Staffing Exception Request for Assisted Living Centers – July 1, 2018
Physically Attached to a Nursing Home or Hospital
17 to 25 beds

To request a staffing exception permitted by the Administrative Rules of South Dakota (ARSD) 44:70:03:02.01(5), the facility must complete the information listed below.

Please place a check by each item to acknowledge compliance. This compliance must be continued throughout the licensing year unless otherwise amended.

**Assisted Living Centers with 17 to 25 beds.** One staff person who is awake is allowable during sleeping hours (10:00 p.m. to 6:00 a.m.) if the following items are met.

___ The building is equipped with a fire alarm system that promptly alerts staff.


___ The building is equipped with an automatic fire alarm dialer as defined in § 9.6.4, Emergency Forces Notification, of NFPA 101 Life Safety Code, 2009 edition to summon the local fire department. **Please list the name, location, and phone number of the fire alarm monitoring agency:**

________________________________________________________________________

___ A fire annunciator panel is provided at the nursing home or hospital nurses station, or the assisted living center fire alarm panel must be connected to the nursing home or hospital fire alarm panel as a separate zone.

___ Residents have an evacuation score which shows them capable of evacuating in, eight minutes or less.

___ A staff call system is available in accordance with ARSD 44:70:02:17(3) and staff carries a device that registers an audible and visual signal if the call system is activated.

___ The building is a single story.
Each resident is capable of self-preservation and requires limited assistance of one staff. ARSD 44:70:01:05 Restrictions of acceptance and retaining of residents and 44:70:04:14 Optional Services.

Facility has a plan in place to increase staffing during times of resident illnesses.

There is no resident residing here who requires two staff for activities for daily living (ADL’s). ARSD 44:70:01:05 Restrictions on acceptance and retaining of residents.

Facility has exit alarms.

The staff person carries a device that can summon assistance from the attached nursing home or hospital.

Attach to this request fire drills for the last six months to verify fire drill evacuation times.

Administrator Signature

Date

Facility name & address