

Survey Process for Residential Care Homes

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DPH

February 16, 2023

DPH Long-Term Care Background Search Program: Applicant Background Check Management System (ABCMS): Updates



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Background & Data

- What is the ABCMS?
 - Web-based portal established by DPH
- Who uses it?
 - You! (*Long-term care providers*)
- Why?
 - to process specific applicants as required pursuant to Section 19a-491c
 - to manage these applicants
- Some Data...
 - Fingerprint-based Background checks completed (n = 99,590)

Legislative Related

- Disqualifying offenses have been amended to include “a conviction of any crime described in Section 53a-59a, 53a-60b, 53a-60c, 53a-61a, 53a-321, 53a-322 or 53a-323”* pertaining to:
 - 1st degree, 2nd degree, or 3rd degree assault of an elderly, blind, disabled, or pregnant person or a person with intellectual disability
 - 2nd degree assault with a firearm of an elderly, blind, disabled, or pregnant person or a person with intellectual disability
 - 1st degree, 2nd degree, or 3rd degree abuse of an elderly, blind, or disabled person or a person with intellectual disability

* effective October 1, 2019



Recent System Enhancements

ID Upload Capability

How?

- Attach scanned image of applicant's Photo ID

Why?

- Can decrease DESPP delays during criminal history review process

Payment Report

Where?

- Reports tab

Purpose?

- For applications paid for, this report will show *Fingerprints Taken*

Tips for Users

- Your guidance to applicants:
 - *Encourage applicants to be fingerprinted ASAP*
- When contacting us, if possible, please:
 - *Include application number*
 - *One inquiry = one applicant*

Coming soon... Webinars

- **Topics:**

Refresher Training

New System Enhancements

Speakers: DPH ABCMS Staff

- **Topics from DPH ABCMS Partner Agency:**

Fingerprinting Tips

Rap Sheets 101

Speakers: Department of Emergency Services and Public Protection (DESPP) Staff



Resources: DPH's ABCMS website

- For those wanting to learn more...
 - Training Videos
 - User Manual
 - Legislation
 - Frequently Asked Questions (FAQ) Document
 - Other interesting materials!
- How?
 - Please visit www.ct.gov/dph/ABCMS

Q & A

Questions?





CONNECTICUT DEPARTMENT OF PUBLIC HEALTH



eLicense Review for Residential Care Homes

February 16, 2023

Residential Care Home Renewal

- License renewal applications are completed through the eLicense portal
- Each facility has a unique User ID and Password
- Renewal notices are sent to the email of record approximately 90 days prior to the expiration date
- It is strongly recommended to use a generic email account that multiple users can access (e.g. email@rch.com)

Renewal Notice

This is in regard to the renewal of your license/certificate issued by the Connecticut Department of Public Health.

Facility Type: Residential Care Facility

Number:

Expiration Date:

Online User ID:

Password:

Website: <https://www.license.ct.gov/>

Amount Due: 664.00

Pursuant to Connecticut General Statutes, it is mandatory that you renew your Connecticut license online. Please visit the website listed above, select 'Login' at the top right of the screen and enter the user ID and password listed above. If you are logging on for the first time, you will need to enter a valid email address and answer three (3) security questions. Detailed Instructions are attached.

The licensing and inspection fee required for the renewal of your facility's license must be submitted prior to the issuance of your renewal license.

Failure to comply with all informational requirements will necessitate returning the forms for correction, thereby delaying the issuance of your license. Documents will be returned to the facility for correction only once. The need for additional corrections will require an office visit.

The application materials must be completed within thirty (30) days. If for any reason the forms and/or fee cannot be submitted within this time frame, this office must be notified in writing of the reason for the delay. Please be aware that failure to submit application materials within thirty (30) days will delay the issuance of your license.

Please do not hesitate to contact the Licensure Processing Unit at (860) 509-7444 if you require clarification or any additional information.

Sincerely,
Licensing & Investigations Section
Department of Public Health



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

FACILITY LICENSE & INVESTIGATIONS SECTION

Renewal Instructions

The Department has implemented an online renewal system for all healthcare facility licensing categories.

Please read these instruction carefully as they provide specific instructions as to how to access your account as well as what documents you will be required to upload when filing your application online. Please make sure you have the required documents saved to the device you are using to file your renewal application.

Please go to our website at <https://www.license.ct.gov> and enter the following user ID and password:

User ID:

Password:

First time users of the system are required to validate an email address, answer 3 security questions and change their password. After login, the system will display the 'Change E-mail' screen. Please enter a valid email address in the 'New E-mail' field and enter the password indicated above and select the 'Save' button. The system will then send a validation email to the address entered. Please log out of the system and open up the email account and look for an email from fromdonotreplylicense3@ct.gov. In the validation email, please select the 'Click Here' link. This will direct you back to the system where you may have to enter your login credentials. You will then need to answer the three security questions and update your password.

Once you have validated your email address, answered the security questions and updated your password, please select 'Renewal' under 'More Online Services' at the bottom left corner of the screen. Your facility license number will display in the middle of the screen. Please select the 'Start' button to the left.

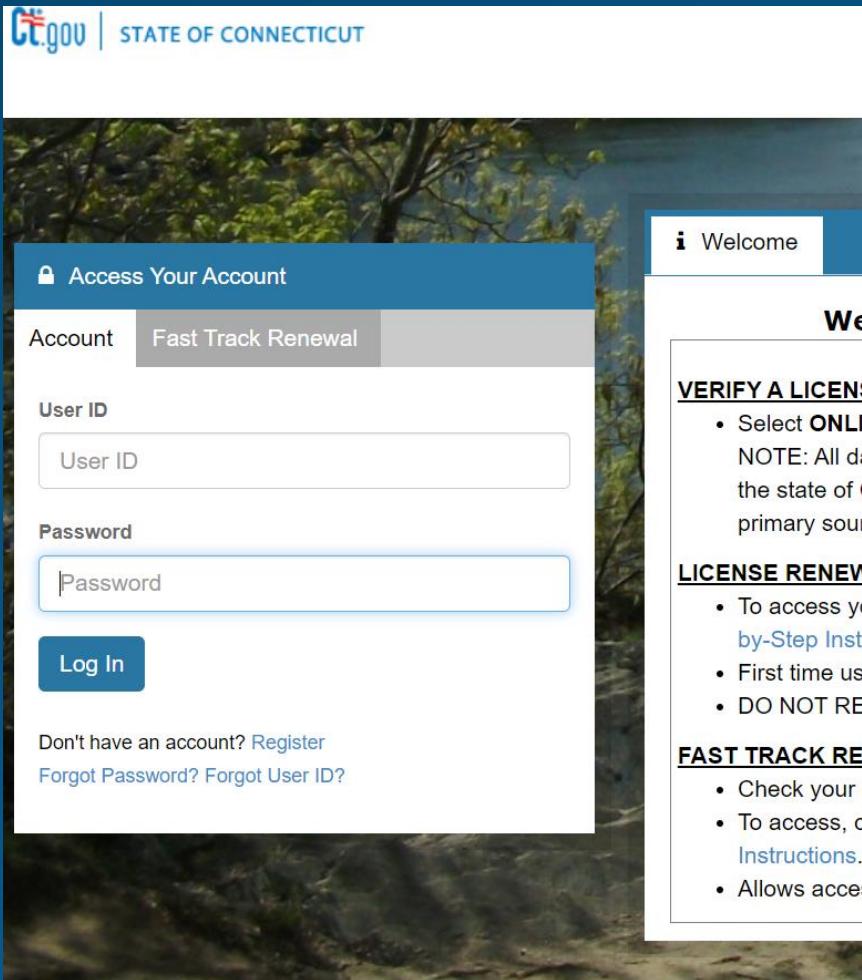
The system will display additional instructions. Please read that information carefully and select the 'Next' button at the bottom left portion of the screen.

The following documents will be required to be uploaded:

Certificate of malpractice and public liability insurance.

Evidence of current compliance with the worker's compensation insurance coverage requirements in the form of one of the following:

- Certificate of self-insurance issued by The Worker's Compensation Commissioner pursuant to Section 31-284 of the Conn. General Statutes; or



Renewal Notice

More Online Services

Activities

[Initial Application](#)

[Renewal](#)

[License Status](#)

[Request License Verification](#)

[File a Complaint](#)

[Print Certificate](#)

What documents are needed to renew a license?

The following documents need to be uploaded to eLicense:

- Certificate of General liability
- Worker's Compensation insurance
- Fire Marshal's Certificate
- List of Officers and Directors
- Names and titles of Staff
- Organizational Chart (Ownership Structure)
- Ownership Form
- Lease

What happens if documents are missing or incomplete?

- The email of record will receive a system generated email notifying of the outstanding requirements.
- You can log in to eLicense and upload the missing out outstanding document

License certificate

When the renewal is processed you will receive a system generated email with the updated certificate.

E-mail Detail [resend now](#) [close](#)

Status	Sent
From	Department of Public Health <DPH@ct.gov>
Recipients	<input type="text"/>
Type	Certificate
Queued	10/4/2022 2:53PM
Created	10/4/2022 4:10PM
Sent	10/4/2022 4:10PM
Subject	<input type="text"/>

Mail Body :

The Department of Public Health, Facility Licensing and Investigations Section has reviewed and approved your application for a Residential Care Facility under the name of You may view your [Certificate](#) here. You should print and display prominently in your place of business. In an effort to be more efficient, the Department will **not** be mailing a hardcopy of this certificate.

Please save a copy of this email with your **User ID** to access your account to update your information.

User ID =

We ask that you maintain and keep your email information with our office current. All renewal notifications and certificates will only be emailed to your last reported email on record.

All licenses, permits and registrations can be verified on our website at <https://www.license.ct.gov/>.

Survey Prep

Sec. 19-13-D6. Homes for the aged and rest homes

- **Inspection utilizing the PHC**
- **Entrance Conference sheet**
- **Re-licensure Inspection Checklist**

RCH Licensure Entrance

1. Introduction of self and team
2. Explain the process
3. Describe the plan of correction process should there be a Violation Letter

Please provide the following information:

- List of all residents and their room numbers
- List of key personnel
- Medication pass times
- House Rules
- Visiting Hours
- Resident Records to include signed receipt of the Bill of Rights, Facility House Rules and the consent to administer medication
- List of residents with a VNA who administers medications
- Resident fund records with receipt and disbursement and consent for managing funds
- Monthly menus for the past 2 months (list of residents on a special diet)
- Meal and snack times
- Recreation calendars past 3 months
- Resident Council meeting minutes past 18 months
- Accident/Incident Reports past 3 years
- Policies (Smoking, Medication Administration, Safety and Emergency procedures, Abuse, Resident Rights, Leave of Absence, Infection Control)
- List of new staff in the past year (ABCMS Verification)
- Staff personnel files include annual evaluations
- List of staff and title
- Medication Administration Certifies
- Certificates of Qualified Food Operator/Serv Safe Certification
- Staffing for past month
- Continuing education Attendance Record

RCH Licensure Inspection Cont'd

Building and Fire Safety

Required documentation and BFSI will inspect:

- Fire alarm system
- Smoke detectors
- Monthly fire drills
- Fire/disaster plan and training
- Generator testing
- Water temperatures
- Kitchen hood records
- Quarterly sprinkler tests/inspection for the last 3 years
- Fire door annual inspections
- Resident call bell system
- Emergency and exit lights
- Inspection of full physical environment

Inspection Form

PUBLIC HEALTH CODE SECTIONS:	19-13-D6(c) - ADMINISTRATION	MET	NOT MET
	(4) Sufficient capable personnel of good character and suitable temperament shall be employed to provide satisfactory care for the residents (REVIEW PERSONNEL FILES).		
	<i>Checklist Item #1:</i> ABCMS background checks		
	<i>Checklist Item #2:</i> Reference checks		
	<i>Checklist Item #3:</i> Annual evaluations		
	<i>Checklist Item #4:</i> If med. Certified , high school diploma or G.E.D.		
	<i>Checklist Item #5:</i> Maintain personnel files at RCH for 2 years after termination		
	<i>Checklist Item #6:</i> Orientation on hire; program to include safety & emergency procedures, resident rights policies & procedures of RCH (i.e. behavior management), food safety; maintain for 2 years after termination		
19-13-D6(c) - ADMINISTRATION	MET	NOT MET	
	(5) The management, personnel, equipment, facilities, sanitation and maintenance of the home shall be such as reasonably to ensure the health, comfort and safety of the residents at all times.		
	<i>Checklist Item #1:</i> Does the facility have a maintenance log?		
19-13-D6(e) - RECORDS	MET	NOT MET	
	A record of each resident, to include the name, residence, age, sex, nearest relative, religion and other necessary information, shall be kept on forms approved by the state department of health.		
	<i>Checklist Item #1:</i> Is there a complete record of each resident with the information listed in the above state regulation?		
	<i>Checklist Item #2:</i> Does each resident record include information about the primary care physician, dentist, etc?		
	<i>Checklist Item #3:</i> Does each resident record include information concerning diagnoses?		
	<i>Checklist Item #4:</i> Does each resident record include information concerning allergies?		
19-13-D6(f) - DIETARY SERVICE	MET	NOT MET	
	(1) Adequate space, equipment and qualified personnel shall be provided to ensure proper selection, storage, preparation and serving of regular and special diets to residents at regularly scheduled hours. (2) Menus shall be prepared, posted and filed and shall meet state department of health requirements for basic nutritional needs. (3) The time scheduling of regular meals and snacks shall be approved by the state department of health. (4) Methods of dishwashing and dish sanitizing, food handling and garbage disposal shall comply with Sec. 19-13-B42.		
	<i>Checklist Item #1:</i> Certificate of qualified food operator		
	<i>Checklist Item #2:</i> Meals shall be available 14 hours between supper and breakfast		

Survey Activities/Review

- (b) Physical Plant**
- (c) Administration**
- (d) Medical supervision**
- (e) Records**
- (f) Dietary service**
- (g) Recreation**
- (h) General Conditions**

**(3) any accident, disaster or other unusual occurrence in
the institution shall be reported within seventy-two (72)
hours to DPH**

- (j) Attendants required: 1:25**
- (m) Administration of Medications**

RCH Violations and Trends

Survey trends “violations”

Violation letter and acceptable plan of correction

The plan of correction shall include:

1. The measures that the institution intends to implement or systemic changes that the institution intends to make to prevent recurrence of each identified issue of noncompliance;
2. The date each such corrective measure or change by the institution is effective;
3. The institution's plan to monitor its quality assessment and performance improvement functions to ensure the corrective measure or systemic change is sustained; and
4. The title of the institution's staff member that is responsible for ensuring the institution's compliance with its plan of correction.

Staffing When Co-Located

CGS 19a-485b

- (a) A residential care home that is colocated with a chronic and convalescent nursing home or a rest home with nursing supervision may request permission of the Department of Public Health to meet the requirements of section 19-13-D6(j) of the Public Health Code concerning attendants in residence from 10:00 p.m. to 7:00 a.m. through the use of shared personnel.
- (b) A residential care home shall maintain temperatures in resident rooms and all other areas used by residents at the minimum temperature of seventy-one degrees Fahrenheit.
- (c) A residential care home shall ensure that the maximum time span between a resident's evening meal and breakfast does not exceed fourteen hours unless a substantial bedtime nourishment is offered by the residential care home.
- (d) On and after July 1, 2011, the Department of Public Health shall no longer (1) require that a person seeking a license to operate a residential care home supply to the department a certificate of physical and mental health, signed by a physician, at the time of an initial or subsequent application for licensure; and (2) approve the time scheduling of regular meals and snacks in residential care homes.
- (e) In accordance with section 19a-36, the Commissioner of Public Health shall amend the Public Health Code in conformity with the provisions of this section.

(P.A. 11-242, S. 56.)

History: P.A. 11-242 effective July 1, 2011.

Sec. 19a-495a. Unlicensed assistive personnel in residential care homes. Certification re administration of medication. Regulations. Nonnursing duties

(a)(1) The Commissioner of Public Health may adopt regulations, as provided in subsection (d) of this section, to require each residential care home, as defined in section 19a-490, that admits residents requiring assistance with medication administration, to (A) designate unlicensed personnel to obtain certification for the administration of medication, and (B) ensure that such unlicensed personnel receive such certification and recertification every three years thereafter.

(2) Any regulations adopted pursuant to this subsection shall establish criteria to be used by such homes in determining (A) the appropriate number of unlicensed personnel who shall obtain such certification and recertification, and (B) training requirements, including ongoing training requirements for such certification and recertification.

(3) Training requirements for initial certification and recertification shall include, but shall not be limited to: Initial orientation, resident rights, identification of the types of medication that may be administered by unlicensed personnel, behavioral management, personal care, nutrition and food safety, and health and safety in general.

(b) Each residential care home, as defined in section 19a-490, shall ensure that an appropriate number of unlicensed personnel, as determined by the residential care home, obtain certification and recertification for the administration of medication. Certification and recertification of such personnel shall be in accordance with any regulations adopted pursuant to this section, except any personnel who obtained certification in the administration of medication on or before June 30, 2015, shall obtain recertification on or before July 1, 2018. Unlicensed personnel obtaining such certification and recertification may administer medications that are not administered by injection to residents of such homes, unless a resident's physician specifies that a medication only be administered by licensed personnel.

(c) On and after October 1, 2007, unlicensed assistive personnel employed in residential care homes, as defined in section 19a-490, may (1) obtain and document residents' blood pressures and temperatures with digital medical instruments that (A) contain internal decision-making electronics, microcomputers or special software that allow the instruments to interpret physiologic signals, and (B) do not require the user to employ any discretion or judgment in their use; (2) obtain and document residents' weight; and (3) assist residents in the use of glucose monitors to obtain and document their blood glucose levels.

(d) The Commissioner of Public Health shall implement policies and procedures necessary to administer the provisions of this section while in the process of adopting such policies and procedures as regulation, provided the commissioner prints notice of intent to adopt regulations in the Connecticut Law Journal not later than twenty days after the date of implementation. Policies and procedures implemented pursuant to this section shall be valid until the time final regulations are adopted.

(P.A. 99-80, S. 1; P.A. 07-76, S. 1; Sept. Sp. Sess. P.A. 09-5, S. 44; P.A. 16-66, S. 34; P.A. 17-146, S. 32; P.A. 19-118, S. 15.)

Medication Administration Certification

- The process has been divided into two phases:
 - Phase 1 is the uniform interagency medication administration training online curriculum and exam (with a classroom option)
 - Phase 2 consists of agency-specific certification and the onsite practicum.

Points to Remember

- The Learner is responsible for contacting the sponsor agency (Residential Care Home, Person in Charge) of their successful completion of the on-line training.
- The sponsor agency arranges for the proctored final exam.
- 100 Question on line exam.
- 85% passing grade.
- Exam is proctored.

Training Program

- Each hiring authority may have specific pre-requisites and those must be satisfied prior to Learners launching the course. Once pre-requisites are satisfied, e.g. criminal background check, the learner will receive a code from their employer to launch the course.
- The learner registers through CT Train. Demographic information is collected as required by CT Train.
- It is expected that the learner will be completing the course independently and will not have support from others to complete the course. During the course the learner will attest to such.
- Once the course is successfully completed, a certificate of completion will be issued from CT Train.

Phase 2

Practicum: Beacon

Practicum

- On-line Exam -
 - Exam is offered:
Thurs 2:30-5 - 2/16, 3/2, 3/16, 3/30, 4/13, 4/27
Tues 10-12:30 - 2/21, 3/7, 3/21, 4/4, 4/18, 5/2
 - Location is:
410 Capital Avenue (DPH)
Basement Concourse (under 450 Capital Ave)
Hartford CT
 - Test Prep Offering - Monday 20th @ 1:30-3 PM
Join Zoom Meeting
<https://beaconhealthoptions.zoom.us/j/97908601867?pwd=cUtLRDNoUXdLKzI4Q0FuV1Z5ZFndz09>
- Meeting ID: 979 0860 1867
- Passcode: 445264
- One tap mobile
 - +16469313860,,97908601867#,,,,*445264#US
 - +13017158592,,97908601867#,,,,*445264#US (Washington DC)
- Initial certification - In person 4 hr training
- Re-certification - virtual for wk of 2/13 & 2/20 only
- Certification valid for 3 years
- Contact information - CTBHPMASTR@carelon.com

Access to PPE and Test Kits

- Link to order PPE:
<https://veoci.com/v/p/195647/workflow/4yzhxn2kh5ps>
- Link to order Test Kits: <https://veoci.com/v/p/195646/workflow/4ccrzbzms5d4>

DPH Contacts

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