardation program or drug and alcohol program, for assistance. The administrator shall also contact the Department's personal care home regional office.</p> <p>(4) If meeting the resident's needs would require a fundamental alteration in the home's program or building site, or would create an undue financial or programmatic burden on the home.</p> <p>(5) If the resident has failed to pay after reasonable documented efforts by the home to obtain payment.</p> <p>(6) If closure of the home is initiated by the Department.</p> <p>(7) Documented, repeated violation of the home rules.</p>	<p>there is no disagreement related to the transfer or discharge, a plan for other placement shall be made as soon as possible by the administrator in conjunction with the resident and the resident's designated person, if any. If assistance with relocation is needed, the administrator shall contact appropriate local agencies, such as the area agency on aging, county mental health/mental retardation program or drug and alcohol program, for assistance. The administrator shall also contact the Department.</p> <p>(4) If meeting the resident's needs would require a fundamental alteration in the residence's program or building site, or would create an undue financial or programmatic burden on the residence.</p> <p>(5) If the resident has failed to pay after reasonable documented efforts by the residence to obtain payment.</p> <p>(6) If closure of the residence is initiated by the Department.</p> <p>(7) Documented, repeated violation of the residence rules.</p> <p><b><u>(8) A court has ordered the transfer or</u></b></p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>discharge.</u></p> <p><u>(i) If grounds for transfer or discharge is based upon subsection (h)(1) or (3), a certification from one of the following individuals shall be required to certify in writing that the resident can no longer be retained in the residence:</u></p> <p><u>(1) The administrator acting in consultation with supplemental health care providers.</u></p> <p><u>(2) The resident's physician or certified registered nurse practitioner.</u></p> <p><u>(3) The medical director of the residence.</u></p>	
Chapter 2600 – No corresponding provisions	<p><u>§ 2800.229. Excludable conditions; exceptions.</u></p> <p><u>(a) Excludable conditions. Except as provided in subsection (b), a residence may not admit, retain or serve an individual with any of the following conditions or health care needs:</u></p> <p><u>(1) Ventilator dependency.</u></p> <p><u>(2) Stage III and IV decubiti and vascular ulcers that are not in a healing stage.</u></p>	<p>Excludable conditions; exceptions is a new concept that only applies to the ALR setting. An ALR may not admit, retain or serve an individual with any of the conditions listed in Subsection (a), unless the ALR has received approval from the Department through the exceptions process outlined in Subsection (c).</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>(3) Continuous intravenous fluids.</u></p> <p><u>(4) Reportable infectious diseases, such as tuberculosis, in a communicable state that requires isolation of the individual or requires special precautions by a caretaker to prevent transmission of the disease unless the Department of Health directs that isolation be established within the residence.</u></p> <p><u>(5) Nasogastric tubes.</u></p> <p><u>(6) Physical restraints.</u></p> <p><u>(7) Continuous skilled nursing care 24 hours a day.</u></p> <p><u>(b) Exception. The residence may submit a written request to the Department on a form provided by the Department for an exception related to any of the conditions or health care needs listed in subsection (a) or (e) to allow the residence to admit, retain or serve an individual with one of those conditions or health care needs, unless a determination is unnecessary as set forth in subsection (e).</u></p> <p><u>(c) Submission, review and determination of an exception request.</u></p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>(1) The administrator of the residence shall submit the exception request. The exception request must be signed and affirmed by an individual listed in subsection (d) and accompanied by a support plan which includes the residence accommodations for treating the excludable condition requiring the exception request. Proposed accommodations must conform with the provisions contained within the resident-residence contract.</u></p> <p><u>(2) The Department will review the exception request in consultation with a certified registered nurse practitioner or a physician, with experience caring for the elderly and disabled in long-term living settings.</u></p> <p><u>(3) The Department will respond to the exception request in writing within 5 business days of receipt.</u></p> <p><u>(4) The Department may approve the exception request if the following conditions are met:</u></p> <p><u>(i) The exception request is desired by the resident or applicant.</u></p> <p><u>(ii) The resident or applicant will benefit</u></p>	



## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

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Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>from the approval of the exception request.</u></p> <p><u>(iii) The residence demonstrates to the Department's satisfaction that the residence has the staff, skills and expertise necessary to care for the resident's needs related to the excludable condition.</u></p> <p><u>(iv) The residence demonstrates to the Department's satisfaction that any necessary supplemental health care provider has the staff, skills and expertise necessary to care for the resident's needs related to the excludable condition.</u></p> <p><u>(v) The residence provides a written alternate care plan that ensures the availability of staff with the skills and expertise necessary to care for the resident's needs related to the excludable condition in the event the supplemental health care provider is unavailable.</u></p> <p><u>(5) The Department will render decisions on exception requests on a case-by-case basis and not provide for facility-wide exceptions.</u></p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>(d) Certification providers. The following persons may certify that an individual with an excludable condition may not be admitted or retained in a residence:</u></p> <p><u>(1) The administrator acting in consultation with supplemental health care providers.</u></p> <p><u>(2) The individual's physician or certified registered nurse practitioner.</u></p> <p><u>(3) The medical director of the residence.</u></p> <p><u>(e) Departmental exceptions. A residence may admit, retain or serve an individual for whom a determination is made by the Department, upon the written request of the residence, that the individual's specific health care needs can be met by a provider of assisted living services or within a residence, including an individual requiring:</u></p> <p><u>(1) Gastric tubes, except that a determination will not be required if the individual is capable of self-care of the gastric tube or a licensed health care professional or other qualified individual cares for the gastric tube.</u></p> <p><u>(2) Tracheostomy, except that a</u></p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>determination will not be required if the individual is independently capable of self-care of the tracheostomy.</u></p> <p><u>(3) Skilled nursing care 24 hours a day, except that a determination will not be required if the skilled nursing care is provided on a temporary or intermittent basis.</u></p> <p><u>(4) A sliding scale insulin administration, except that a determination will not be required if the individual is capable of self-administration or a licensed health care professional or other qualified individual administers the insulin.</u></p> <p><u>(5) Intermittent intravenous therapy, except that a determination will not be required if a licensed health care professional manages the therapy.</u></p> <p><u>(6) Insertions, sterile irrigation and replacement of a catheter, except that a determination will not be required for routine maintenance of a urinary catheter, if the individual is capable of self-administration or a licensed health care professional administers the catheter.</u></p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

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Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>(7) Oxygen, except that a determination will not be required if the individual is capable of self-administration or a licensed health care professional or other qualified individual administers the oxygen.</u></p> <p><u>(8) Inhalation therapy, except that a determination will not be required if the individual is capable of self-administration or a licensed health care professional or other qualified individual administers the therapy.</u></p> <p><u>(9) Other types of supplemental health care services that the administrator, acting in consultation with supplemental health care providers, determines can be provided in a safe and effective manner by the residence.</u></p> <p><u>(10) For purposes of paragraphs (1), (4), (7) and (8), a "qualified individual" means an individual who has been determined by a certification provider listed under subsection (d) to be capable of care or administration under paragraphs (1), (4), (7) and (8).</u></p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>(f) Request for exception by resident. Nothing herein prevents an individual seeking admission to a residence or a resident from requesting that the residence apply for an exception from the Department for a condition listed in this section for which an exception must be granted by the Department. The residence's determination on whether or not to seek such an exception shall be documented on a form supplied by the Department.</i></u></p> <p><u><i>(g) Record. A written record of the exception request, the supporting documentation to justify the exception request and the determination related to the exception request shall be kept in the records of the residence. The information required by this subsection shall also be kept in the resident's record.</i></u></p> <p><u><i>(h) Decisions. The residence shall record the following decisions made on the basis of this section.</i></u></p> <p><u><i>(1) Admission denials.</i></u></p> <p><u><i>(2) Transfer or discharge decisions that</i></u></p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<u><i>are made on the basis of this section.</i></u>	
<b>Secured Dementia Care Units</b>	<b>Special Care Units</b>	
<p><b>§ 2600.231. Admission.</b></p> <p>(a) This section and § § 2600.232—2600.239 apply to secured dementia care units. These provisions are in addition to the other provisions of this chapter. A secured dementia care unit is a home or portion of a home that provides specialized care and services for residents with Alzheimer’s disease or other dementia.</p>	<p><b>§ 2800.231. Admission.</b></p> <p>(a) <i>Special care units.</i> This section and §§ 2800.232—2800.239 apply to <u><i>special care units</i></u>. These provisions are in addition to the other provisions of this chapter. A <u><i>special care unit</i></u> is a residence or portion of a residence that provides one or both of the following:</p> <p>(1) Specialized care and services for residents with Alzheimer's disease or dementia <u><i>in the least restrictive manner consistent with the resident's support plan to ensure the safety of the resident and others in the residence while maintaining the resident's ability to age in place.</i></u></p> <p><u><i>(i) Admission of a resident shall be in consultation with the resident's family or designated person.</i></u></p> <p><u><i>(ii) Prior to admission other service options that may be available to a resident shall be considered.</i></u></p> <p><u><i>(2) Intense neurobehavioral</i></u></p>	<p>In the ALR setting Secured Dementia Care Units provided for in the PCH setting has been expanded to include Special Care Units for residents with Alzheimer’s disease or dementia and residents with severely disruptive and potentially dangerous behaviors as a result of brain injury.</p> <p>Admission to the special care unit must be in consultation with the resident’s family or designated person. Prior to admission to the special care unit other options available to the resident must be considered.</p> <p>Specific provisions have been added</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
(b) A resident shall have a medical evaluation by a physician, physician's	<p><u>rehabilitation for residents with severely disruptive and potentially dangerous behaviors as a result of brain injury in the least restrictive manner consistent with the resident's rehabilitation and support plan to ensure the safety of the resident and others in the residence.</u></p> <p><u>(i) Each resident of a special care unit for INRBI shall have a rehabilitation and support plan that supports independence and promotes recovery and thereby discharge to a less restrictive setting.</u></p> <p><u>(ii) Special care units for INRBI shall provide for each resident to age in place.</u></p> <p><u>(iii) Admission of a resident shall be in consultation with the resident or potential resident and, when appropriate, the resident's designated person or the resident's family, or both.</u></p> <p><u>(iv) Prior to admission other less restrictive service options that may be available to a resident or potential resident shall be considered.</u></p> <p>(b) <i>Medical evaluation.</i> A resident <u>or potential resident</u> shall have a medical</p>	throughout the Special Care Unit Sections for Intense Neurobehavioral Rehabilitation after Brain Injury (INRBI).

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission. Documentation shall include the resident's diagnosis of Alzheimer's disease or other dementia and the need for the resident to be served in a secured dementia care unit.</p> <p>(c) A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's</p>	<p>evaluation by a physician, physician's assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission.</p> <p>(1) Documentation for a special care unit for residents with Alzheimer's disease or dementia must include the resident's diagnosis of Alzheimer's disease or dementia and the need for the resident to be served in a special care unit.</p> <p><b><u>(2) Documentation for a special care unit for INRBI must include the resident's or potential resident's diagnosis of brain injury and need for residential services to be provided in a special care unit for INRBI. The evaluation must include visual function, hearing, swallowing, mobility and hand function.</u></b></p> <p>(c) Preadmission screening.</p> <p>(1) Special care unit for residents with Alzheimer's disease or dementia.</p> <p>(i) A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's</p>	<p>Provisions related to special care unit for INRBI.</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>preadmission screening form shall be completed for each resident within 72 hours prior to admission to a secured dementia care unit.</p> <p>(d) A geriatric assessment team is a group of multidisciplinary specialists in the care of adults who are older that conducts a multidimensional evaluation of a resident and assists in developing a support plan by working with the resident's physician, designated person and family to coordinate the resident's care.</p>	<p>cognitive preadmission screening form shall be completed for each resident within 72 hours prior to admission to a special care unit.</p> <p>(ii) A geriatric assessment team is a group of multidisciplinary specialists in the care of adults who are older that conducts a multidimensional evaluation of a resident and assists in developing a support plan by working with the resident's physician, designated person and the resident's family to coordinate the resident's care.</p> <p><b><u>(2) Special care unit for INRBI.</u></b>  <b><u>(i) A written CPB preadmission screening completed in collaboration with a physician, neuropsychologist or cognitive, physical, behavioral assessment team and documented on the Department's CPB preadmission screening form shall be completed for each resident or potential resident within 72 hours prior to admission to a special care unit for INRBI.</u></b>  <b><u>(ii) A cognitive, physical, behavioral specialist with brain injury experience</u></b></p>	<p>Provisions related to special care unit for INRBI.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(e) Each resident record must have documentation that the resident and the resident's designated person have not objected to the resident's admission or transfer to the secured dementia care unit.</p> <p>(f) In addition to the requirements in § 2600.225 (relating to initial and annual</p>	<p><u><i>shall assist in developing a rehabilitation and support plan by working with the resident's physician, neuropsychologist and, when appropriate, the resident's designated person or the resident's family, or both to develop the resident's rehabilitation and support plan. This plan must include a high level of nursing and behavioral supervision, medication management, occupational therapy, cognitive therapy, behavioral therapy, vocational services, support for social reentry, and a personalized treatment plan.</i></u></p> <p>(d) <i>Resident admission to special care unit.</i> Each resident record must have documentation that the resident or <u><i>potential resident and, when appropriate, the resident's designated person or the resident's family have agreed</i></u> to the resident's admission or transfer to the special care unit.</p> <p>(e) <i>Additional assessments.</i> (1) In addition to the requirements in § 2800.225 (relating to additional</p>	<p>In the ALR setting, the resident record must include documentation that the resident, the resident's designated person or the resident's family have AGREED to the resident's admission or transfer to the special care unit.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
assessment), the resident shall also be assessed annually for the continuing need for the secured dementia care unit.	assessments), residents of a special care unit for Alzheimer's disease or dementia shall also be assessed <u>quarterly</u> for the continuing need for the special care unit for Alzheimer's disease or dementia.	In the ALR setting, the ALR is required to assess residents of a special care unit for Alzheimer's disease or dementia on a quarterly basis.
	<u><b>(2) In addition to the requirements in § 2800.225, residents of a special care unit for INRBI shall also be assessed at least semiannually or more frequently as necessary to assure the continuing need for residence in the special care unit for INRBI.</b></u>	In the ALR setting, the ALR is required to assess residents of a special care unit for INRBI at least semiannually.
(g) An individual who does not have a primary diagnosis of Alzheimer's disease or other dementia may reside in the secured dementia care unit if desired by the resident.	(f) <u>Additional resident in special care unit. A spouse, friend or family member who does not have a primary diagnosis of Alzheimer's disease or dementia or brain injury</u> may reside in the special care unit if desired by the resident or his designated person.	The provisions included in the ALR regulation specifically identifies the individuals that may reside in a special care unit without the primary diagnosis of Alzheimer's disease or dementia or brain injury.
(1) The individual shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to residence or 30 days after	(1) <u>The spouse, friend or family member</u> shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner, documented on a form provided by the Department within 60 days prior to admission to the	In the ALR setting, the individual without the primary diagnosis of Alzheimer's disease or dementia or brain injury must have a medical evaluation within 60 days prior to admission or 15 days after admission.

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>residence.</p> <p>(2) If the medical evaluation shows that personal care services are needed, the requirements of this chapter apply.</p> <p>(3) The individual shall have access to and be able to follow directions for the operation of the key pads or other lock-releasing devices to exit the secured dementia care unit.</p> <p>(h) The resident-home contract specified in § 2600.25 (relating to resident-home contract) must also include a disclosure of services, admission and discharge criteria, change in condition policies, special programming and costs and fees.</p>	<p>residence or <b><u>15 days after admission</u></b> to the residence.</p> <p>(2) The <b><u>spouse, friend or family member</u></b> shall have access to and be able to follow directions for the operation of the key pads or other lock-releasing devices to exit the special care unit.</p> <p>(g) <i>Disclosure of services.</i> The resident-residence contract specified in § 2800.25 (relating to resident-residence contract) must also include a disclosure of services, admission and discharge criteria, change in condition policies, special programming and costs and fees.</p> <p><b><u>(h) Alzheimer's disease or dementia. When the residence holds itself out to the public as providing services or housing for individuals with Alzheimer's disease or dementia, the residence shall disclose to individuals and provide materials that include the following:</u></b></p> <p><b><u>(1) The residence's written statement of its philosophy and mission which reflects</u></b></p>	<p>In the ALR setting, an ALR that maintains a special care unit must disclose to individuals and provide information on the materials listed in Subsections (h) and (i).</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>the needs of individuals with Alzheimer's disease or dementia.</i></u></p> <p><u><i>(2) A description of the residence's physical environment and design features to support the functioning of individuals with Alzheimer's disease or dementia.</i></u></p> <p><u><i>(3) A description of the frequency and types of individual and group activities designed specifically to meet the needs of individuals with Alzheimer's disease or dementia.</i></u></p> <p><u><i>(4) A description of the security measures provided by the residence.</i></u></p> <p><u><i>(5) A description of the training provided to staff regarding provision of care to individuals with Alzheimer's disease or dementia.</i></u></p> <p><u><i>(6) A description of availability of family support programs and family involvement.</i></u></p> <p><u><i>(7) The process used for assessment and establishment of a plan of services for the individual, including methods by which the plan of services will remain responsive to changes in the individual's condition.</i></u></p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>(i) Special care unit for INRBI. When an assisted living residence holds itself out to the public as a special care unit for INRBI, the residence shall disclose and provide materials to individuals and, when appropriate, the individual's designated person or the individual's family, or both, that include the following information:</u></p> <p><u>(1) The residence's written statement of its philosophy and mission which reflects the needs of individuals with brain injury for intense neurobehavioral rehabilitation and support.</u></p> <p><u>(2) A description of the residence's physical environment and design features that support and promote the functioning and rehabilitation of individuals who need INRBI.</u></p> <p><u>(3) A description of the types of individual and group activities that have been designed specifically to meet the requirements of the rehabilitation and support plans of specific residents with brain injury.</u></p> <p><u>(4) A description of the security measures provided by the residence.</u></p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u>(5) A description of the credentials and experience required and the training provided to staff regarding the provision of rehabilitation and support for individuals who require INRBI.</u></p> <p><u>(6) A description of availability of family support programs, family education programs, and family involvement.</u></p> <p><u>(7) The process used for assessment and establishment of a plan of services for the resident, including methods by which the plan of services will remain responsive to progress in the resident's recovery.</u></p> <p><u>(j) Residents who wander. The residence shall identify measures to address individuals with Alzheimer's disease or dementia or with INRBI who have tendencies to wander.</u></p> <p><u>(k) Individuals with INRBI. The residence with a special care unit for INRBI shall identify measures to address individuals who require INRBI who have problems that may actually impede rehabilitation such as:</u></p>	<p>In the ALR setting, in a special care unit the ALR must identify measures to address residents who wander.</p> <p>In the ALR setting, in the special care unit for INRBI the ALR must identify measures to address residents who have problems that may impede rehabilitation.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

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Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<ul style="list-style-type: none"><li><u>(1) Anger.</u></li><li><u>(2) Self-control.</u></li><li><u>(3) Aggression toward others.</u></li><li><u>(4) Self-injury.</u></li><li><u>(5) Deficient judgment and problem solving due to cognitive deficits.</u></li><li><u>(6) Frequent agitation.</u></li><li><u>(7) Prolonged confusional state.</u></li><li><u>(8) Seizure disorders and related behavioral problems.</u></li><li><u>(9) Significant memory and learning problems.</u></li><li><u>(10) Disruption of sleep and wake cycles.</u></li><li><u>(11) Problems with attention.</u></li><li><u>(12) Filtering and focusing.</u></li><li><u>(13) Emergence of mental health problems or exacerbation of preexisting mental health issues.</u></li><li><u>(14) Emergence of substance abuse problems or exacerbation of preexisting substance abuse issues.</u></li><li><u>(15) Other cognitive and behavioral problems which have or would prevent successful completion of traditional rehabilitation programs.</u></li></ul>	



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><b><u>(1) Professionals caring for individuals requiring INRBI. The residence with a special care unit for INRBI shall identify at a minimum the following professionals with expertise in providing care for individuals requiring INRBI.</u></b></p> <p><b><u>(1) Onsite behavioral specialist.</u></b></p> <p><b><u>(2) Onsite cognitive rehabilitation therapist.</u></b></p> <p><b><u>(3) A consulting psychiatrist; a consulting neuro- psychologist.</u></b></p> <p><b><u>(4) A consulting neuropsychiatrist or psychiatrist for prescribing and monitoring the psychiatric medications that may be needed for residents with behavioral health issues.</u></b></p>	Provisions related to special care unit for INRBI in the ALR setting.
<p><b>§ 2600.232. Environmental protection.</b></p> <p>(a) The home shall provide exercise space, both indoor and outdoor.</p> <p>(b) No more than two residents may occupy a bedroom regardless of its size. A bedroom shall meet the requirement in § 2600.101(a), (b) or (c) (relating to resident bedrooms), as applicable. Section</p>	<p><b>§ 2800.232. Environmental protection.</b></p> <p>(a) The residence shall provide exercise space, both indoor and outdoor.</p> <p>(b) No more than two residents may occupy a living unit regardless of its size. A living unit must meet the requirement in § 2800.101 (relating to resident living units), as applicable. <b><u>Kitchen facilities</u></b></p>	<p>In the ALR setting, kitchen facilities may not be included in a living unit for INRBI resident.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>2600.101(d) does not apply to a secured dementia care unit.</p> <p>(c) The home shall provide space for dining, group and individual activities and visits.</p> <p>(d) The home shall provide a full description of the measures taken to enhance environmental awareness and maximize independence of the residents. The measures to enhance environmental awareness and maximize independence of the residents shall be implemented.</p>	<p><b><u>may not be included in a living unit located in a special care unit for INRBI.</u></b></p> <p>(c) The residence shall provide space for dining, group and individual activities and visits.</p> <p>(d) The residence shall provide a full description of the measures implemented to enhance environmental awareness, <b><u>minimize environmental stimulation</u></b> and maximize independence of the residents <b><u>in public and private spaces based on the needs of the individuals being served.</u></b></p> <p><b><u>(e) The residence with a special care unit for INRBI shall identify the process used to assure conformity of the individual resident's living unit to the ongoing rehabilitation recommendations of the neuropsychologist and the cognitive physical, emotional behavioral assessment team as expressed in the current rehabilitation and support plan.</u></b></p>	<p>Provisions related to special care unit for INRBI in the ALR setting.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.233. Doors, locks and alarms.</b></p> <p>(a) Doors equipped with key-locking devices, electronic card operated systems or other devices that prevent immediate egress are permitted only if there is written approval from the Department of Labor and Industry, Department of Health or appropriate local building authority permitting the use of the specific locking system.</p> <p>(b) A home shall have a statement from the manufacturer, specific to that home, verifying that the electronic or magnetic locking system will shut down, and that all doors will open easily and immediately when one of more of the following occurs:</p> <p>(1) Upon a signal from an activated fire alarm system, heat or smoke detector.</p> <p>(2) Power failure to the home.</p> <p>(3) Overriding the electronic or magnetic locking system by use of a key pad or other lock-releasing device.</p>	<p><b>§ 2800.233. Doors, locks and alarms.</b></p> <p>(a) Doors equipped with key-locking devices, electronic card operated systems or other devices that prevent immediate egress are permitted only if there is written approval from the Department of Labor and Industry, Department of Health or appropriate local building authority permitting the use of the specific locking system.</p> <p>(b) A residence shall have a statement from the manufacturer, specific to that residence, verifying that the electronic or magnetic locking system will shut down, and that all doors will open easily and immediately when one or more of the following occurs:</p> <p>(1) Upon a signal from an activated fire alarm system, heat or smoke detector.</p> <p>(2) Power failure to the residence.</p> <p>(3) Overriding the electronic or magnetic locking system by use of a key pad or other lock-releasing device.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(c) If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.</p> <p>(d) Doors that open onto areas such as parking lots, or other potentially unsafe areas, shall be locked by an electronic or magnetic system.</p> <p>(e) Fire alarm systems shall be interconnected to the local fire department, when available, or a 24-hour monitoring service approved by the local fire department.</p>	<p>(c) If key-locking devices, electronic card systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.</p> <p>(d) Doors that open onto areas such as parking lots, or other potentially unsafe areas, shall be locked by an electronic or magnetic system.</p> <p>(e) Fire alarm systems must be interconnected to the local fire department, when available, or a 24-hour monitoring service approved by the local fire department.</p>	
<p><b>§ 2600.234. Resident care.</b></p> <p>(a) Within 72 hours of the admission, or within 72 hours prior to the resident's admission to the secured dementia care unit, a support plan shall be developed, implemented and documented in the resident record.</p>	<p><b>§ 2800.234. Resident care.</b></p> <p>(a) <u>Support or rehabilitation plan.</u> (1) Within 72 hours of the admission, or within 72 hours prior to the resident's admission to the special care unit, a support plan shall be developed, implemented and documented in each resident's record.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><b><u>(2) For individuals being admitted into a special care unit for INRBI, a rehabilitation plan shall be developed, implemented and documented in the resident record. This rehabilitation plan and the individual's support plan shall be based on the PB preadmission assessment and other available records and information.</u></b></p>	Provisions related to special care unit for INRBI in the ALR setting.
(b) The support plan must identify the resident's physical, medical, social, cognitive and safety needs.	<p>(b) <i>Plan requirements.</i></p> <p>(1) The support plan <b><u>and if applicable, the rehabilitation plan</u></b> must identify the resident's physical, medical, social, cognitive and safety needs.</p> <p><b><u>(2) The rehabilitation and support plan for residents of a special care unit for INRBI must identify the residents' emotional and behavioral needs.</u></b></p>	Provisions related to special care unit for INRBI in the ALR setting.
(c) The support plan must identify the individual responsible to address the resident's needs.	(c) <i>Responsible individual.</i> The support plan <b><u>and if applicable, the rehabilitation plan</u></b> must identify the individual responsible to address the resident's needs.	
(d) The support plan shall be revised at	<p>(d) <i>Review of plans.</i></p> <p>(1) The support plan for a resident of a</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>least annually and as the resident's condition changes.</p> <p>(e) The resident or the resident's designated person shall be involved in the development and the revisions of the support plan.</p>	<p>special care unit for residents with Alzheimer's disease or dementia <u><b>shall be reviewed, and if necessary, revised at least quarterly</b></u> and as the resident's condition changes.</p> <p><u><b>(2) The support plan and rehabilitation plan for a resident of a special care unit for INRBI shall be reviewed, and if necessary, revised at least monthly and as the resident's condition changes.</b></u></p> <p>(e) <i>Resident involvement in development of plan.</i> The resident, the resident's designated person <u><b>or the resident's family</b></u> shall be involved in the development and the revisions of the support plan <u><b>and if applicable, the rehabilitation plan.</b></u></p>	<p>In a special care unit for residents with Alzheimer's disease or dementia, the resident's support plan must be reviewed, and if necessary revised at least quarterly.</p> <p>Provisions related to special care unit for INRBI. The resident's support plan must be reviewed, and if necessary revised at least monthly.</p>
<p><b>§ 2600.235. Discharge.</b></p> <p>If the home initiates a discharge or transfer of a resident, or the legal entity chooses to close the home, the administrator shall give a 30-day advance written notice to the resident, the resident's designated person and the referral agent citing the reasons for the</p>	<p><b>§ 2800.235. Discharge.</b></p> <p>(a) If the residence initiates a discharge or transfer of a resident, or the legal entity chooses to close the residence, the administrator shall give a 30-day advance written notice to the resident, the resident's designated person and the referral agent citing the reasons for the</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
discharge or transfer. This requirement shall be stipulated in the resident-home contract signed prior to admission to the secured dementia care unit.	discharge or transfer. This requirement shall be stipulated in the resident-residence contract signed prior to admission to the special care unit.  <u><i>(b) If a resident of a special care unit for INRBI, or when appropriate, the resident's designated person or the resident's family, request discharge to another facility, another assisted living residence or an independent living arrangement, transition services shall be provided by the special care unit.</i></u>	Provisions related to special care unit for INRBI in the ALR setting.
<b>§ 2600.236. Training.</b>  Each direct care staff person working in a secured dementia care unit shall have 6 hours of annual training related to dementia care and services, in addition to the 12 hours of annual training specified in § 2600.65 (relating to direct care staff person training and orientation).	<b>§ 2800.236. Training.</b>  (a) Each direct care staff person working in a special care unit for residents with Alzheimer's disease or dementia shall have <u><i>8 hours of initial training within the first 30 days of the date of hire and a minimum of 8 hours of annual training related to dementia care and services, in addition to the 16 hours of annual training</i></u> specified in § 2800.65 (relating to staff orientation and direct care staff person training and orientation).	In the ALR setting, direct care staff working in a special care unit for residents with Alzheimer's or dementia must have 8 hours of initial training within the first 30 days of hire and a minimum of 8 hours of training annually related to dementia care and services. This training is in addition to the 16 hours of annual training.

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><b><u>(b) The training for each direct care staff person working in a special care unit for residents with Alzheimer's disease or dementia at a minimum must include the following topics:</u></b></p> <p><b><u>(1) An overview of Alzheimer's disease and related dementias.</u></b></p> <p><b><u>(2) Managing challenging behaviors.</u></b></p> <p><b><u>(3) Effective communications.</u></b></p> <p><b><u>(4) Assistance with ADLs.</u></b></p> <p><b><u>(5) Creating a safe environment.</u></b></p> <p><b><u>(c) Each direct care staff person working in a special care unit for INRBI shall have 8 hours of initial training within the first 30 days of the date of hire and a minimum of 8 hours of annual training related to brain injury, in addition to the 16 hours of annual training specified in § 2800.65 and any continuing education required for professional licensing.</u></b></p> <p><b><u>(d) The training for each direct care staff person working in a special care unit for INRBI in addition to subsection (b)(3), (4) and (5), must at a minimum include the following topics:</u></b></p>	<p>In the ALR setting, the dementia related training must include the topics set forth in Subsection (b).</p> <p>In the ALR setting, direct care staff working in a special care unit for INRBI must have 8 hours of initial training within the first 30 days of hire and a minimum of 8 hours of training annually related to brain injury. This training is in addition to the 16 hours of annual training.</p> <p>In the ALR setting, the training for direct care staff working in a special care unit for INRBI must include the topics set forth in Subsection (d)</p>



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
	<p><u><i>(1) An overview of brain injury including the common cognitive, physical and behavioral effects.</i></u></p> <p><u><i>(2) Understanding and managing challenging behaviors which follow from the cognitive, physical and behavioral effects of brain injury.</i></u></p> <p><u><i>(3) Tailoring activities and interactions to provide individualized rehabilitation and support in accordance with the resident's rehabilitation and support plan.</i></u></p> <p><u><i>(4) Coaching and cueing, interactive problem solving, promoting the initiation of self-soothing activities, and timing the fading of supports.</i></u></p>	
<p><b>§ 2600.237. Program.</b></p> <p>(a) The following types of activities shall be offered at least weekly:</p> <p>(1) Gross motor activities, such as dancing, stretching and other exercise.</p> <p>(2) Self-care activities, such as personal hygiene.</p>	<p><b>§ 2800.237. Program.</b></p> <p>(a) The following types of activities shall be offered at least weekly <u><i>to residents of a special care unit for residents with Alzheimer's disease or dementia:</i></u></p> <p>(1) Gross motor activities, such as dancing, stretching and other exercise.</p> <p>(2) Self-care activities, such as personal hygiene.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(3) Social activities, such as games, music and holiday and seasonal celebrations.</p> <p>(4) Crafts, such as sewing, decorations and pictures.</p> <p>(5) Sensory and memory enhancement activities, such as review of current events, movies, story telling, picture albums, cooking, pet therapy and reminiscing.</p> <p>(6) Outdoor activities, as weather permits, such as walking, gardening and field trips.</p> <p>(b) Resident participation in general activity programming shall:</p> <p>(1) Be voluntary.</p> <p>(2) Respect the resident's age and cognitive abilities.</p> <p>(3) Support the retention of the resident's abilities.</p>	<p>(3) Social activities, such as games, music and holiday and seasonal celebrations.</p> <p>(4) Crafts, such as sewing, decorations and pictures.</p> <p>(5) Sensory and memory enhancement activities, such as review of current events, movies, story telling, picture albums, cooking, pet therapy and reminiscing.</p> <p>(6) Outdoor activities, as weather permits, such as walking, gardening and field trips.</p> <p>(b) Resident participation <u><i>for residents of a special care unit for residents with Alzheimer's disease or dementia</i></u> in general activity programming shall:</p> <p>(1) Be voluntary.</p> <p>(2) Respect the resident's age and cognitive abilities.</p> <p>(3) Support the retention of the resident's abilities.</p> <p><u><i>(c) The rehabilitation and support plans of the residents in a special care unit for INRBI will determine the types and frequency of the individual and group activities to be offered.</i></u></p>	<p>Provisions related to special care unit for INRBI.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.238. Staffing.</b></p> <p>Each resident in a secured dementia care unit shall be considered to be a resident with mobility needs under § 2600.57(c) (relating to direct care staffing).</p>	<p><b>§ 2800.238. Staffing.</b></p> <p>Each resident in a special care unit shall be considered to be a resident with mobility needs under § 2800.57(c) (relating to direct care staffing).</p>	
<p><b>§ 2600.239. Notification to Department.</b></p> <p>(a) The legal entity shall submit a written request to the Department's personal care home regional office at least 60 days prior to the following:</p> <ol style="list-style-type: none"> <li>(1) Opening a secured care dementia unit.</li> <li>(2) Adding a secured dementia care unit to an existing home.</li> <li>(3) Increasing the maximum capacity in an existing unit.</li> <li>(4) Changing the locking system, exit doors or floor plan of an existing unit.</li> </ol> <p>(b) The Department will inspect and approve the secured care dementia unit prior to operation or change. The requirements of this chapter shall be met prior to operation.</p>	<p><b>§ 2800.239. Application to Department.</b></p> <p>(a) The legal entity shall submit <u><b>an application</b></u> to the Department at least 60 days prior to the following:</p> <ol style="list-style-type: none"> <li>(1) Opening a special care unit.</li> <li>(2) Adding a special care unit to an existing residence.</li> <li>(3) Increasing the maximum capacity in an existing unit.</li> <li>(4) Changing the locking system, exit doors or floor plan of an existing unit.</li> </ol> <p>(b) The Department will inspect and approve the special care unit prior to operation or change. The requirements of this chapter shall be met prior to operation.</p>	<p>If an entity wants to operate a special care unit the entity must submit an application to the Department as indicated in this section. There is an additional fee of \$150 for entities that are seeking special care unit designation. See § 2800.11(f).</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(c) The following documents shall be included in the written request specified in subsection (a):</p> <p>(1) The name, address and legal entity of the home.</p> <p>(2) The name of the administrator of the home.</p> <p>(3) The maximum capacity of the home.</p> <p>(4) The requested resident population of the secured dementia care unit.</p> <p>(5) A building description.</p> <p>(6) A unit description.</p> <p>(7) The type of locking system.</p> <p>(8) Policy and procedures to be implemented for emergency egress and resident elopement.</p> <p>(9) A sample of a 2-week staffing schedule.</p> <p>(10) Verification of completion of additional training requirements.</p> <p>(11) The operational description of the secured dementia care unit locking system of the doors.</p> <p>(12) The manufacturer's statement regarding the secured dementia care unit locking system.</p>	<p>(c) The following documents shall be included in the <u>application</u> specified in subsection (a):</p> <p>(1) The name, address and legal entity of the residence.</p> <p>(2) The name of the administrator of the residence.</p> <p>(3) The maximum capacity of the residence.</p> <p>(4) The requested resident population of the special care unit.</p> <p>(5) A building description.</p> <p>(6) A unit description.</p> <p>(7) The type of locking system.</p> <p>(8) Policy and procedures to be implemented for emergency egress and resident elopement.</p> <p>(9) A sample of a 2-week staffing schedule.</p> <p>(10) Verification of completion of additional training requirements.</p> <p>(11) The operational description of the special care unit locking system of the doors.</p> <p>(12) The manufacturer's statement regarding the special care unit locking system.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(13) A written approval or a variance permitting locked exit doors from the Department of Labor and Industry, the Department of Health or the appropriate local building authority.</p> <p>(14) The name of the municipality or 24-hour monitoring service maintaining the interconnection with the home's fire alarm system.</p> <p>(15) A sample plan of care and service for the resident addressing the resident's physical, medical, social, cognitive and safety needs for the residents.</p> <p>(16) The activity standards.</p> <p>(17) The complete medical and cognitive preadmission assessment, that is completed upon admission and reviewed and updated annually.</p> <p>(18) A consent form agreeing to the resident's placement in the secured unit, to be signed by the resident or the resident's designated person.</p> <p>(19) A written agreement containing full disclosure of services, admission and discharge criteria, change in condition policies, services, special programming, costs and fees.</p>	<p>(13) A written approval or a variance permitting locked exit doors from the Department of Labor and Industry, the Department of Health or the appropriate local building authority.</p> <p>(14) The name of the municipality or 24-hour monitoring service maintaining the interconnection with the residence's fire alarm system.</p> <p>(15) A sample plan of care and service for the resident addressing the resident's physical, medical, social, cognitive and safety needs for the residents.</p> <p>(16) The activity standards.</p> <p>(17) The complete medical and cognitive preadmission assessment that is completed upon admission and reviewed and updated annually.</p> <p>(18) A consent form agreeing to the resident's placement in the special care unit, to be signed by the resident or the resident's designated person.</p> <p>(19) A written agreement containing full disclosure of services, admission and discharge criteria, change in condition policies, services, special programming, costs and fees.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(20) A description of environmental cues being utilized.</p> <p>(21) A general floor plan of the entire home.</p> <p>(22) A specific floor plan of the secured dementia care unit, outside enclosed area and exercise space.</p>	<p>(20) A description of environmental cues being utilized.</p> <p>(21) A general floor plan of the entire residence.</p> <p>(22) A specific floor plan of the special care unit, outside enclosed area and exercise space.</p>	
Resident Records		
<p><b>§ 2600.251. Resident records.</b></p> <p>(a) A separate record shall be kept for each resident.</p> <p>(b) The entries in a resident's record must be permanent, legible, dated and signed by the staff person making the entry.</p> <p>(c) The home shall use standardized forms to record information in the resident's record.</p> <p>(d) Separate resident records shall be kept on the premises where the resident lives.</p> <p>(e) Resident records shall be made available to the resident and the resident's designated person during normal working</p>	<p><b>§ 2800.251. Resident records.</b></p> <p>(a) A separate record shall be kept for each resident.</p> <p>(b) The entries in a resident's record must be permanent, legible, dated and signed by the staff person making the entry.</p> <p>(c) The residence shall use standardized forms to record information in the resident's record.</p> <p>(d) Separate resident records shall be kept on the premises where the resident lives.</p> <p>(e) Resident records shall be made available to the resident and the resident's designated person during normal working</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
hours.	hours. <u><i>Resident records shall be made available upon request to the resident and the resident's designated person.</i></u>	In the ALR setting, resident records must be made available upon request to the resident or the resident's designated person.
<p><b>§ 2600.252. Content of resident records.</b></p> <p>Each resident's record must include the following information:</p> <p>(1) Name, gender, admission date, birth date and Social Security number.</p> <p>(2) Race, height, weight, color of hair, color of eyes, religious affiliation, if any, and identifying marks.</p> <p>(3) A photograph of the resident that is no more than 2 years old.</p> <p>(4) Language or means of communication spoken or used by the resident.</p> <p>(5) The name, address, telephone number and relationship of a designated person to be contacted in case of an emergency.</p> <p>(6) The name, address and telephone number of the resident's physician or source of health care.</p>	<p><b>§ 2800.252. Content of resident records.</b></p> <p>Each resident's record must include the following information:</p> <p>(1) Name, gender, admission date, birth date and Social Security number.</p> <p>(2) Race, height, weight <u><i>at time of admission</i></u>, color of hair, color of eyes, religious affiliation, if any, and identifying marks.</p> <p>(3) A photograph of the resident that is no more than 2 years old.</p> <p>(4) A language, <u><i>speech, hearing or vision need which requires accommodation or awareness of during oral or written communication.</i></u></p> <p>(5) The name, address, telephone number and relationship of a designated person to be contacted in case of an emergency.</p> <p>(6) The name, address and telephone number of the resident's physician or source of health care.</p>	<p>In the ALR setting, the resident record must include information regarding the resident's speech, hearing or vision need requiring accommodation or awareness during oral or written communication.</p>

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(7) The current and previous 2 years' physician's examination reports, including copies of the medical evaluation forms.</p> <p>(8) A list of prescribed medications, OTC medications and CAM.</p> <p>(9) Dietary restrictions.</p> <p>(10) A record of incident reports for the individual resident.</p> <p>(11) A list of allergies.</p> <p>(12) The documentation of health care services and orders, including orders for the services of visiting nurse or home health agencies.</p> <p>(13) The preadmission screening, initial intake assessment and the most current version of the annual assessment.</p> <p>(14) A support plan.</p> <p>(15) Applicable court order, if any.</p> <p>(16) The resident's medical insurance information.</p> <p>(17) The date of entrance into the home, relocations and discharges, including the transfer of the resident to other homes owned by the same legal entity.</p> <p>(18) An inventory of the resident's personal property as voluntarily declared</p>	<p>(7) The current and previous 2 years' physician's examination reports, including copies of the medical evaluation forms.</p> <p>(8) A list of prescribed medications, OTC medications and CAM.</p> <p>(9) Dietary restrictions.</p> <p>(10) A record of incident reports for the individual resident.</p> <p>(11) A list of allergies.</p> <p>(12) Documentation of health care services and orders, including orders for the services of visiting nurse or home health agencies.</p> <p>(13) The initial assessment, the preliminary support plan and the most current version of the annual assessment.</p> <p>(14) A final support plan.</p> <p>(15) Applicable court order, if any.</p> <p>(16) The resident's medical insurance information.</p> <p>(17) The date of entrance into the residence, relocations and discharges, including the transfer of the resident to other residences owned by the same legal entity.</p> <p>(18) An inventory of the resident's personal property as voluntarily declared</p>	



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>by the resident upon admission and voluntarily updated.</p> <p>(19) An inventory of the resident's property entrusted to the administrator for safekeeping.</p> <p>(20) The financial records of residents receiving assistance with financial management.</p> <p>(21) The reason for termination of services or transfer of the resident, the date of transfer and the destination.</p> <p>(22) Copies of transfer and discharge summaries from hospitals, if available.</p> <p>(23) If the resident dies in the home, a copy of the official death certificate.</p> <p>(24) Signed notification of rights, grievance procedures and applicable consent to treatment protections specified in § 2600.41 (relating to notification of rights and complaint procedures).</p> <p>(25) A copy of the resident-home contract.</p> <p>(26) A termination notice, if any.</p>	<p>by the resident upon admission and voluntarily updated.</p> <p>(19) An inventory of the resident's property entrusted to the administrator for safekeeping.</p> <p>(20) The financial records of residents receiving assistance with financial management.</p> <p>(21) The reason for termination of services or transfer of the resident, the date of transfer and the destination.</p> <p>(22) Copies of transfer and discharge summaries from hospitals, if available.</p> <p>(23) If the resident dies in the residence, a copy of the official death certificate.</p> <p>(24) Signed notification of rights, grievance procedures and applicable consent to treatment protections specified in § 2800.41 (relating to notification of rights and complaint procedures).</p> <p>(25) A copy of the resident-residence contract.</p> <p>(26) A termination notice, if any.</p> <p><b><u>(27) A record relating to any exception request under § 2800.229 (relating to excludable conditions; exceptions).</u></b></p> <p><b><u>(28) Ongoing resident progress notes.</u></b></p>	<p>In the ALR setting, the resident's record must include information regarding any exception request as a result of an excludable condition and ongoing progress notes regarding the resident's condition.</p>

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.253. Record retention and disposal.</b></p> <p>(a) The resident's entire record shall be maintained for a minimum of 3 years following the resident's discharge from the home or until any audit or litigation is resolved.</p> <p>(b) Records shall be destroyed in a manner that protects confidentiality.</p> <p>(c) The home shall keep a log of resident records destroyed on or after October 24, 2005. This log must include the resident's name, record number, birth date, admission date and discharge date.</p> <p>(d) Records required under this chapter that are not part of the resident records shall be kept for a minimum of 3 years or until any audit or litigation is resolved.</p>	<p><b>§ 2800.253. Record retention and disposal.</b></p> <p>(a) The resident's entire record shall be maintained for a minimum of 3 years following the resident's death, discharge from the residence or until any audit or litigation is resolved.</p> <p>(b) Records shall be destroyed in a manner that protects confidentiality.</p> <p>(c) The residence shall keep a log of resident records destroyed <u>on or after January 18, 2011</u>. This log must include the resident's name, record number, birth date, admission date and discharge date.</p> <p>(d) Records required under this chapter that are not part of the resident records shall be kept for a minimum of 3 years or until any audit or litigation is resolved.</p>	
<p><b>§ 2600.254. Record access and security.</b></p> <p>(a) Records of active and discharged residents shall be maintained in a</p>	<p><b>§ 2800.254. Record access and security.</b></p> <p>(a) Records of active and discharged residents shall be maintained in a</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>confidential manner, which prevents unauthorized access.</p> <p>(b) Each home shall develop and implement policy and procedures addressing record accessibility, security, storage, authorized use and release and who is responsible for the records.</p> <p>(c) Resident records shall be stored in locked containers or a secured, enclosed area used solely for record storage and be accessible at all times to the administrator or the administrator's designee, and upon request, to the Department or representatives of the area agency on aging.</p>	<p>confidential manner, which prevents unauthorized access.</p> <p>(b) Each residence shall develop and implement policy and procedures addressing record accessibility, security, storage, authorized use and release and who is responsible for the records.</p> <p>(c) Resident records shall be stored in locked containers or a secured, enclosed area used solely for record storage and be accessible at all times to the administrator, the administrator's designee, <u><b>or the nurse involved in assessment and support plan development</b></u> and upon request, to the Department or representatives of the area agency on aging.</p>	<p>In the ALR setting, the resident record must be accessible at all times by the nurse involved in the development of the resident's assessment and support plan.</p>
Enforcement		
<p><b>§ 2600.261. Classification of violations.</b></p> <p>(a) The Department will classify each violation of this chapter into one of three categories as described in paragraphs (1)—(3). A violation identified may be classified as Class I, Class II or Class III, depending upon the severity, duration and</p>	<p><b>§ 2800.261. Classification of violations.</b></p> <p>(a) The Department will classify each violation of this chapter into one of three categories as described in paragraphs (1)—(3). A violation identified may be classified as Class I, Class II or Class III, depending upon the severity, duration and</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>the adverse effect on the health and safety of residents.</p> <p>(1) <i>Class I</i>. Class I violations have a substantial probability of resulting in death or serious mental or physical harm to a resident.</p> <p>(2) <i>Class II</i>. Class II violations have a substantial adverse effect upon the health, safety or well-being of a resident.</p> <p>(3) <i>Class III</i>. Class III violations are minor violations, which have an adverse effect upon the health, safety or well-being of a resident.</p> <p>(b) The Department's guidelines for determining the classification of violations are available from the Department's personal care home regional office.</p>	<p>the adverse effect on the health and safety of residents.</p> <p>(1) <i>Class I</i>. Class I violations have resulted in or have a substantial probability of resulting in death or serious mental or physical harm to a resident.</p> <p>(2) <i>Class II</i>. Class II violations have a substantial adverse effect upon the health, safety or well-being of a resident.</p> <p>(3) <i>Class III</i>. Class III violations are minor violations, which have an adverse effect upon the health, safety or well-being of a resident.</p> <p>(b) The Department's guidelines for determining the classification of violations are available from the Department.</p>	
<p><b>§ 2600.262. Penalties.</b></p> <p>(a) The Department will assess a penalty for each violation of this chapter.</p>	<p><b>§ 2800.262. Penalties <u>and corrective action</u>.</b></p> <p>(a) The Department will assess a penalty for each violation of this chapter.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>(b) Penalties will be assessed on a daily basis from the date on which the citation was issued until the date the violation is corrected, except in the case of Class II and Class III violations.</p> <p>(c) In the case of a Class II violation, assessment of the penalty will be suspended for 5 days from the date of citation to permit sufficient time for the home to correct the violation. If the home fails to provide proof of correction of the violation to the Department within the 5-day period, the fine will be retroactive to the date of citation. The Department may extend the time period for good cause.</p> <p>(d) The Department will assess a penalty of \$20 per resident per day for each Class I violation. Each Class I violation shall be corrected within 24 hours.</p> <p>(e) The Department will assess a minimum penalty of \$5 per resident per day, up to a maximum penalty of \$15 per resident per day, for each Class II</p>	<p>(b) Penalties will be assessed on a daily basis from the date on which the citation was issued until the date the violation is corrected, except in the case of Class II and Class III violations.</p> <p>(c) In the case of a Class II violation, assessment of the penalty will be suspended for 5 days from the date of citation to permit sufficient time for the residence to correct the violation. If the residence fails to provide proof of correction of the violation to the Department within the 5-day period, the fine will be retroactive to the date of citation. The Department may extend the time period for good cause.</p> <p>(d) The Department will assess a penalty of \$20 per resident per day for each Class I violation. Each Class I violation shall be corrected within 24 hours.</p> <p>(e) The Department will assess a minimum penalty of \$5 per resident per day, up to a maximum penalty of \$15 per resident per day, for each Class II</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>violation.</p> <p>(f) There is no monetary penalty for Class III violations unless the home fails to correct the violation within 15 days. Failure to correct a Class III violation within the 15-day period may result in a penalty assessment of up to \$3 per resident per day for each Class III violation retroactive to the date of the citation.</p> <p>(g) If a home is found to be operating without a license, a penalty of \$500 will be assessed. After 14 days, if the home operator cited for operating without a license fails to file an application for a license, the Department will assess an additional \$20 for each resident for each day during which the home operator fails to apply.</p> <p>(h) A home charged with a violation of this chapter or Chapter 20 (relating to licensure or approval of facilities and agencies) has 30 days to pay the assessed penalty in full.</p>	<p>violation.</p> <p>(f) There is no monetary penalty for Class III violations unless the residence fails to correct the violation within 15 days. Failure to correct a Class III violation within the 15-day period may result in a penalty assessment of up to \$3 per resident per day for each Class III violation retroactive to the date of the citation.</p> <p>(g) If a residence is found to be operating without a license, a penalty of \$500 will be assessed. After 14 days, if the residence operator cited for operating without a license fails to file an application for a license, the Department will assess an additional \$20 for each resident for each day during which the residence operator fails to apply.</p> <p>(h) A residence charged with a violation of this chapter or Chapter 20 (relating to licensure or approval of facilities and agencies) has 30 days to pay the assessed penalty in full.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.263. Appeals of penalty.</b></p> <p>(a) If the home that is fined intends to appeal the amount of the penalty or the fact of the violation, the home shall forward the assessed penalty, not to exceed \$500, to the Secretary for placement in an escrow account with the State Treasurer. A letter appealing the penalty shall be submitted with the assessed penalty. This process constitutes an appeal.</p> <p>(b) If, through an administrative hearing or judicial review of the proposed penalty, it is determined that no violation occurred or that the amount of the penalty shall be reduced, the Secretary will, within 30 days, remit the appropriate amount to the legal entity together with interest accumulated on these funds in the escrow deposit.</p> <p>(c) Failure to forward payment of the assessed penalty to the Secretary within 30 days will result in a waiver of the right to contest the fact of the violation or the</p>	<p><b>§ 2800.263. Appeals of penalty.</b></p> <p>(a) If the residence that is fined intends to appeal the amount of the penalty or the fact of the violation, the residence shall forward the assessed penalty, not to exceed \$500, to the Secretary for placement in an escrow account with the State Treasurer. A letter appealing the penalty shall be submitted with the assessed penalty. This process constitutes an appeal.</p> <p>(b) If, through an administrative hearing or judicial review of the proposed penalty, it is determined that no violation occurred or that the amount of the penalty shall be reduced, the Secretary will, within 30 days, remit the appropriate amount to the legal entity together with interest accumulated on these funds in the escrow deposit.</p> <p>(c) Failure to forward payment of the assessed penalty to the Secretary within 30 days will result in a waiver of the right to contest the fact of the violation or the</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>amount of the penalty.</p> <p>(d) After an administrative hearing decision that is adverse to the legal entity, or a waiver of the administrative hearing, the assessed penalty amount will be made payable to the “Commonwealth of Pennsylvania.” It will be collectible in a manner provided by law for the collection of debts.</p> <p>(e) If a home liable to pay the penalty neglects or refuses to pay the penalty upon demand, the failure to pay will constitute a judgment in favor of the Commonwealth in the amount of the penalty, together with the interest and costs that may accrue on these funds.</p>	<p>amount of the penalty.</p> <p>(d) After an administrative hearing decision that is adverse to the legal entity, or a waiver of the administrative hearing, the assessed penalty amount will be made payable to the "Commonwealth of Pennsylvania." It will be collectible in a manner provided by law for the collection of debts.</p> <p>(e) If a residence liable to pay the penalty neglects or refuses to pay the penalty upon demand, the failure to pay will constitute a judgment in favor of the Commonwealth in the amount of the penalty, together with the interest and costs that may accrue on these funds.</p>	
<p><b>§ 2600.264. Use of fines.</b></p> <p>(a) Money collected by the Department under this section will be placed in a special restricted receipt account.</p> <p>(b) Money collected will be used first to defray the expenses incurred by residents</p>	<p><b>§ 2800.264. Use of fines.</b></p> <p>(a) Money collected by the Department under this section will be placed in a special restricted receipt account.</p> <p>(b) Money collected will be used first to defray the expenses incurred by residents</p>	



# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>relocated under this chapter.</p> <p>(c) The Department will use money remaining in this account to assist with paying for enforcement of this chapter. Fines collected will not be subject to 42 Pa.C.S. § 3733 (relating to deposits into account).</p>	<p>relocated under this chapter.</p> <p>(c) The Department will use money remaining in this account to assist with paying for enforcement of this chapter. Fines collected will not be subject to 42 Pa.C.S. § 3733 (relating to deposits into account).</p>	
<p><b>§ 2600.265. Review of classifications.</b></p> <p>(a) The Department will review the determinations of Class I, Class II and Class III violations made by the Department's personal care home regional offices.</p> <p>(b) Semiannually, the Department will review the standard guidelines for the classification of violations and evaluate the use of these guidelines. This review is to ensure the uniformity and consistency of the classification process.</p>	<p><b>§ 2800.265. Review of classifications.</b></p> <p>Semiannually, the Department will review the standard guidelines for the classification of violations and evaluate the use of these guidelines. This review is to ensure the uniformity and consistency of the classification process.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.266. Revocation or nonrenewal of licenses.</b></p> <p>(a) The Department will temporarily revoke the license of a home if, without good cause, one or more Class I violations remain uncorrected 24 hours after the home has been cited for the violation.</p> <p>(b) The Department will temporarily revoke the license of a home if, without good cause, one or more Class II violations remain uncorrected 15 days after the citation.</p> <p>(c) Upon the revocation of a license in the instances described in subsections (a) and (b), or if the home continues to operate without applying for a license as described in § 2600.262(h) (relating to penalties), residents shall be relocated.</p> <p>(d) The revocation of a license may terminate upon the Department's determination that its violation is</p>	<p><b>§ 2800.266. Revocation or nonrenewal of licenses.</b></p> <p>(a) The Department will temporarily revoke the license of a residence if, without good cause, one or more Class I violations remain uncorrected 24 hours after the residence has been cited for the violation.</p> <p>(b) The Department will temporarily revoke the license of a residence if, without good cause, one or more Class II violations remain uncorrected 15 days after the citation.</p> <p>(c) Upon the revocation of a license in the instances described in subsections (a) and (b), or if the residence continues to operate without applying for a license as described in § 2800.262(h) (relating to penalties and corrective action), residents shall be relocated.</p> <p>(d) The revocation of a license may terminate upon the Department's determination that its violation is</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>corrected.</p> <p>(e) If, after 3 months, the Department does not issue a new license for a home, the prior license is revoked under section 1087 of the Public Welfare Code (62 P. S. § 1087).</p> <p>(1) Revocation or nonrenewal under this section will be for a minimum of 5 years.</p> <p>(2) A home, which has had a license revoked or not renewed under this section, will not be allowed to operate, staff or hold an interest in a home which applies for a license for 5 years after the revocation or nonrenewal.</p> <p>(f) If a home has been found to have Class I violations on two or more separate occasions during a 2-year period without justification, the Department will revoke or refuse to renew the license of the home.</p> <p>(g) The power of the Department to revoke or refuse to renew or issue a license under this section is in addition to the powers and duties of the Department</p>	<p>corrected.</p> <p>(e) If, after 3 months, the Department does not issue a new license for a residence, the prior license is revoked under section 1087 of the Public Welfare Code (62 P.S. § 1087).</p> <p>(1) Revocation or nonrenewal under this section will be for a minimum of 5 years.</p> <p>(2) A residence, which has had a license revoked or not renewed under this section, will not be allowed to operate, staff or hold an interest in a residence which applies for a license for 5 years after the revocation or nonrenewal.</p> <p>(f) If a residence has been found to have Class I violations on two or more separate occasions during a 2- year period without justification, the Department will revoke or refuse to renew the license of the residence.</p> <p>(g) The power of the Department to revoke or refuse to renew or issue a license under this section is in addition to the powers and duties of the Department</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
under section 1026 of the Public Welfare Code (62 P. S. § 1026).	under section 1026 of the Public Welfare Code (62 P.S. § 1026).	
<p><b>§ 2600.267. Relocation of residents.</b></p> <p>(a) If the relocation of residents is due to the failure of the home to apply for a license, the Department will offer relocation assistance to the residents. This assistance will include each resident's involvement in planning the relocation, except in the case of an emergency. Each resident shall have the right to choose among the available alternatives after an opportunity to visit the alternative homes. These procedures will occur even if the residents are placed in a temporary living situation.</p> <p>(b) A resident will not be relocated if the Secretary determines in writing that the relocation is not in the best interest of the resident.</p>	<p><b>§ 2800.267. Relocation of residents.</b></p> <p>(a) If the relocation of residents is due to the failure of the residence to apply for a license, the Department will offer relocation assistance to the residents. This assistance will include each resident's involvement in planning the relocation, except in the case of an emergency. Each resident shall have the right to choose among the available alternatives after an opportunity to visit the alternative residences. These procedures will occur even if the residents are placed in a temporary living situation.</p> <p>(b) A resident will not be relocated if the Secretary determines in writing that the relocation is not in the best interest of the resident.</p>	
<p><b>§ 2600.268. Notice of violations.</b></p> <p>(a) The administrator shall give each resident and the resident's designated</p>	<p><b>§ 2800.268. Notice of violations.</b></p> <p>(a) The administrator shall give each resident and the resident's designated</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p>person written notification of a Class I violation within 24 hours of the citation.</p> <p>(b) The administrator shall give each resident and the resident's designated person oral or written notification of a Class I or Class II violation, as defined in § 2600.261 (relating to classification of violations), which remains uncorrected for 5 days after the date of citation.</p> <p>(c) If a Class II violation remains uncorrected within 5 days following the citation, the administrator shall give written notice of the violation to each resident and the resident's designated person on the 6th day from the date of the citation.</p> <p>(d) The Department will provide immediate written notification to the appropriate long-term care ombudsman of Class I violations, and notification of Class II violations which remain uncorrected 5 days after the date of citation.</p>	<p>person written notification of a Class I violation within 24 hours of the citation.</p> <p>(b) The administrator shall give each resident and the resident's designated person oral or written notification of a Class I or Class II violation, as defined in § 2800.261 (relating to classification of violations), which remains uncorrected for 5 days after the date of citation.</p> <p>(c) If a Class II violation remains uncorrected within 5 days following the citation, the administrator shall give written notice of the violation to each resident and the resident's designated person on the 6th day from the date of the citation.</p> <p>(d) The Department will provide immediate written notification to the appropriate long-term care ombudsman of Class I violations, and notification of Class II violations which remain uncorrected 5 days after the date of citation.</p>	

# Pennsylvania Health Care Association

## Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.269. Ban on admissions.</b></p> <p>(a) The Department will ban new admissions to a home:</p> <p>(1) That has been found to have a Class I violation.</p> <p>(2) That has been found to have a Class II violation that remains uncorrected without good cause 5 days after being cited for the violation.</p> <p>(3) Whose license has been revoked or nonrenewed.</p> <p>(b) The Department may ban new admissions to a home that has been found to have a repeated Class II violation within the past 2 years.</p> <p>(c) A ban on admissions will remain in effect until the Department determines that the home has corrected the violation, and after the correction has been made, has maintained regulatory compliance for a period of time sufficient to permit a conclusion that the compliance will be maintained for a prolonged period.</p>	<p><b>§ 2800.269. Ban on admissions.</b></p> <p>(a) The Department will ban new admissions to a residence:</p> <p>(1) That has been found to have a Class I violation.</p> <p>(2) That has been found to have a Class II violation that remains uncorrected without good cause 5 days after being cited for the violation.</p> <p>(3) Whose license has been revoked or nonrenewed.</p> <p>(b) The Department may ban new admissions to a residence that has been found to have a repeated Class II violation within the past 2 years.</p> <p>(c) A ban on admissions will remain in effect until the Department determines that the residence has corrected the violation, and after the correction has been made, has maintained regulatory compliance for a period of time sufficient to permit a conclusion that the compliance will be maintained for a prolonged period.</p>	

## Pennsylvania Health Care Association

### Comparison of Personal Care Home Regulation (55 Pa. Code Chapter 2600) and Assisted Living Residence Regulation (55 Pa. Code Chapter 2800)

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Personal Care Home Regulation	Assisted Living Residence Regulation	Differences/Notes
<p><b>§ 2600.270.</b> Correction of violations.</p> <p>The correction of a violation cited under section 1086 of the Public Welfare Code (62 P. S. § 1086) does not preclude the Department from issuing a provisional license based upon the same violation.</p>	<p><b>§ 2800.270. Correction of violations.</b></p> <p>The correction of a violation cited under section 1086 of the Public Welfare Code (62 P.S. § 1086) does not preclude the Department from issuing a provisional license based upon the same violation.</p>	

**APPENDIX A- CHAPTER 2800**  
**ASSISTED LIVING RESIDENT RIGHTS:**  
**DURING RESIDENCY AND DURING DISCHARGE OR TERMINATION OF RESIDENCY**

<i>The following are assisted living resident rights, including the notification of a resident's designated person:</i>		
<b>General</b>		
1. The resident, or a designated person, has the right to rescind the contract for up to 72 hours after the initial dated signature of the contract.	§ 2800.25(h) Resident-residence contract  §2600.25 (e) Resident-home contract	
2. <u><b>Either party has a right to rescind the informed consent agreement within 30 days of execution of the agreement.</b></u>	§ 2800.30(k) Informed consent process	New to ALR setting
<b>Resident Rights</b>		
3. Upon admission, each resident and, if applicable, the resident's designated person, shall be informed of resident rights and the right to lodge complaints without intimidation, retaliation or threats of retaliation by the residence or its staff persons against the reporter. Retaliation includes transfer or discharge from the residence.	§ 2800.41(a) Notification of rights and complaint procedures  § 2600.41(a) Notification of rights and complaint procedures	
4. Notification of rights and complaint procedures shall be communicated in an easily understood manner and in a language understood by or mode of communication used by the resident, and if applicable, the resident's designated person.	§ 2800.41(b) Notification of rights and complaint procedures  §2600.41(b) Notification of rights and complaint procedures	
5. The Department's poster of the list of resident's rights shall be posted in a conspicuous and public place in the residence.	§ 2800.41(c) Notification of rights and complaint procedures  § 2600.41(c) Notification of rights and complaint procedures	
6. A copy of the resident's rights and complaint procedures shall be given to the resident and, if applicable, the resident's designated person upon admission.	§ 2800.41(d) Notification of rights and complaint procedures	



*APPENDIX A- CHAPTER 2800*  
*ASSISTED LIVING RESIDENT RIGHTS:*  
*DURING RESIDENCY AND DURING DISCHARGE OR TERMINATION OF RESIDENCY*

	§2600.41(d) Notification of rights and complaint procedures	
7. A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in subsection (d), or documentation of efforts made to obtain signature, shall be kept in the resident's record.	§ 2800.41(e) Notification of rights and complaint procedures § 2600.41(e) Notification of rights and complaint procedures	
8. A resident may not be discriminated against because of race, color, religious creed, disability, ancestry, sexual orientation, national origin, age or sex.	§ 2800.42(a) Specific rights § 2600.42(a) Specific rights	
9. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way. <b><u>A resident must be free from mental, physical, and sexual abuse and exploitation, neglect, financial exploitation and involuntary seclusion.</u></b>	§ 2800.42(b) Specific rights § 2600.42(b) Specific rights	Last sentence new to ALR setting
10. A resident shall be treated with dignity and respect.	§ 2800.42(c) Specific rights § 2600.42(c) Specific rights	
11. A resident shall be informed of the rules of the residence and given 30 days written notice prior to the effective date of a new residence rule.	§ 2800.42(d) Specific rights § 2600.42(d) Specific rights	
12. A resident shall have access to a telephone in the residence to make calls in privacy. Nontoll calls must be without charge to the resident.	§ 2800.42(e) Specific rights § 2600.42(e) Specific rights	
13. A resident has the right to receive and send mail. 1. Outgoing mail may not be opened or read by staff persons unless the resident requests. 2. Incoming mail may not be opened or read by staff persons unless the resident requests.	§ 2800.42(f)(1) & (2) Specific rights § 2600.42(f)(1) & (2) Specific rights	

*APPENDIX A- CHAPTER 2800*  
*ASSISTED LIVING RESIDENT RIGHTS:*  
*DURING RESIDENCY AND DURING DISCHARGE OR TERMINATION OF RESIDENCY*

14. A resident has the right to communicate privately with and access the local ombudsman.	§ 2800.42(g) Specific rights § 2600.42(g) Specific rights	
15. A resident has the right to practice the religion or faith of the resident's choice, or not to practice any religion or faith.	§ 2800.42(h) Specific rights § 2600.42(h) Specific rights	
16. A resident shall receive assistance in accessing health <u><i>care</i></u> services, <u><i>including supplemental health care services.</i></u>	§ 2800.42(i) Specific rights § 2600.42(i) Specific rights	Bold/italic/underlined language new to ALR setting.
17. A resident shall receive assistance in obtaining and keeping clean, seasonal clothing. A resident's clothing may not be shared with other residents.	§ 2800.42(j) Specific rights § 2600.42(j) Specific rights	
18. A resident and the resident's designated person, and other individuals upon the resident's written approval shall have the right to access, review and request corrections to the resident's record.	§ 2800.42(k) Specific rights § 2600.42(k) Specific rights	
19. A resident has the right to furnish his living unit and purchase, receive, use and retain personal clothing and possessions.	§ 2800.42(l) Specific rights § 2600.42(l) Specific rights	
20. A resident has the right to leave and return to the residence at times consistent with the residence rules and the resident's support plan.	§ 2800.42(m) Specific rights § 2600.42(m) Specific rights	
21. A resident has the right to relocate and to request and receive assistance, from the residence, in relocating to another facility. The assistance must include helping the resident get information about living arrangements, making telephone calls and transferring records.	§ 2800.42(n) Specific rights § 2600.42(n) Specific rights	
22. A resident has the right to freely associate, organize and communicate privately <u><i>with his friends, family, physician, attorney and</i></u> other persons.	§ 2800.42(o) Specific rights § 2600.42(o) Specific rights	Bold/italic/underlined language new to ALR setting.

*APPENDIX A- CHAPTER 2800*  
*ASSISTED LIVING RESIDENT RIGHTS:*  
*DURING RESIDENCY AND DURING DISCHARGE OR TERMINATION OF RESIDENCY*

23. A resident shall be free from restraints.	§ 2800.42(p) Specific rights § 2600.42(p) Specific rights	
24. A resident shall be compensated in accordance with State and Federal labor laws for labor performed on behalf of the residence. Residents may voluntarily and without coercion perform tasks related directly to the resident's personal space or common areas of the residence.	§ 2800.42(q) Specific rights § 2600.42(q) Specific rights	
25. A resident has the right to receive visitors <u><i>at any time provided that the visits do not adversely affect other residents. A residence may adopt reasonable policies and procedures related to visits and access. If the residence adopts those policies and procedures, they will be binding on the residence.</i></u>	§ 2800.42(r) Specific rights § 2600.42(r) Specific rights	Bold/italic/underlined language new to ALR setting.
26. A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.	§ 2800.42(s) Specific rights § 2600.42(s) Specific rights	
27. A resident has the right to file complaints, <u><i>grievances or appeals</i></u> with any individual or agency and recommend changes in policies, residence rules and services of the residence without intimidation, retaliation or threat of discharge.	§ 2800.42(t) Specific rights § 2600.42(t) Specific rights	Bold/italic/underlined language in new to ALR setting.
28. A resident has the right to remain in the residence, as long as it is operating with a license, except as specified in § 2800.228 (relating to transfer and discharge).	§ 2800.42(u) Specific rights § 2600.42(u) Specific rights	
29. A resident has the right to receive services contracted for in the resident-residence contract.	§ 2800.42(v) Specific rights § 2600.42(v) Specific rights	

APPENDIX A- CHAPTER 2800  
ASSISTED LIVING RESIDENT RIGHTS:  
DURING RESIDENCY AND DURING DISCHARGE OR TERMINATION OF RESIDENCY

30. A resident has the right to use both the residence's procedures and external procedures to appeal involuntary discharge.	§ 2800.42(w) Specific rights § 2600.42(w) Specific rights	
31. A resident has the right to a system to safeguard a resident's money and property.	§ 2800.42(x) Specific rights § 2600.42(x) Specific rights	
32. <u>To the extent prominently displayed in the written resident-residence contract, a residence may require residents to use providers of supplemental health care services as provided in § 2800.142 (relating to assistance with medical care and supplemental health care services). When the residence does not designate, the resident may choose the supplemental health care services provider. The actions and procedures utilized by a supplemental health care service provider chosen by a resident must be consistent with the residence's systems for caring for residents. This includes the handling and assisting with the administration of resident's medications, and shall not conflict with Federal laws governing residents.</u>	§ 2800.42(y) Specific rights	New to ALR setting
33. The resident has the right to choose his primary care physician.	§ 2800.42(z) Specific rights § 2600.42(y) Specific rights	
34. A resident may not be deprived of his rights.	§ 2800.43(a) Prohibition against deprivation of rights § 2600.43(a) Prohibition against deprivation of rights	
35. A resident's rights may not be used as a reward or sanction.	§ 2800.43(b) Prohibition against deprivation of rights § 2600.43(b) Prohibition against deprivation of rights	

*APPENDIX A- CHAPTER 2800*  
*ASSISTED LIVING RESIDENT RIGHTS:*  
*DURING RESIDENCY AND DURING DISCHARGE OR TERMINATION OF RESIDENCY*

36. <b><u>Waiver of any resident right shall be void.</u></b>	§ 2800.43(c) Prohibition against deprivation of rights	New to ALR setting
37. Prior to admission, the residence shall inform the resident and the resident's designated person of the right to file and the procedure for filing a complaint with the Department's Assisted Living Residence Licensing Office, local ombudsman or protective services unit in the area agency on aging, the Disability Rights Network or law enforcement agency.	§ 2800.44(a) Complaint procedures § 2600.44(a) Complaint procedures	
38. The residence shall permit and respond to oral and written complaints from any source regarding an alleged violation of resident rights, quality of care or other matter without retaliation or the threat of retaliation.	§ 2800.44(b) Complaint procedures § 2600.44(b) Complaint procedures	
39. If a resident indicates that he wishes to make a written complaint, but needs assistance in reducing the complaint to writing, the residence shall assist the resident in writing the complaint.	§ 2800.44(c) Complaint procedures § 2600.44(c) Complaint procedures	
40. The residence shall ensure investigation and resolution of complaints. The residence shall designate the staff person responsible for receiving complaints and determining the outcome of the complaint. <b><u>The residence shall keep a log of all complaints and the outcomes of the complaints.</u></b>	§ 2800.44(d) Complaint procedures § 2600.44(d) Complaint procedures	Last sentence new to ALR setting
41. Within 2 business days after the submission of a written complaint, a status report shall be provided by the residence to the complainant. If the resident is not the complainant, the resident and the resident's designated person shall receive the status report unless contraindicated by the support plan. The status report must indicate the steps that the residence is taking to investigate and address the complaint.	§ 2800.44(e) Complaint procedures § 2600.44(e) Complaint procedures	
42. Within 7 days after the submission of a written complaint, the residence shall give the complainant and, if applicable, the designated person, a written decision explaining the residence's investigation findings and the action the residence plans to take to resolve the	§ 2800.44(f) Complaint procedures § 2600.44(f) Complaint procedures	

*APPENDIX A- CHAPTER 2800*  
*ASSISTED LIVING RESIDENT RIGHTS:*  
*DURING RESIDENCY AND DURING DISCHARGE OR TERMINATION OF RESIDENCY*

complaint. If the resident is not the complainant, the affected resident shall receive a copy of the decision unless contraindicated by the support plan. If the residence's investigation validates the complaint allegations, a resident who could potentially be harmed or his designated person shall receive a copy of the decision, with the name of the affected resident removed, unless contraindicated by the support plan.		
43. The telephone number of the Department's Assisted Living Residence Licensing Office, the local ombudsman or protective services unit in the area agency on aging, the Disability Rights Network, the local law enforcement agency, the Commonwealth Information Center and the assisted living residence complaint hotline shall be posted in large print in a conspicuous and public place in the residence.	§ 2800.44(g) Complaint procedures § 2600.44(g) Complaint procedures	
44. <u><i>Nothing in this § 2800.44 (relating to complaint procedures) shall affect in any way the right of the resident to file suit or claim for damages.</i></u>	§ 2800.44(h) Complaint procedures	New to ALR setting
<b>Nutrition</b>		
45. <u><i>Residents have the right to purchase groceries and prepare their own food in addition to the three meal plan required in § 2800.220 (b) (relating to service provision) in their living units unless it would be unsafe for them to do so consistent with their support plan.</i></u>	§ 2800.161(h) Nutritional Adequacy	New to ALR setting
<b>Medications</b>		
46. The residence shall educate the resident of the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.	§ 2800.191 Resident Education § 2600.191 Resident Education	

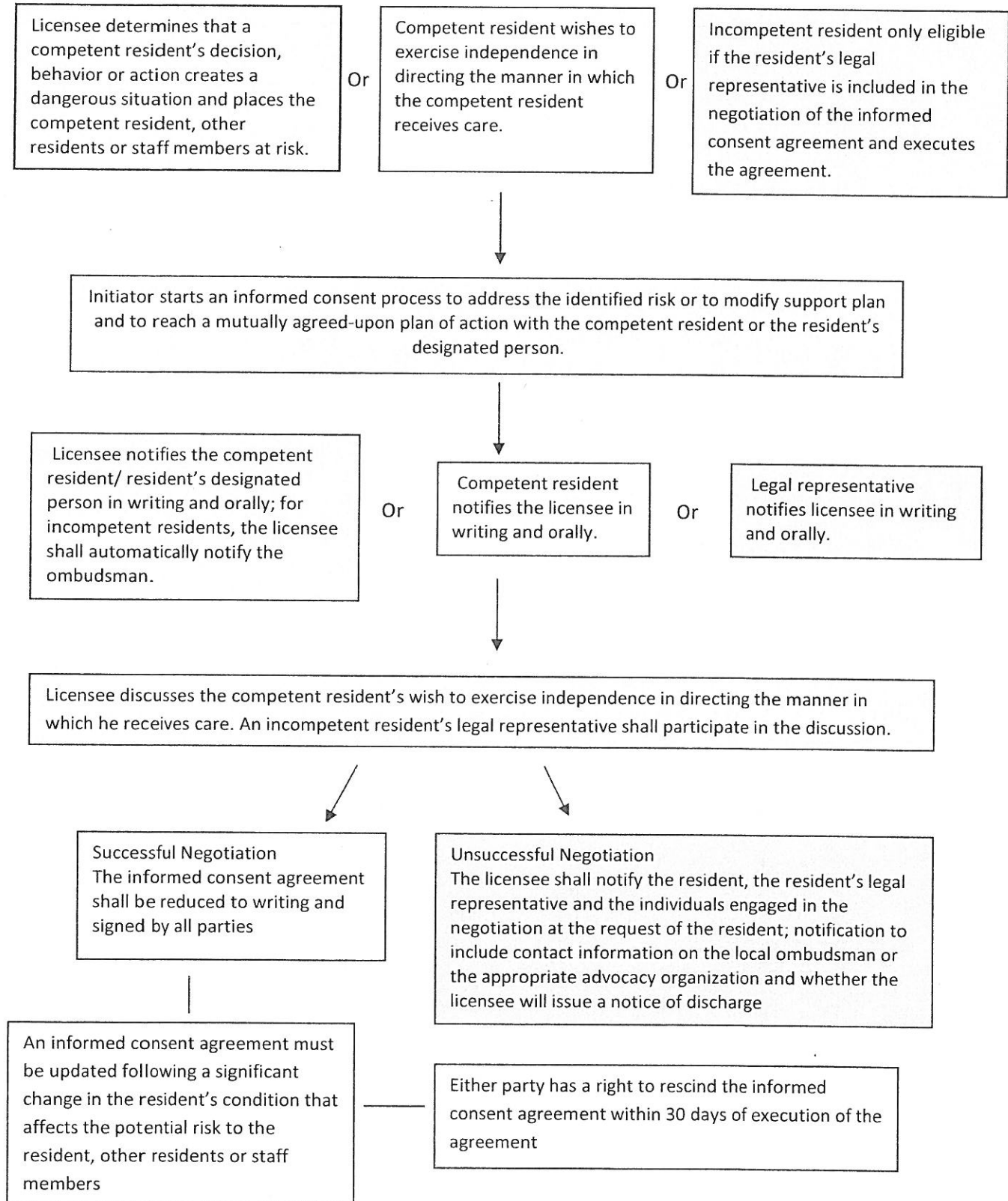
**APPENDIX A- CHAPTER 2800**  
**ASSISTED LIVING RESIDENT RIGHTS:**  
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<b>Services</b>		
47. <u><b>A resident or a designated person has a right to request the review and modification of his support plan.</b></u>	§ 2800.227(j) Development of the final support plan	
In the PCH the home shall provide a copy of the support plan to the resident and the resident's designated person upon request.	§ 2600.227(j) Development of the support plan	
48. If the legal entity chooses to voluntarily close the residence or if the Department has initiated legal action to close the residence, the Department working in conjunction with appropriate local authorities, will offer relocation assistance to the residents. Except in the case of an emergency, each resident may participate in planning the transfer, and shall have the right to choose among the available alternatives after an opportunity to visit the alternative residences. These procedures apply even if the resident is placed in a temporary living situation.	§ 2800.228(f) Transfer and discharge  § 2600.228(f) Transfer and discharge	
<b>Enforcement</b>		
49. If the relocation of residents is due to the failure of the residence to apply for a license, the Department will offer relocation assistance to the residents. This assistance will include each resident's involvement in planning the relocation, except in the case of an emergency. Each resident shall have the right to choose among the available alternatives after an opportunity to visit the alternative residences. These procedures will occur even if the residents are placed in a temporary living situation.	§ 2800.267(a) Relocation of residents  § 2600.267(a) Relocation of residents	

APPENDIX B:  
INFORMED CONSENT PROCESS  
Section 2800.30



### Informed Consent Process



# Informed Consent Process

\$2800.30

Process Phase	Licensee-initiated	Competent Resident-initiated	Incompetent Resident-initiated
Initiation	<p>Licensee determines that a competent resident's decision, behavior or action creates a dangerous situation and places the competent resident, other residents or staff members at risk.</p> <p>Licensee initiates informed consent process to address the identified risk and to reach a mutually agreed-upon plan of action with the competent resident or the resident's designated person.</p>	<p>Competent resident wishes to exercise independence in directing the manner in which the competent resident receives care.</p> <p>Competent resident initiates informed consent process to modify support plan and attempt to reach a mutually agreed-upon plan of action with the licensee.</p>	<p>Incompetent resident only eligible if the resident's legal representative is included in the negotiation of the informed consent agreement and executes the agreement.</p>
Notification	<p>Licensee notifies the competent resident/ resident's designated person in writing and orally; for incompetent residents, the licensee shall automatically notify the ombudsman.</p>	<p>Competent resident notifies the licensee in writing and orally.</p>	<p>Legal representative notifies licensee in writing and orally.</p>
Informed Consent Meeting	<p>Licensee discusses the competent resident's wish to exercise independence in directing the manner in which he receives care.</p>	<p>Licensee discusses the competent resident's wish to exercise independence in directing the manner in which he receives care.</p>	<p>An incompetent resident's legal representative shall participate in the discussion.</p>
Successful Negotiation	<p>The informed consent agreement shall be</p>	<p>The informed consent agreement shall be</p>	<p>The informed consent agreement shall be</p>

Unsuccessful Negotiation	<p>reduced to writing and signed by all parties</p> <p>The licensee shall notify the resident, the resident's legal representative and the individuals engaged in the negotiation at the request of the resident; notification to include contact information on the local ombudsman or the appropriate advocacy organization and whether the licensee will issue a notice of discharge</p>	<p>reduced to writing and signed by all parties</p> <p>The licensee shall notify the resident, the resident's legal representative and the individuals engaged in the negotiation at the request of the resident; notification to include contact information on the local ombudsman or the appropriate advocacy organization and whether the licensee will issue a notice of discharge</p>	<p>reduced to writing and signed by all parties</p> <p>The licensee shall notify the resident, the resident's legal representative and the individuals engaged in the negotiation at the request of the resident; notification to include contact information on the local ombudsman or the appropriate advocacy organization and whether the licensee will issue a notice of discharge</p>
Change in resident's condition	<p>An informed consent agreement must be updated following a significant change in the resident's condition that affects the potential risk to the resident, other residents or staff members</p>	<p>An informed consent agreement must be updated following a significant change in the resident's condition that affects the potential risk to the resident, other residents or staff members</p>	<p>An informed consent agreement must be updated following a significant change in the resident's condition that affects the potential risk to the resident, other residents or staff members</p>
Rescinding the agreement	<p>Either party has a right to rescind the informed consent agreement within 30 days of execution of the agreement</p>	<p>Either party has a right to rescind the informed consent agreement within 30 days of execution of the agreement</p>	<p>Either party has a right to rescind the informed consent agreement within 30 days of execution of the agreement</p>

APPENDIX C:  
APPLICATION FOR LICENSURE



# APPLICATION FOR CERTIFICATE OF COMPLIANCE

(For instructions, see reverse side of the last page.)

## PURPOSE OF APPLICATION

☐ New Facility / Agency

☐ Renewal

Certificate # \_\_\_\_\_

## IDENTIFICATION

<b>1. NAME and ADDRESS OF AGENCY /FACILITY</b> NAME _____ P.O. BOX or NUMBER and STREET _____ CITY _____ ZIP CODE _____ E-Mail Address (if available) _____ PHONE NUMBER _____		<b>2. NAME and ADDRESS OF LEGAL ENTITY</b> NAME _____ P.O. BOX or NUMBER and STREET _____ CITY (and State) _____ ZIP CODE _____ E-mail Address (if available) _____ PHONE NUMBER _____	
<b>3. COUNTY and MUNICIPALITY (CITY TOWNSHIP/BOROUGH)</b>		<b>4. RESPONSIBLE PERSON</b> NAME _____ TITLE _____	
<b>5. TYPE OF AGENCY/FACILITY /SERVICE</b>		<b>6. REQUESTED/LICENSED CAPACITY (Personal Care Homes ONLY)</b>	
<b>7.</b> <input type="checkbox"/> FEDERAL EMPLOYER IDENTIFICATION NUMBER or <input type="checkbox"/> SOCIAL SECURITY NUMBER OF LEGAL ENTITY _____		<b>8. TYPE OF OPERATION</b> <input type="checkbox"/> PROFIT <input type="checkbox"/> NON PROFIT	
<b>TYPE OF OWNERSHIP/CONTROL</b> <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> ASSOCIATION <input type="checkbox"/> CORPORATION <input type="checkbox"/> COUNTY GOVERNMENT <input type="checkbox"/> STATE GOVERNMENT <input type="checkbox"/> OTHER			
<b>10. CONVICTION or NAME A PERPETRATOR</b> (If YES to any of the items 12 through 14 inclusive, explain on a separate sheet of paper) Has the agency/facility (item 1), or Legal Entity (item 2), or the Person Responsible (Operator) (item 4), or the person signing the application ever been denied a Certificate or license, had a Certificate of Compliance or license revoked, or had a Certificate of Compliance or license non-renewed in Pennsylvania or any other state?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
<b>11. HAS THE LEGAL ENTITY, OWNER, OR OPERATOR:</b> ever been convicted of a felony; convicted of a crime involving child abuse, child neglect, moral turpitude, or physical violence; named a perpetrator in an indicated or founded report of child abuse in accordance with the Child Protective Service Law (23 Pa. C.S.Ch. 63) or the Care - Dependent Services Act (18 Pa.C.S. § 2713)?		<input type="checkbox"/>	<input type="checkbox"/>
<b>12. IS THE LEGAL ENTITY, OWNER OR OPERATOR CURRENTLY CHARGED WITH A FELONY OR MISDEMEANOR?</b>		<input type="checkbox"/>	<input type="checkbox"/>

## ATTACHMENTS

If this is an **Initial Application** for a new facility / agency or change of name of legal entity, submit copies of the following documents with this Application.

- **Certificate of Occupancy** ( issued from Department of Health, Department of Labor and Industry or municipality.)
- **Articles of Incorporation** (if the facility or agency is operated by a corporation)
- **State Fictitious Name Approval** (if the facility or agency is operated for profit and fictitious name is used.)

## DECLARATION

(Any false information or statement knowingly given in this application is punishable under Section 4904 of the Pennsylvania Crimes Code)

I understand that the Certificate of Compliance will be issued to me on the condition that I will operate the above-named facility or agency in accordance with the laws of the Commonwealth of Pennsylvania and with the rules and regulations of the Department of Public Welfare; Title VI and Title VII of the Civil Rights Act of 1964; the Age Discrimination Act of 1975; the Rehabilitation Act of 1973 and the Pennsylvania Human Relations Act of 1955, and the American With Disabilities Act of 1990.

Specifically, the above named facility will not permit discrimination of the basis of color, race, religious creed, disability, ancestry, national origin, age or sex in any aspect of service delivery and employment.

I hereby declare that the information given in this application is true to the best of my knowledge.

\_\_\_\_\_  
Print or type - NAME /TITLE  
(where the Legal Entity is a corporation, the individual must be a corporate officer)

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
SIGNATURE OF THE LEGAL ENTITY / REPRESENTATIVE

\_\_\_\_\_  
DATE (mm/dd/yyyy)

# INSTRUCTIONS FOR COMPLETION OF APPLICATION FOR CERTIFICATE OF COMPLIANCE FOR A FACILITY OR AGENCY, PW 633

## PURPOSE OF APPLICATION:

**New Facility:** A new agency or an agency that has had an agency/facility name change, agency/facility address change or a change in the legal entity name. **Renewal:** Any agency/facility applying to renew their existing Certificate of Compliance. The name and address of the Agency/Facility and the name of the legal entity should be the same as it is on the existing Certificate of Compliance. If it is a renewal application supply the Certificate of Compliance number.

**1. NAME, ADDRESS, EMAIL ADDRESS AND TELEPHONE NUMBER OF PHYSICAL SITE OF AGENCY/FACILITY:** Indicate name, address, email address and telephone number of the physical facility or agency where the services will be provided. If the application is for renewal, the name and address of the facility or agency should be the same as on previous application unless there is a change in name or address.

**2. NAME, MAILING ADDRESS, EMAIL ADDRESS AND TELEPHONE NUMBER OF LEGAL ENTITY:** Indicate name of legal entity, for example, the person, partnership, association, organization, corporation or governmental body responsible for the operation of the facility or agency and mailing address, email address and telephone number of legal entity where the mail for the facility is to be delivered.

**3. COUNTY AND MUNICIPALITY/TOWNSHIP/BOROUGH:** Indicate the name of the County in which facility or agency is located. Indicate the municipality/township/borough in which the facility or agency is located.

**4. RESPONSIBLE PERSON:** Indicate the full name and title of the person who is responsible for the daily operation of the facility or agency.

**5. TYPE OF AGENCY/FACILITY/SERVICE:** Use the most specific type applicable -

**Mental Health Facilities:** Community Residential Rehabilitation Service, Crisis Intervention Programs, Family Based Services, Long Term Structured Residence, Partial Hospitalization, Private Psychiatric Hospital, Psychiatric Outpatient Clinic, Psychiatric Rehabilitation Facility, Residential Treatment Facilities Adults.

**Mental Retardation Facilities:** Adult Training Facilities, Center, Community Residential MR Agency, Community Residential MR Large Facility, Family Living Agency, Intermediate Care Facility/Mental Retardation (ICF/MR), Vocational Facility.

**Children, Youth and Families Facilities:** Adoption Services, County Children and Youth Agency, Day Care Center, Day Treatment Program, Foster Family Care Agency Services, Group Day Care Home, Mobile Programs, Non-Secure Residential Services, Outdoor Program, Private Children and Youth Agency, Residential Child Care Facility, Secure Care Program, Secure Detention Facilities, Secure Residential Services, Supervised Independent Living Program, Transitional Living Program.

**Social Programs:** Intermediate Care Facility for Other Related Conditions (ICF/ORC), Personal Care Home.

**6. REQUESTED/LICENSED CAPACITY:** This column applies only to Personal Care Homes. If this is an application for a new facility or renewal fill in requested capacity.

**7. FEDERAL EMPLOYER IDENTIFICATION NUMBER OR SOCIAL SECURITY NUMBER OF LEGAL ENTITY:** Indicate the social security number or FEIN of the person, partnership, association, organization, corporation or governmental body responsible for the operation of the facility or agency.

**8. PROFIT:** Operating with the expectation of providing a financial benefit to someone or something other than the facility or agency itself. The focus is upon the ultimate aim of the enterprise, not the financial results of any particular period of operation. The focus is also upon the particular premises involved and not the legal entity which operates the facility or agency. A non-profit legal entity may be considered as operating a facility or agency for profit if the particular premises involved provides a financial benefit to the parent legal entity. Any legal entity not possessing a certificate of tax exempt status from the Internal Revenue Service will be considered operating for profit unless it provides satisfactory proof otherwise.

**NONPROFIT:** Operating other than for profit. Copy of tax exempt certificate should be submitted with the initial application.

**9. TYPE OF OWNERSHIP/CONTROL:** Fill in type of ownership.

**10. Please answer YES OR NO and explain any YES response on a separate sheet of paper.**

**11. Please answer YES OR NO and explain any YES response on a separate sheet of paper.**

**12. Please answer YES OR NO and explain any YES response on a separate sheet of paper.**

**ATTACHMENTS:** Attach Current Certificate of Occupancy, Articles of Incorporation, State Fictitious Name Approval.

**DECLARATION:** The declaration must be signed by the legal entity. If the legal entity is a partnership, association, or organization, the person authorized to sign such documents must sign. Where the legal entity is a corporation, the signature must be of a corporate officer. Type or print name and title of person signing.



**Department of Public Welfare**  
**Checklist for the Initial Application for a**  
**Certificate of Compliance for a Human Service Setting**

This checklist is designed to assist you in completing the initial application for a Certificate of Compliance to operate a human service setting. If the application packet is not complete when submitted, it will be returned to you to be completed and resubmitted. Each entry may not be necessary for each applicant. If you have questions about any required document, you may call the Bureau of Human Services Licensing at (717) 705-6954 for clarification.

Items necessary to be considered a **complete** application are as follows:

- ☐ **Application for Certificate of Compliance (PW 633)** - Application must be signed by the owner or if a Corporation, by a Corporate officer.
- ☐ **Articles of Incorporation\*** – If the facility or agency is operated by a Corporation, a copy of the Department of State's ***approved*** corporation papers must be included.
- ☐ **Fictitious Name Approval\*** - if the legal entity is for profit and wishes to name the home something other than the owner's or corporation's name, then a copy of the Department of State's ***approved*** fictitious name papers must be included.
- ☐ **Foreign Business\*** - If the legal entity is a Corporation formed in a state other than Pennsylvania, then a copy of the Department of State's ***approved*** authorization to do business in Pennsylvania must be included.
- ☐ **Occupancy Permit\*** – A copy of the ***final or approved*** Occupancy Permit issued from the Department of Health, Department of Labor and Industry, or the local municipality must be included. *(This is not applicable for Family Living Homes, 55 Pa. Code Chapter 6500)*
- ☐ **Application fee** as follows for the number of beds you are requesting to be licensed *(The application fee only applies to Personal Care Homes, 55 Pa. Code Chapter 2600, and Assisted Living Residences, 55 Pa. Code Chapter 2800):*

<u>For Personal Care Homes:</u> <ul style="list-style-type: none"><li>(1) 20 beds or less - \$15.00</li><li>(2) 21 – 50 beds - \$20.00</li><li>(3) 51 – 100 beds - \$30.00</li><li>(4) 101 beds and over - \$50.00</li></ul>	<u>For Assisted Living Residences:</u> <ul style="list-style-type: none"><li>- \$300 License Application Fee</li><li>- \$75 per bed Fee (collected when license is issued)</li><li>- \$150 Application Fee for Special Care Designation</li></ul>
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Please enclose a check or money order made payable to Department of Public Welfare.

- ☐ **Proof of non-profit status\***, if applicable, in the form of a copy of The Department of Treasury's approval of non-profit, § 501(c)(3), status.
- ☐ **Department of Public Welfare's Bureau of Equal Opportunity** - Civil Rights Compliance Questionnaire - Civil Rights approval is required prior to the issuance of a Certificate of Compliance. The Civil Rights Compliance Questionnaire must be sent to the BEO regional office which serves the county in which the facility is located.

**\*Please note that a copy of an application is not acceptable. It must be a copy of the approved document.**  
**The completed Application Packet should be submitted to:**

**Via First Class Mail:**  
Department of Public Welfare  
Bureau of Human Services Licensing  
P.O. Box 2675  
Harrisburg, PA. 17105-2675

**Via Courier:**  
Department of Public Welfare  
Bureau of Human Services Licensing  
Room 623, Health & Welfare Building  
625 Forster Street  
Harrisburg, PA. 17120



**COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF HUMAN SERVICES  
BUREAU OF HUMAN SERVICES LICENSING  
POLICIES AND PROCEDURES  
55 Pa.Code Chapter 2800 – Assisted Living Residences**

**NEW RESIDENCE INSPECTIONS  
SALE or CHANGE OF LEGAL ENTITY INSPECTIONS**

***The following documentation shall be submitted by the human services licensing applicant to the Bureau of Human Services Licensing Headquarters Office prior to scheduling an initial inspection of a proposed new facility or for a sale or change of a legal entity.***

1. Education and training qualifications of the Administrator [§ 2800.53(a)-(b), § 2800.64(a)].
2. Criminal history background checks in accordance with the OAPSA for the owner/operator (applicable if the owner/operator plans on going into the residence; or send documentation stating that the owner/operator will never go into the residence), Administrator and each already hired/identified staff persons and the applicant's policies and procedures for conducting criminal history clearances for all future staff to be hired. For owners/operators who are not residents of Pennsylvania and plan on going into the residence, an FBI criminal history background check must also be provided [§ 2800.51, 52].
3. The planned staffing patterns/shifts/duties of staff hired/to be hired [§ 2800.56(a), § 2800.57(a)-(d)].
4. The educational and training qualifications of staff to be hired [§ 2800.54(a), § 2800.63(a)-(b), § 2800.65(a)-(j), § 2800.182(b), § 2800.190(a)-(b)].
5. A staff training plan for the first 12 months of operation [§ 2800.66(a)-(b), § 2800.65(i)].
6. The floor plan/layout of the building, including all floors/levels of the residence and clearly indicating all internal and external exit paths and exit doors. The floor plan shall indicate the size of each resident living unit (including ceiling height) and each living/activity room in the residence. The floor plan shall indicate the location of each resident and staff bathroom including the number of sinks, toilets and showers/tubs. The floor plan shall indicate the location of kitchens and dining rooms. [§ 2800.98(a)-(b)(1), § 2800.101(b)(1)-(2), (e), § 2800.101(e), § 2800.102(a)-(c), (m), § 2800.122]. The Elevator Certificate of Operation for any elevators in the residence (if applicable) [§ 2800.97]. The Special Care Unit physical site regulations (if applicable) [§ 2800.232(a)-(c)]. *Note: The floor plan/layout is not required for sales or changes in legal entity unless there is a change in use of the physical space.*
7. The residence's policies and procedures for the following: Reportable Incident Policy [§ 2800.16(b)], Confidentiality Policy [§ 2800.17], Quality Management Plan [§ 2800.26(a)-(c)], Resident Rights [§ 2800.41(a)], Complaint Procedures [§ 2800.44(a)], Pools (if applicable) [§ 2800.106], Emergency Preparedness Plan [§ 2800.107(b)], Firearms and Weapons Policy (if applicable) [§ 2800.108(a)-(b), (d)], Inoperable Fire Alarm/Smoke Detector Policy [§ 2800.130(g)], Emergency Medical Plan [§ 2800.143(a)], Smoking Policy (if applicable) [§ 2800.144(b)-(c)], Medication Administration Policy [§ 2800.185(a)-(b), § 2800.188(d)], Description of Services Policy [§ 2800.223(a)-(b)], Discharge/Transfer Policy [§ 2800.228(b)], and Records Policy [§ 2800.254(b)].



8. For Special Care Units (if applicable), the following documentation: Environmental Protection Policy [§ 2800.232(d)-(e)], Lock Approvals [§ 2800.233(a)-(b)], Training [§ 2800.236(a)-(d)], Program Information [§ 2800.237(a)(1)-(6)], Staffing [§ 2800.238], and General SCU Information [§ 2800.239(a), (c)(1)-(22)].
9. The residence's forms for the following: Resident-Residence Contract [§ 2800.25(c)(1)-(13), § 2800.25(e)-(g), § 2800.25(h)-(i), (l), § 2800.109(a), (d)], Resident Rights Poster [§ 2800.41], Fire Drill Record [§ 2800.132(c)], Initial Assessment & Preliminary Support Plan Form [§ 2800.224(a)(4)-(5), (c)(4)-(5)], Assessment Form [§ 2800.225(a)-(b)], Support Plan Form [§ 2800.227(a)-(b)] and Medication Administration Record [§ 2800.187(a)].
10. Compliance with fire retardant mattress requirements [§ 2800.101(j)(1)].
11. Civil Rights Compliance Letter [From Bureau of Equal Opportunity].
12. Documentation showing the residence's water source. If the residence uses public water, the residence should submit a current water bill. If the residence uses private water (well), the residence should submit a permit from the Department of Environmental Protection (DEP) for its water source [§ 2800.18, § 2800.89(c)].
13. Documentation showing the residence's sewer source. If the residence uses public sewer, the residence should submit a current sewage bill. If the residence is not connected to a public sewer system and serves 9 or more residents, the residence should submit written sanitation approval for its sewage system from the local sewage enforcement official of the municipality in which the residence is located [§ 2800.85(f)].
14. A statement from the residence's legal entity listing all licensed human service facilities with which it is affiliated [Including but not limited to parent companies, subsidiaries, partnerships, management agreements; etc.].
15. Affidavit for the sale of a legal entity that is current operating pending approval of a Departmental enforcement action, or previous operator was deemed "not a responsible person" by the Department [An affidavit will be sent to the applicant if applicable].

*Prepared by: T. Pride, 09/2012*



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