Board of Long-Term Care Administrators

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 200
Henrico, Virginia 23233-1463
Board Room #2

June 19, 2012
9:30 a.m.

AGENDA

CALL TO ORDER

ORDERING OF AGENDA

PUBLIC COMMENT PERIOD

ACCEPTANCE OF MINUTES – Tab 1

- Minutes of Board Meeting – December 13, 2011

SPECIAL CONFERENCES

- Informal Conference Minutes – December 13, 2011
- Telephonic Conference Minutes – December 5, 2011
- Telephonic Conference Minutes – March 23, 2012
- Informal Conference Minutes – May 31, 2012
- Informal Conference Minutes – May 31, 2012
- Informal Conference Minutes – May 31, 2012

AGENCY DIRECTORS REPORT – Dr. Reynolds-Cane

EXECUTIVE DIRECTOR'S REPORT – Lisa R. Hahn - Tab 2

NEW BUSINESS

- Legislative & Regulatory Reports – Elaine Yeatts – **Tab 3**
  - Re-proposed Amendments to Delete the 2014 Fee Increase
  - Periodic Review of 18VAC95-20-10 et seq. Regulations Governing the Practice of Nursing Home Administrators
- Report on NAB Reciprocity Work – Ted LeNeave
- Guidance Document for Practicing with an Expired License – **Lisa R. Hahn – Tab 4**
- Election of Officers

ADJOURNMENT

Tab 1

UNAPPROVED MINUTES
VIRGINIA BOARD OF LONG TERM CARE ADMINISTRATORS
MEETING MINUTES

The Virginia Board of Long Term Care Administrators convened for a board meeting on Tuesday, December 13, 2011 at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, 2nd Floor, Board Room #2, Henrico, Virginia.

The following members were present:

John Randolph Scott, NHA, ALFA, Chair
Thomas J. Orsini, NHA, Vice-Chair
Martha H. Hunt, ALFA
Kathleen R. Fletcher, MSN
Amanda Gannon, NHA
Gracie Bowers, Citizen Member

The following member was absent:

Ted A. LeNeave, NHA

DHP staff present for all or part of the meeting included:

Lisa R. Hahn, Executive Director
Lynne Helmick, Deputy Executive Director
Arne Owens, Agency Chief Deputy Director
Elaine Yeatts, Senior Policy Analyst
Missy Currier, Board Operations Manager

Representative from the Office of the Attorney General present for the meeting:

Amy Marschean, Senior Assistant Attorney General

Quorum:

With 6 members present & consisting of at least one citizen member, a quorum was established.

Guests Present:

Judy Hackler, Virginia Assisted Living Association (VALA)
Elizabeth Carter, Director, DHP Healthcare Workforce Data Center

CALLED TO ORDER

Mr. Scott, Chair, called the Board meeting to order at 10:18 a.m. and began by welcoming new member Amanda Gannon to the board and by asking the board members and staff to introduce themselves.

PUBLIC COMMENT PERIOD

There was no public comment.

ORDERING OF THE AGENDA

The Agenda was approved as ordered.

ACCEPTANCE OF MINUTES

Upon a motion by Tom Orsini and properly seconded by Martha Hunt, the Board voted to accept the following minutes of the board meeting:

- Minutes of Board Meeting – July 7, 2011
- Telephonic Conference Minutes – August 12, 2011
- Informal Conference Minutes – November 7, 2011
- Informal Conference Minutes – November 7, 2011

The motion passed unanimously.

EXECUTIVE DIRECTOR'S REPORT – Lisa R. Hahn

Ms. Hahn began her report by again welcoming Amanda Gannon as the board's newest member and shared that she and Ms. Gannon had the opportunity to conduct a partial board orientation telephonically.

Expenditure & Revenue Summary FY11

The cash balance as of June 30, 2011 was $(215,920); the year to date revenue for Fiscal Year 12 were $19,392; direct and allocated expenditures were $160,872; the ending cash balance as of October 31, 2011 was $(357,400). She concluded this report by stating that she was very concerned about the current financial conditions because the longer the regulations remain unsigned, the worse the financial situation will become.

Ms. Hahn reminded the board that they approved a fee increase during the December 6, 2010 meeting and that the request still remains unsigned at the Secretary's office. Ms. Hahn further explained that according to §54.1-113 of the Code of Virginia, the Department is required to revise their fees on a biennium basis and adjust accordingly so that the fees are not more or less than 10% of money collected but that they are sufficient enough to cover expenses.

Ms. Hahn stated that the majority of the board's expenditures come directly from allocated costs which include investigations, office of the attorney general (OAG), VITA costs, and Agency expenses. She added that the remaining percent of expenditures are the only costs within her direct managing control. Ms. Hahn concluded that Dr. Reynolds-Cane will continue to work with the Secretary's office in an effort to have the regulations approved by the administration for a fee increase.

Discipline Statistics

Ms. Hahn reported as of December 1, 2011 there are currently 33 open cases; 20 cases are in Investigations, 7 cases are in the probable cause level, 4 cases are in APD, and 2 are at the informal stage. Ms. Hahn stated that 14 board Orders were currently being monitored by Ms. Currier who was also serves as the Compliance Case Manager for all of Ms. Hahn's boards.

Licensee Statistics

Ms. Hahn reported the numbers of current licensees in the State of Virginia are as follows: 79 nursing home administrators in training, 80 assisted living facility administrators in training, 1 "acting" assisted living facility administrator in training, 598 assisted living facility administrators, 162 assisted living facility preceptors; 818 nursing home administrators and 225 nursing home preceptors. Ms. Hahn added that as a result of the boards asking for Preceptors to volunteer their contact information for a public list, we currently had about 50 names. Ms. Hahn requested that if anyone knew of any Preceptors that would like to be added to the list to have them contact the board.

Virginia Performs

Ms. Hahn reported the clearance rate for the first quarter ending September 30, 2011 was 90%. During this quarter we received 10 cases and closed 9. The age of our pending case load over 250 days was at 14%; the percent of cases closed within 250 business days was 100%; the customer satisfaction rating achieved was 93%; and licensing within 30 days was at 100%.

Committee Member List

Ms. Hahn mentioned that each member had been provided with a listing of the new committee members that Randy Scott had selected for the upcoming year.

Fall Presentations

Ms. Hahn shared that the following presentations that were made on behalf of the board:

- October 7th – vaLTC Fall Conference in Blacksburg – Missy Currier
- October 12th – VANHA Educational Conference in Roanoke – Randy Scott and Missy Currier

- October 24th VALA Annual Conference in Richmond – Dr. Dianne Reynolds-Cane
- December 6th – VHCA Offices (VCAL Committee Meeting) in Richmond – Lisa Hahn and Missy Currier

NAB Business

Ms. Hahn deferred the report regarding the NAB Mid-Year meeting. She indicated that Ted LeNeave was unable to attend today due to unforeseen circumstances but that he serves on the Reciprocity Committee and he would have an update on their efforts at the next full board meeting.

"Acting" Administrators

Ms. Hahn shared that the board staff had been proactive in preparing for tracking "Acting" ALF Administrators. Some of the procedures already in place are; a new "Acting" ALF application and AIT program acceptance letter, a unique identifiable license number will be issued, and a paper registration with a 150 day expiration date will be issued to be visibly posted at the facility in which the "Acting" is working.

Disciplinary Review Committee

Ms. Hahn spoke about the Investigative Guideline handout provided to the members which was developed to establish protocols for conducting investigations specifically for the Board of Long-Term Care. She explained that many cases encompass both Nursing and LTC and can include a lot of unnecessary documentation for the board. By establishing more specific protocols for investigators, Ms. Hahn hopes to eliminate unnecessary costs and voluminous paperwork for the board to have to sift through. She asked the members to review and let her know if they see any additional changes that should be included.

Other Business

Ms. Hahn stated that the Memorandum of Understanding (MOU) between DSS and the Board had been officially signed by both agencies and was now available under Guidance Document 95-10 on the website. She added that the document provides methods of exchange of information and cooperation in promoting the delivery of quality care and ensuring the protection of the residents of Assisted Living Facilities. Ms. Hahn stated that the Board already had an MOU with the Virginia Department of Health regarding Nursing Homes.

Board Housekeeping

Ms. Hahn reminded everyone that the 2011 Conflict of Interest Forms needed to be completed and returned to Missy Currier by January 4, 2012.

She added that it was time again for the required Conflict of Interest Training. Ms. Hahn explained that because members have found it almost impossible to complete on line, we would offer the course at DHP prior to, or after the next board meeting.

Ms. Hahn polled the board about their willingness to run future meetings by bringing their own personal laptops. She stated that it would be an effort to help reduce costs and eliminate the usage of reams of paper. Ms. Hahn stated that we would also have the agenda and information available on the projection screen. She also added that the board has already reduced costs by sending investigative cases to the review committee via CD rather than large paper stacks and postage costs. The board was in favor of trying out this method at the next meeting in March 2012.

2012 Calendar

Ms. Hahn stated that the 2012 board meetings were scheduled for March 13th, June 19th, September 11th and December 11th and that any meeting could be cancelled due to budgetary reasons or for having a light agenda.

NEW BUSINESS

Workforce Issues – Elizabeth Carter

Ms. Carter gave a PowerPoint presentation on the Department of Health Professions Healthcare Workforce Data Center. The overview included Workforce data availability and limitations, data center background and research, surveys under development and planned publications. Ms. Carter concluded her session by asking for volunteers from the profession who would be interested in workforce issues and who would like to participate on a committee to help develop the surveys. She asked if anyone was interested to please contact Ms. Hahn or her staff.

BREAK

The Board took a recess at 11:20 a.m. and reconvened at 11:30 a.m.

Legislative & Regulatory Reports – Elaine Yeatts

Adoption of the proposed regulations for the oversight of Acting Administrators

Ms. Yeatts stated that according to the new law, the Board was required to promulgate regulations for the oversight of acting administrators of assisted living facilities who have sought licensure but who were not yet licensed as long-term care administrators by a preceptor registered or recognized by the board. Ms. Yeatts reviewed the proposed regulations (attached) with the board and stated that no comments were made during the public comment period.

Upon a motion by Tom Orsini and properly seconded by Martha Hunt, the board voted to adopt the proposed regulations regarding the oversight of Acting Administrators. The motion carried unanimously.

Periodic Review

Ms. Yeatts stated that it was time for a periodic review of 18VAC95-20-10 et seq., Regulations Governing the Practice of Nursing Home Administrators. After discussion, the board made the decision to defer any changes until the next meeting. Ms. Marschean suggested the board consider adding Professional Incompetence under 18VAC95-20-470 – Unprofessional Conduct.

ADJOURNMENT

With all business concluded, the meeting was adjourned at 12:05 p.m.

John Randolph Scott, NHA, ALFA, Chair	Lisa R. Hahn, Executive Director
Date	Date

Attachment

Project 2920 - Proposed

BOARD OF LONG-TERM CARE ADMINISTRATORS

Oversight of acting administrators in an AIT program

Part III

Requirements for Licensure

18VAC95-30-95. ~~Licensure of current administrators.~~ (Repealed.)

~~A. Until January 2, 2009, any person who has served in one of the following positions for the period of one of the four years immediately preceding application for licensure may be licensed by the board:~~

~~1. A full-time administrator of record in accordance with requirements of 22VAC40-72-200, or an assistant administrator in an assisted living facility, as documented on an application for licensure; or~~

~~2. A full-time regional administrator with onsite supervisory responsibilities for one or more assisted living facilities with at least two years of previous experience as the administrator of an assisted living facility as documented on an application for licensure.~~

~~B. Persons who are applying for licensure based on experience as an administrator as specified in subsection A of this section shall document a passing grade on the national credentialing examination for administrators of assisted living facilities approved by the board.~~

18VAC95-30-130. Application package.

A. An application for licensure shall be submitted after the applicant completes the qualifications for licensure.

B. An individual seeking licensure as an assisted living facility administrator or registration as a preceptor shall submit:

1. A completed application as provided by the board;

2. Additional documentation as may be required by the board to determine eligibility of the applicant, to include the most recent survey report if the applicant has been serving as an acting administrator of a facility;

3. The applicable fee; and

4. An attestation that he has read and understands and will remain current with the applicable Virginia laws and the regulations relating to assisted living facilities.

C. With the exception of school transcripts, examination scores, and verifications from other state boards, all parts of the application package shall be submitted at the same time. An incomplete package shall be retained by the board for one year, after which time the application shall be destroyed and a new application and fee shall be required.

18VAC95-30-150. Required hours of training.

A. The ALF AIT program shall consist of hours of continuous training as specified in 18VAC95-30-100 A 1 in a facility as prescribed in 18VAC95-30-170 to be completed within

24 months, except a person in an ALF AIT who has been approved by the board and is serving as an acting administrator shall complete the program within 150 days. An extension may be granted by the board on an individual case basis. The board may reduce the required hours for applicants with certain qualifications as prescribed in subsection B of this section.

B. An ALF AIT applicant with prior health care work experience may request approval to receive hours of credit toward the total hours as follows:

1. An applicant who has been employed full time for one of the past four years immediately prior to application as an assistant administrator in a licensed assisted living facility or nursing home or as a hospital administrator shall complete 320 hours in an ALF AIT;

2. An applicant who holds a license or a multistate licensure privilege as a registered nurse and who has held an administrative level supervisory position in nursing for at least one of the past four consecutive years in a licensed assisted living facility or nursing home shall complete 320 hours in an ALF AIT; or

3. An applicant who holds a license or a multistate licensure privilege as a licensed practical nurse and who has held an administrative level supervisory position in nursing for at least one of the past four consecutive years in a licensed assisted living facility or nursing home shall complete 480 hours in an ALF AIT.

18VAC95-30-180. Preceptors.

A. Training in an ALF AIT program shall be under the supervision of a preceptor who is registered or recognized by a licensing board.

B. To be registered by the board as a preceptor, a person shall:

1. Hold a current, unrestricted Virginia assisted living facility administrator or nursing home administrator license;

2. Be employed full-time as an administrator in a training facility or facilities for a minimum of one of the past four years immediately prior to registration or be a regional administrator with on-site supervisory responsibilities for a training facility or facilities; and

3. Submit an application and fee as prescribed in 18VAC95-30-40. The board may waive such application and fee for a person who is already approved as a preceptor for nursing home licensure.

C. A preceptor shall:

1. Provide direct instruction, planning and evaluation;

2. Be routinely present with the trainee in the training facility; and

3. Continually evaluate the development and experience of the trainee to determine specific areas needed for concentration.

D. A preceptor may supervise no more than two trainees at any one time.

E. A preceptor for a person who is serving as an acting administrator while in an ALF AIT program shall be present in the training facility for face-to-face instruction and review of the trainee's performance for a minimum of two hours per week.

18VAC95-30-190. Reporting requirements.

A. The preceptor shall maintain progress reports on forms prescribed by the board for each month of training. For a person who is serving as an acting administrator while in an ALF AIT program, the preceptor shall include in the progress report evidence of face-to-face instruction and review for a minimum of two hours per week.

B. The trainee's certificate of completion plus the accumulated original monthly reports shall be submitted by the preceptor to the board within 30 days following the completion of the program. For a trainee who is serving as an acting administrator while in an ALF AIT program, the certificate of completion and reports shall be submitted to the board within five business days of completion of the program.

18VAC95-30-201. Administrator-in-training program for acting administrators.

A. A person who is in an ALF AIT program while serving as an acting administrator, pursuant to § 54.1-3103.1 of the Code of Virginia, shall be identified on his nametag as an acting administrator-in-training.

B. The facility shall post the certificate issued by the board for the acting administrator and a copy of the license of the preceptor in a place conspicuous to the public.

Tab 2

Virgina Department of Health Professions
Cash Balance
As of April 30, 2012

	114- Long Term Care Administrators
Cash Balance as of June 30, 2011	$ (215,920)
YTD FY12 Revenue	356,102
Less: YTD FY12 Direct and In-Direct Expenditures	385,219
Board Cash Balance as of April 30, 2012	$ (245,037)

Virginia Dept. of Health Professions
Revenue and Expenditures Summary
July 1, 2011 through April 30, 2012

	114- Long-Term Care Administrat			
	Jul '11 - Apr 12	Budget	$ Over Budget	% of Budget
Revenue				
2400 · Fee Revenue				
2401 · Application Fee	43,085.00	46,450.00	-3,365.00	92.76%
2406 · License & Renewal Fee	308,680.00	309,000.00	-320.00	99.9%
2407 · Dup. License Certificate Fee	140.00	75.00	65.00	186.67%
2409 · Board Endorsement - Out	1,450.00	750.00	700.00	193.33%
2421 · Monetary Penalty & Late Fees	2,220.00	955.00	1,265.00	232.46%
2432 · Misc. Fee (Bad Check Fee)	35.00			
Total 2400 · Fee Revenue	355,610.00	357,230.00	-1,620.00	99.55%
3000 · Sales of Prop. & Commodities				
3020 · Misc. Sales-Dishonored Payments	0.00			
Total 3000 · Sales of Prop. & Commodities	0.00			
9000 · Other Revenue				
9084 · Refund- Prior Yr Disb	491.55			
Total 9000 · Other Revenue	491.55			
Total Revenue	356,101.55	357,230.00	-1,128.45	99.68%
Expenditures				
1100 · Personal Services				
1110 · Employee Benefits				
1111 · Employer Retirement Contrib.	5,016.52	5,122.47	-105.95	97.93%
1112 · Fed Old-Age Ins- Sal St Emp	5,232.32	5,955.46	-723.14	87.86%
1113 · Fed Old-Age Ins- Wage Earners	0.00	690.00	-690.00	0.0%
1114 · Group Insurance	724.33	794.06	-69.73	91.22%
1115 · Medical/Hospitalization Ins.	6,838.65	7,214.40	-375.75	94.79%
1116 · Retiree Medical/Hospitalizatn	702.96	770.71	-67.75	91.21%
1117 · Long term Disability Ins	468.71	513.80	-45.09	91.22%
Total 1110 · Employee Benefits	18,983.49	21,060.90	-2,077.41	90.14%
1120 · Salaries				
1123 · Salaries, Classified	71,013.06	77,849.10	-6,836.04	91.22%
Total 1120 · Salaries	71,013.06	77,849.10	-6,836.04	91.22%
1130 · Special Payments				
1131 · Bonuses and Incentives	0.00	0.00	0.00	0.0%
1138 · Deferred Compnstn Match Pmts	619.50	768.00	-148.50	80.66%
Total 1130 · Special Payments	619.50	768.00	-148.50	80.66%
1140 · Wages				
1141 · Wages, General	0.00	9,011.00	-9,011.00	0.0%
Total 1140 · Wages	0.00	9,011.00	-9,011.00	0.0%
1160 · Terminatn Personal Svce Costs				
1165 · Employee Retirement Contributio	968.34	969.00	-0.66	99.93%
Total 1160 · Terminatn Personal Svce Costs	968.34	969.00	-0.66	99.93%
Total 1100 · Personal Services	91,584.39	109,658.00	-18,073.61	83.52%

Virginia Dept. of Health Professions
Revenue and Expenditures Summary
July 1, 2011 through April 30, 2012

	114- Long-Term Care Administrat			
	Jul '11 - Apr 12	Budget	$ Over Budget	% of Budget
1200 · Contractual Services				
1210 · Communication Services				
1211 · Express Services	8.44	25.00	-16.56	33.76%
1212 · Outbound Freight Services	0.00	10.00	-10.00	0.0%
1214 · Postal Services	1,132.20	1,300.00	-167.80	87.09%
1215 · Printing Services	0.00	500.00	-500.00	0.0%
1216 · Telecommunications Svcs (DIT)	724.75	115.00	609.75	630.22%
Total 1210 · Communication Services	1,865.39	1,950.00	-84.61	95.66%
1220 · Employee Development Services				
1221 · Organization Memberships	1,200.00	1,200.00	0.00	100.0%
1224 · Emp Trning Courses, Wkshp & Cnf	2.11			
1225 · Employee Tuition Reimbursement	315.00			
Total 1220 · Employee Development Services	1,517.11	1,200.00	317.11	126.43%
1240 · Mgmnt and Informational Svcs				
1242 · Fiscal Services	4,753.27	7,990.00	-3,236.73	59.49%
1244 · Management Services	13.10			
1247 · Legal Services	111.15			
Total 1240 · Mgmnt and Informational Svcs	4,877.52	7,990.00	-3,112.48	61.05%
1250 · Repair and Maintenance Svcs				
1251 · Custodial Services	0.09			
1253 · Equip Repair & Maintenance	13.40			
Total 1250 · Repair and Maintenance Svcs	13.49			
1260 · Support Services				
1264 · Food & Dietary Services	493.16	600.00	-106.84	82.19%
1266 · Manual Labor Services	266.21	150.00	116.21	177.47%
1267 · Production Services	2,217.16	3,300.00	-1,082.84	67.19%
1268 · Skilled Services	2,317.50	2,741.00	-423.50	84.55%
Total 1260 · Support Services	5,294.03	6,791.00	-1,496.97	77.96%
1280 · Transportation Services				
1282 · Travel, Personal Vehicle	1,109.91	2,680.00	-1,570.09	41.42%
1283 · Travel, Public Carriers	176.30			
1285 · Travel, Subsistence & Lodging	48.00	800.00	-752.00	6.0%
1288 · Trvl, Meal Reimb- Not Rprtble	328.00	400.00	-72.00	82.0%
Total 1280 · Transportation Services	1,662.21	3,880.00	-2,217.79	42.84%
Total 1200 · Contractual Services	15,229.75	21,811.00	-6,581.25	69.83%
1300 · Supplies And Materials				
1310 · Administrative Supplies				
1311 · Apparel Supplies	3.56			
1312 · Office Supplies	226.36	400.00	-173.64	56.59%
1313 · Stationery and Forms	48.05	100.00	-51.95	48.05%
Total 1310 · Administrative Supplies	277.97	500.00	-222.03	55.59%
1320 · Energy Supplies				

Virginia Dept. of Health Professions
Revenue and Expenditures Summary
July 1, 2011 through April 30, 2012

	114- Long-Term Care Administrat			
	Jul '11 - Apr 12	Budget	$ Over Budget	% of Budget
1323 · Gasoline	112.85			
Total 1320 · Energy Supplies	112.85			
1350 · Repair and Maint. Supplies				
1352 · Custodial Rep & Maint Mat'ls	1.64			
Total 1350 · Repair and Maint. Supplies	1.64			
1360 · Residential Supplies				
1363 · Food Service Supplies	2.10	25.00	-22.90	8.4%
Total 1360 · Residential Supplies	2.10	25.00	-22.90	8.4%
1370 · Specific Use Supplies				
1373 · Computer Operating Supplies	6.00			
Total 1370 · Specific Use Supplies	6.00			
Total 1300 · Supplies And Materials	400.56	525.00	-124.44	76.3%
1400 · Transfer Payments				
1410 · Awards, Contrib., and Claims				
1413 · Premiums	120.00	200.00	-80.00	60.0%
1415 · Unemployment Compnsatn Reimb	0.00	100.00	-100.00	0.0%
Total 1410 · Awards, Contrib., and Claims	120.00	300.00	-180.00	40.0%
Total 1400 · Transfer Payments	120.00	300.00	-180.00	40.0%
1500 · Continuous Charges				
1510 · Insurance-Fixed Assets				
1516 · Property Insurance	24.12	23.00	1.12	104.87%
1510 · Insurance-Fixed Assets - Other	0.00	0.00	0.00	0.0%
Total 1510 · Insurance-Fixed Assets	24.12	23.00	1.12	104.87%
1530 · Operating Lease Payments				
1534 · Equipment Rentals	0.00	0.00	0.00	0.0%
1539 · Building Rentals - Non State	9,309.50	11,177.00	-1,867.50	83.29%
Total 1530 · Operating Lease Payments	9,309.50	11,177.00	-1,867.50	83.29%
1550 · Insurance-Operations				
1551 · General Liability Insurance	86.56	82.00	4.56	105.56%
1554 · Surety Bonds	5.11	5.00	0.11	102.2%
Total 1550 · Insurance-Operations	91.67	87.00	4.67	105.37%
Total 1500 · Continuous Charges	9,425.29	11,287.00	-1,861.71	83.51%
2200 · Equipment Expenditures				
Electronic & Photo Equip Impr	0.47			
2210 · Computer Equipment				
2218 · Computer Software Purchases	184.00			
Total 2210 · Computer Equipment	184.00			
2260 · Office Equipment				
2261 · Office Appurtenances	6.40			

Virginia Dept. of Health Professions
Revenue and Expenditures Summary
July 1, 2011 through April 30, 2012

	114- Long-Term Care Administrat			
	Jul '11 - Apr 12	Budget	$ Over Budget	% of Budget
2262 · Office Furniture	0.00	50.00	-50.00	0.0%
2263 · Office Incidentals	41.15			
2264 · Office Machines	0.00	55.00	-55.00	0.0%
Total 2260 · Office Equipment	47.55	105.00	-57.45	45.29%
Total 2200 · Equipment Expenditures	232.02	105.00	127.02	220.97%
Total Direct Expenditures	116,992.01	143,686.00	-26,693.99	81.42%
9001 · Allocated Expenditures				
9206 · Funeral\LTCA\PT	65,860.07	76,898.98	-11,038.91	85.65%
9301 · DP Operations & Equipment	58,412.23	126,416.64	-68,004.41	46.21%
9302 · Human Resources	10,129.37	11,930.52	-1,801.15	84.9%
9303 · Finance	16,342.67	20,225.28	-3,882.61	80.8%
9304 · Director's Office	8,848.93	11,147.76	-2,298.83	79.38%
9305 · Enforcement	73,924.93	139,405.92	-65,480.99	53.03%
9306 · Administrative Proceedings	6,316.81	22,566.12	-16,249.31	27.99%
9307 · Impaired Practitioners	138.19	117.12	21.07	117.99%
9308 · Attorney General	17,370.64	17,517.12	-146.48	99.16%
9309 · Board of Health Professions	6,035.05	8,064.72	-2,029.67	74.83%
9311 · Moving Costs	0.00	881.41	-881.41	0.0%
9313 · Emp. Recognition Program	82.05	401.16	-319.11	20.45%
9314 · Conference Center	142.76	688.56	-545.80	20.73%
9315 · Pgm Devlpmnt & Implmentn	3,898.90	4,911.36	-1,012.46	79.39%
987900 · Cash Trsfr Out- Appr Act Pt. 3	723.90	1,464.96	-741.06	49.41%
Total 9001 · Allocated Expenditures	268,226.50	442,637.63	-174,411.13	60.6%
Total Direct and Allocated Expenditures	385,218.51	586,323.63	-201,105.12	65.7%
Net Cash Surplus\Shortfall	-29,116.96	-229,093.63	199,976.67	12.71%

Long-Term Care Administrators

Discipline Statistics	***May 2012***
Investigations	*12*
Probable Cause	*6*
APD	*0*
Informal	*6*
Formal	*0*
Total	***24***

Long Term Care Administrators

License Count Report *May 2012*

NHA Administrator in Training	*76*
ALF Administrator in Training	*86*
"Acting" ALF Administrator in Training	*1*
Nursing Home Administrator	*798*
Assisted Living Facility Administrator	*590*
Nursing Home Preceptor	*221*
Assisted Living Facility Preceptor	*160*
Total	***1,932***

Board of Long-Term Care Administrators
Revenue and Expenditures Projections
FY12 - FY14

Revised Data 6-2012

	FY13 Licensees	FY14 Licensees	FY13 & FY14 Revenue	Current Fees
Renewal Fee:				
Nursing Home Administrator	800	800	180,000	225
Assisted Living Administrator	598	598	134,550	225
Nursing Home Preceptor	225	225	11,250	50
ALA Preceptor	162	162	8,100	50
Application Fee:				
NH Administrators	60	60	12,000	200
NH Preceptor	10	10	500	50
Administrator In Training	35	35	6,475	185
Assisted Living Administrator-Preceptor Application	25	25	1,250	50
Assisted Living Administrator-Application	35	35	7,000	200
Endorsement - Out				
NH Administrators	35	35	875	25
Late Fee	35	35	2,275	65
Duplicate Licensee	7	7	105	15
Reinstatement	8	8	2,520	315
Reinstatement after Discipline			-	315
Returned Check Fee			-	35
Total			366,900	

Cash Balance as of June 30, 2009	$ 16,929
FY10 Revenue	354,270
FY10 Direct and In-Direct Expenditures & Cash Transfers	470,144
Cash Balance as of June 30, 2010	(98,946)

Cash Balance as of June 30, 2010	(98,946)
FY11 Revenue	359,455
FY11 Direct and In-Direct Expenditures	476,429
Cash Balance as of June 30, 2011	(215,920)

Cash Balance as of June 30, 2011	(215,920)
Budget FY12 Revenue	357,230
Projected FY12 Direct and In-Direct Expenditures	457,955
Projected Cash Balance as of June 30, 2012	(316,645)

Projected Cash Balance as of June 30, 2012	(316,645)
Projected FY13 Revenue	366,900
Projected FY13 Direct and In-Direct Expenditures	513,400
Projected Cash Balance as of June 30, 2013	(463,145)

Projected Cash Balance as of June 30, 2013	(463,145)
Projected FY14 Revenue	366,900
Projected FY14 Direct and In-Direct Expenditures	513,400
Projected Cash Balance as of June 30, 2014	(609,645)

Board of Long-Term Care Administrators
Revenue and Expenditures Projections
FY12 - FY14

Revised Data 6-2012

	FY13 Licensees	FY14 Licensees	FY13 Revenue	FY14 Revenue	Current Fees	FY14 Proposed Fees I ***
Renewal Fee:						
Nursing Home Administrator	800	800	180,000	252,000	225	315
Assisted Living Administrator	598	598	134,550	188,370	225	315
Nursing Home Preceptor	225	225	11,250	14,625	50	65
ALA Preceptor	162	162	8,100	10,530	50	65
Application Fee:						
NH Administrators	60	60	12,000	18,900	200	315
NH Preceptor	10	10	500	650	50	65
Administrator In Training	35	35	6,475	7,525	185	215
Assisted Living Administrator-Preceptor Application	25	25	1,250	1,625	50	65
Assisted Living Administrator-Application	35	35	7,000	11,025	200	315
Endorsement - Out						
NH Administrators	35	35	875	1,225	25	35
Late Fee	35	35	2,275	3,850	65	110
Duplicate Licensee	7	7	105	175	15	25
Reinstatement	8	8	2,520	3,480	315	435
Reinstatement after Discipline			-	-	315	1000
Returned Check Fee			-	-	35	35
Total			366,900	513,980		

Cash Balance as of June 30, 2009	$ 16,929
FY10 Revenue	354,270
FY10 Direct and In-Direct Expenditures & Cash Transfers	470,144
Cash Balance as of June 30, 2010	(98,946)

Cash Balance as of June 30, 2010	(98,946)
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Budget FY12 Revenue	357,230
Projected FY12 Direct and In-Direct Expenditures	457,955
Projected Cash Balance as of June 30, 2012	(316,645)

Projected Cash Balance as of June 30, 2012	(316,645)
Projected FY13 Revenue	366,900
Projected FY13 Direct and In-Direct Expenditures	513,400
Projected Cash Balance as of June 30, 2013	(463,145)

Projected Cash Balance as of June 30, 2013	(463,145)
Projected FY14 Revenue	513,980
Projected FY14 Direct and In-Direct Expenditures	513,400
Projected Cash Balance as of June 30, 2014	(462,565)

****** Proposed fees effective March 2014 Renewals***

DHP
Board Of Long-Term Care Administrators Selected Cash Balances
January 2009 - April 30, 2012

2009		
January	(40,181)	
February	12,403	
March	75,236	
April	59,423	
May	30,533	
June	16,929	*End of fiscal year*
September	(84,424)	
October	(115,311)	
November	(148,358)	
December	(185,255)	
2010		
January	(224,579)	
February	(134,796)	
March	(3,282)	
April	(30,418)	
May	(62,143)	
June	(98,946)	*End of fiscal year*
September	(210,711)	
October	(251,982)	
November	(294,113)	
December	(331,204)	
2011		
January	(375,363)	
February	(301,261)	
March	(143,973)	
April	(165,786)	
May	(200,096)	
June	(215,920)	*End of fiscal year*
September	(324,630)	
October	(357,400)	
November	(385,672)	
December	(422,518)	
2012		
January	(457,481)	
February	(364,633)	
March	(223,330)	
April	(245,037)	

Virginia Department of Health Professions

Patient Care Disciplinary Case Processing Times: Quarterly Performance Measurement, Q3 2008 - Q3 2012

Dianne Reynolds-Cane, M.D.
Director

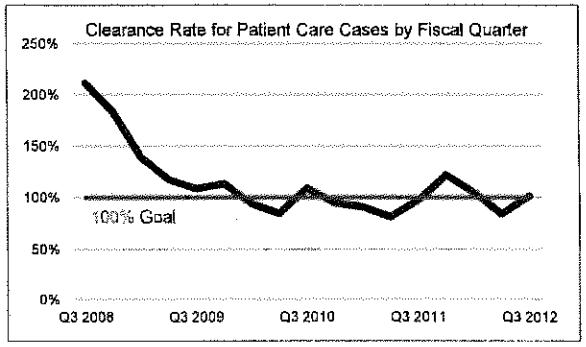
"To ensure safe and competent patient care by licensing health professionals, enforcing standards of practice, and providing information to health care practitioners and the public."
DHP Mission Statement

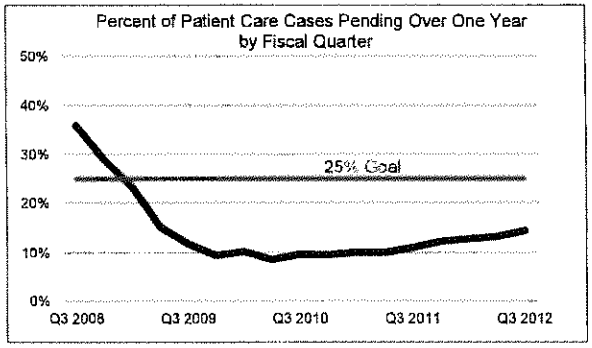
In order to uphold its mission relating to discipline, DHP continually assesses and reports on performance. Extensive trend information is provided on the DHP website, in biennial reports, and, most recently, on Virginia Performs through Key Performance Measures (KPMs). KPMs offer a concise, balanced, and data-based way to measure disciplinary case processing. These three measures, taken together, enable staff to identify and focus on areas of greatest importance in managing the disciplinary caseload; Clearance Rate, Age of Pending Caseload and Time to Disposition uphold the objectives of the DHP mission statement. The following pages show the KPMs by board, listed in order by caseload volume; volume is defined as the number of cases received during the previous 4 quarters. In addition, readers should be aware that vertical scales on the line charts change, both across boards and measures, in order to accommodate varying degrees of data fluctuation.

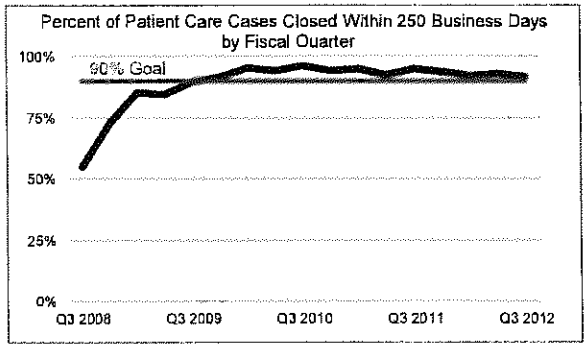
Clearance Rate - the number of closed cases as a percentage of the number of received cases. A 100% clearance rate means that the agency is closing the same number of cases as it receives each quarter. DHP's goal is to maintain a 100% clearance rate of allegations of misconduct through the end of FY 2012. The current quarter's clearance rate is 101%, with 985 patient care cases received and 998 closed.

Age of Pending Caseload - the percent of open patient care cases over 250 business days old. This measure tracks the backlog of patient care cases older than 250 business days to aid management in providing specific closure targets. The goal is to maintain the percentage of open patient care cases older than 250 business days at no more than 25% through the end of FY 2012. That goal continues to be acheived with the percent of cases pending over 250 business days dropping dramatically from 45% to 15%. For the last quarter shown, there were 1817 patient care cases pending, with 264 pending over 250 business days.

Time to Disposition - the percent of patient care cases closed within 250 business days for cases received within the preceding eight quarters. This moving eight-quarter window approach captures the vast majority of cases closed in a given quarter and effectively removes any undue influence of the oldest cases on the measure. The goal is to resolve 90% of patient care cases within 250 business days through the end of FY 2012. That goal continues to be acheived with 92% percent of patient care cases being resolved within 250 business days this past quarter. During the last quarter, there were 986 patient care cases closed, with 904 closed within 250 business days.







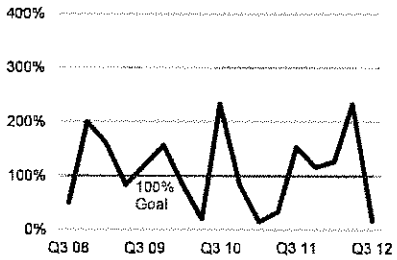
Submitted: 4/4/2012

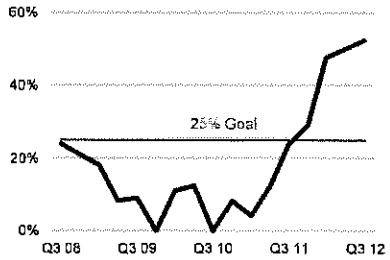
Prepared by: VisualResearch, Inc.

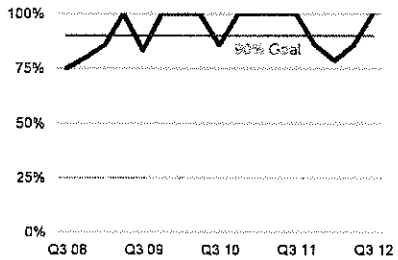
Virginia Department of Health Professions - Patient Care Disciplinary Case Processing Times, by Board

Clearance Rate | **Age of Pending Caseload** (percent of cases pending over one year) | **Percent Closed in 250 Business Days**

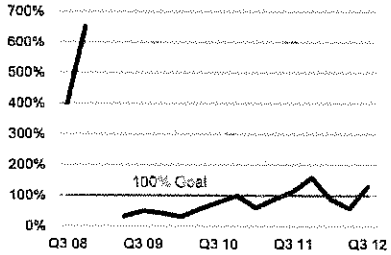
Psychology - In Q3 2012, the clearance rate was 17%, the Pending Caseload older than 250 business days was 52% and the percent closed within 250 business days was 100%.
Q3 2012 Caseloads:
Received=6, Closed=1
Pending over 250 days=11
Closed within 250 days=1

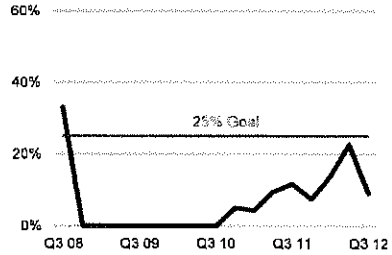


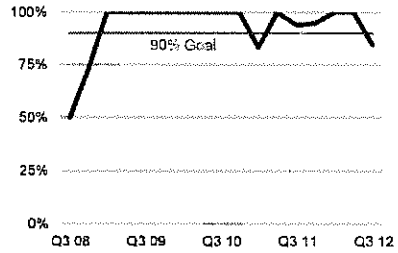




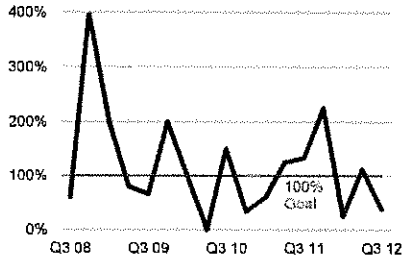
Long-Term Care Administrators - In Q3 2012, the clearance rate was 130%, the Pending Caseload older than 250 business days was 9% and the percent closed within 250 business days was 85%.
Q3 2012 Caseloads:
Received=10, Closed=13
Pending over 250 days=2
Closed within 250 days=11

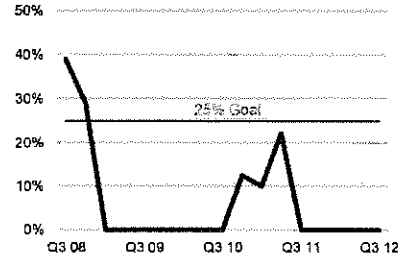


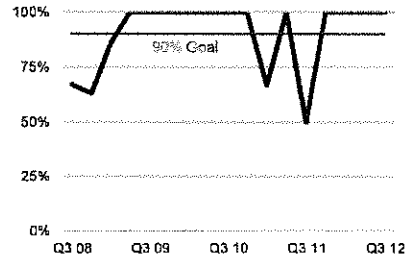




Optometry - In Q3 2012, the clearance rate was 38%, the Pending Caseload older than 250 business days was 0% and the percent closed within 250 business days was 100%.
Q3 2012 Caseloads:
Received=8, Closed=3
Pending over 250 days=0
Closed within 250 days=3







Note: Vertical scales on line charts change, both across boards and measures, in order to accommodate varying degrees of data fluctuation.

Submitted: 4/4/2012

Prepared by: VisualResearch, Inc.

COMMONWEALTH of VIRGINIA

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January 6, 2012

TO: Health Regulatory Board Members
Executive Directors
Executive Leadership Team

FROM: Dianne L. Reynolds, Cane, M.D.
Director, Department of Health Professions

RE: Notes from *Great By Choice: Uncertainty, Chaos, and Luck—Why Some Thrive Despite Them All*

Last month Governor Robert McDonnell convened an Agency Head Summit at the University of Richmond where participants joined in an inspiring discussion with bestselling business author, James Collins, who along with Morten T. Hansen, wrote Great By Choice: Uncertainty, Chaos, and Luck—Why Some Thrive Despite Them All. You may recall his previous seminal work, Good To Great.

Based on his uplifting presentation, as told through the findings of a nine year data-driven study regarding the principles of success for building a great business enterprise during challenging times, I want to share with you select highlights of key discussion points.

Dynamic changes in Virginia's healthcare workforce, shifts in the Commonwealth's population, and the economic times in which we live, help make the work of the boards that compose DHP a critical factor in the health and wellbeing of our constituents statewide. There has never been a more important time to gain a fresh perspective on our work to ensure safe and competent patient care by licensing health professionals, enforcing standards of practice, and providing information to healthcare practitioners and the public.

My favorite quote from James Collins is, "Even in a chaotic and uncertain world, greatness happens by choice, not chance." I hope this brief overview of Great by Choice encourages you to read the book and inspires your best thinking at board meetings and hearings in 2012 and beyond.

Consider the following points of view described by James Collins:

- "Greatness is a conscious choice and does not result from chance circumstance."
- Given the uncertainty of the days in which we now live, it is tempting to believe the last 50 years of relative tranquility were usual, though disruption is actually the norm.

- "Humility is actually the X factor of leadership."
- Drive and ambition must be tempered to provide servant leadership.
- "Leadership exists only when people choose to follow [a leader] when they do not have to …."
- Good leaders share a set of deeply held core values that allow them to be consistent in a changing world
- Government agencies represent consistency in government though they often operate in an inconsistent or changing world

Mr. Collins also mentioned leaders often exhibit fanatic discipline, empirical creativity, or productive paranoia-either to their detriment or to their success. More details about these behaviors can be found in his book.

James Collins provided attendees at the Governor's Agency Head Summit the opportunity to learn how corporate and social sectors build and sustain great entrepreneurial institutions during unpredictable times. Your good thinking, as a board members and staff of Virginia's health regulatory boards, is an invaluable asset and this material is likely to provide additional support for all that you do to serve the Commonwealth..

Thank you

Tab 3

Agenda Item: **Regulatory Actions - Chart of Regulatory Actions (As of May 22, 2012)**

Board of Long-Term Care Administrators

Chapter	Action / Stage Information	
Regulations Governing the Practice of Nursing Home Administrators [18 VAC 95 - 20] Regulations Governing the Practice of Assisted Living Facility Administrators [18 VAC 95 - 30]	Action:	Fee increase
	Stage:	Proposed - *At Secretary's Office for 477 days*
Regulations Governing the Practice of Assisted Living Facility Administrators [18 VAC 95 - 30]	Action:	Oversight of acting administrators in an AIT program
	Stage:	Proposed - *At Governor's Office for 4 days*

Agenda Item: **Regulatory Action – Re-Proposal of Regulation Fee increases for Both Professions under the Board**

Staff Note:

The agenda package includes the regulatory language originally proposed by the Board. Subsequent to adoption of proposed regulations, the Board has been requested to withdraw the two-step process and eliminate the 2014 increase.

Included in your package:

Originally proposed amendments to regulations to establish increased fees

Re-proposed amendments to delete the 2014 increase

Board action:

Adoption of amendments to Chapters 20 and30

Project 2364 - Proposed

BOARD OF LONG-TERM CARE ADMINISTRATORS

Fee increase

18VAC95-20-80. Required fees.

The applicant or licensee shall submit all fees below which apply:

1. A.I.T. program application	~~$185~~ $215
2. Preceptor application	~~$50~~ $65
3. Licensure application	~~$200~~ $315
4. Verification of licensure requests from other states	~~$25~~ $35
5. Nursing home administrator license renewal	~~$225~~ $315
6. Preceptor renewal	~~$50~~ $65
7. Penalty for nursing home administrator late renewal	~~$65~~ $110
8. Penalty for preceptor late renewal	~~$20~~ $25
9. Nursing home administrator reinstatement	~~$315~~ $435
10. Preceptor reinstatement	~~$95~~ $105
11. Duplicate license	~~$15~~ $25
12. Duplicate wall certificates	~~$25~~ $40
13. Reinstatement after disciplinary action	$1,000

B. Beginning January 1, 2014, the following fees shall apply:

1. A.I.T. program application	$250
2. Preceptor application	$85
3. Licensure application	$360
4. Verification of licensure requests from other states	$40
5. Nursing home administrator license renewal	$360
6. Preceptor renewal	$85
7. Penalty for nursing home administrator late renewal	$120
8. Penalty for preceptor late renewal	$30
9. Nursing home administrator reinstatement	$485
10. Preceptor reinstatement	$125

11. Duplicate license	$30
12. Duplicate wall certificates	$50
13. Reinstatement after disciplinary action	$1,000

18VAC95-30-40. Required fees.

A. The applicant or licensee shall submit all fees below that apply:

1. ALF AIT program application	~~$185~~ $215
2. Preceptor application	~~$50~~ $65
3. Licensure application	~~$200~~ $315
4. Verification of licensure requests from other states	~~$25~~ $35
5. Assisted living facility administrator license renewal	~~$225~~ $315
6. Preceptor renewal	~~$50~~ $65
7. Penalty for assisted living facility administrator late renewal	~~$65~~ $110
8. Penalty for preceptor late renewal	~~$20~~ $25
9. Assisted living facility administrator reinstatement	~~$315~~ $435
10. Preceptor reinstatement	~~$95~~ $105
11. Duplicate license	~~$15~~ $25
12. Duplicate wall certificates	~~$25~~ $40
13. Returned check	$35
14. Reinstatement after disciplinary action	$1,000

B. Beginning January 1, 2014, the following fees shall apply:

1. ALF AIT program application	$250
2. Preceptor application	$85
3. Licensure application	$360
4. Verification of licensure requests from other states	$40
5. Assisted living facility administrator license renewal	$360
6. Preceptor renewal	$85
7. Penalty for assisted living facility administrator late renewal	$120
8. Penalty for preceptor late renewal	$30
9. Assisted living facility administrator reinstatement	$485
10. Preceptor reinstatement	$125
11. Duplicate license	$30

12. Duplicate wall certificates	$50
13. Returned check	$35
14. Reinstatement after disciplinary action	$1,000

~~B.~~C. Fees shall not be refunded once submitted.

~~C.~~D. Examination fees are to be paid directly to the service contracted by the board to administer the examination.

Project 2364 – Re-Proposed

BOARD OF LONG-TERM CARE ADMINISTRATORS

Fee increase

18VAC95-20-80. Required fees.

The applicant or licensee shall submit all fees below which apply:

1. A.I.T. program application	~~$185~~ $215
2. Preceptor application	~~$50~~ $65
3. Licensure application	~~$200~~ $315
4. Verification of licensure requests from other states	~~$25~~ $35
5. Nursing home administrator license renewal	~~$225~~ $315
6. Preceptor renewal	~~$50~~ $65
7. Penalty for nursing home administrator late renewal	~~$65~~ $110
8. Penalty for preceptor late renewal	~~$20~~ $25
9. Nursing home administrator reinstatement	~~$315~~ $435
10. Preceptor reinstatement	~~$95~~ $105
11. Duplicate license	~~$15~~ $25
12. Duplicate wall certificates	~~$25~~ $40
13. Reinstatement after disciplinary action	$1,000

18VAC95-30-40. Required fees.

A. The applicant or licensee shall submit all fees below that apply:

1. ALF AIT program application	~~$185~~ $215
2. Preceptor application	~~$50~~ $65
3. Licensure application	~~$200~~ $315
4. Verification of licensure requests from other states	~~$25~~ $35
5. Assisted living facility administrator license renewal	~~$225~~ $315
6. Preceptor renewal	~~$50~~ $65
7. Penalty for assisted living facility administrator late renewal	~~$65~~ $110
8. Penalty for preceptor late renewal	~~$20~~ $25

9. Assisted living facility administrator reinstatement	~~$315~~ $435
10. Preceptor reinstatement	~~$95~~ $105
11. Duplicate license	~~$15~~ $25
12. Duplicate wall certificates	~~$25~~ $40
13. Returned check	$35
14. Reinstatement after disciplinary action	$1,000

~~B.~~C. Fees shall not be refunded once submitted.

~~C.~~D. Examination fees are to be paid directly to the service contracted by the board to administer the examination.

Commonwealth of Virginia

REGULATIONS

GOVERNING THE PRACTICE OF NURSING HOME ADMINISTRATORS

Periodic Review of Regulations

18VAC95-20-10 et seq.

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Part I. General Provisions.

18VAC95-20-10. Definitions.

A. The following words and terms when used in this chapter shall have the definitions ascribed to them in §54.1-3100 of the Code of Virginia:

"Board"

"Nursing home"

"Nursing home administrator"

B. The following words and terms when used in this chapter shall have the following meanings unless the context indicates otherwise:

"Accredited institution" means any degree-granting college or university accredited by an accrediting body approved by the United States Department of Education ~~or any diploma-granting program approved by the Virginia Board of Nursing~~.

"A.I.T." means a person enrolled in the administrator-in-training program in nursing home administration in a licensed nursing home.

"Administrator-of-record" means the licensed nursing home administrator designated in charge of the general administration of the facility and identified as such to the facility's licensing agency.

"Approved sponsor" means an individual, business or organization approved by the National Association of Long Term Care Administrator Boards or by an accredited ~~education~~ institution to offer continuing education programs in accordance with this chapter.

"Continuing education" means the educational activities which serve to maintain, develop, or increase the knowledge, skills, performance and competence recognized as relevant to the nursing home administrator's professional responsibilities.

"Full time" means employment of at least 35 hours per week.

"Hour" means ~~60~~50 minutes of participation in a program for obtaining continuing education.

"Internship" means a practicum or course of study as part of a degree or post-degree program designed especially for the preparation of candidates for licensure as nursing home administrators that involves supervision by an accredited college or university of the practical application of previously studied theory.

"National examination" means a test used by the board to determine the competence of candidates for licensure as administered by the National Association of Long Term Care Administrator Boards or any other examination approved by the board.

"Preceptor" means a nursing home administrator currently licensed and registered or recognized by a nursing home administrator licensing board to conduct an administrator-in-training (A.I.T.) program.

~~"State examination" means a test used by the Board of Long-Term Care Administrators to determine competency of a candidate relevant to regulations and laws in Virginia governing nursing home administration.~~

18VAC95-20-20 to 18VAC95-20-50. [Repealed]

18VAC95-20-60. Posting of license.

Each licensee shall post his license in a main entrance or place conspicuous to the public in the facility in which the licensee is administrator-of-record.

18VAC95-20-70. Accuracy of information.

A. All changes in the address of record or the public address, if different from the address of record, or the name of a licensee, trainee, or preceptor shall be furnished to the board within 30 days after the change occurs.
B. All notices required by law and by this chapter to be mailed by the board to any registrant or licensee shall be validly given when mailed to the latest address of record on file with the board and shall not relieve the licensee, trainee, or preceptor of the obligation to comply

18VAC95-20-80. Required fees.

The applicant shall submit all fees below which apply:

1. A.I.T. program application	$185
2. Preceptor application	$50
3. Licensure application	$200
4. Verification of licensure requests from other states	$25
5. Nursing home administrator license renewal	$225
6. Preceptor renewal	$50
7. Penalty for nursing home administrator late renewal	$65
8. Penalty for preceptor late renewal	$20
9. Nursing home administrator reinstatement	$315
10. Preceptor reinstatement	$95

11. Duplicate license $15

12. Duplicate wall certificates $25

18VAC95-20-90 to 18VAC95-20-120. [Repealed]

18VAC95-20-130. Additional fee information.

A. There shall be a fee of $35 for returned checks.

B. Fees shall not be refunded once submitted.

C. Examination fees are to be paid directly to the service or services contracted by the board to administer the examinations.

Part II. Renewals and Reinstatements.

(Discussion: Consider establishment of an inactive license)

18VAC95-20-140 to 18VAC95-20-160. [Repealed]

18VAC95-20-170. Renewal requirements.

A. A person who desires to renew his license or preceptor registration for the next year shall, not later than the expiration date of March 31 of each year, submit a completed renewal form and fee.

B. The renewal form and fee shall be received no later than the expiration date. Postmarks shall not be considered.

C. A nursing home administrator license or preceptor registration not renewed by the expiration date shall be invalid.

18VAC95-20-175. Continuing education requirements.

A. In order to renew a nursing home administrator license, an applicant shall attest on his renewal application to completion of 20 hours of approved continuing education for each renewal year.

1. Up to 10 of the 20 hours may be obtained through Internet or self-study courses and up to 10 continuing education hours in excess of the number required may be transferred or credited to the next renewal year.

2. A licensee is exempt from completing continuing education requirements and considered in compliance on the first renewal date following initial licensure.

B. In order for continuing education to be approved by the board, it shall be related to health care administration and shall be approved or offered by the National Association of Long Term Care Administrator Boards (NAB), ~~or by~~ an accredited institution, or a government agency.

C. Documentation of continuing education.

1. The licensee shall retain in his personal files for a period of three renewal years complete documentation of continuing education including evidence of attendance or participation as provided by the approved sponsor for each course taken.

2. Evidence of attendance shall be an original document provided by the approved sponsor and shall include:

a. Date or dates the course was taken;

b. Hours of attendance or participation;

c. Participant's name; and

d. Signature of an authorized representative of the approved sponsor.

3. If contacted for an audit, the licensee shall forward to the board by the date requested a signed affidavit of completion on forms provided by the board and evidence of attendance or participation as provided by the approved sponsor.

D. The board may grant an extension of up to one year or an exemption for all or part of the continuing education requirements due to circumstances beyond the control of the administrator, such as a certified illness, a temporary disability, mandatory military service, or officially declared disasters.

18VAC95-20-180. Late renewal.

A. A person who fails to renew his license or preceptor registration by the expiration date shall, within one year of the initial expiration date:

1. Return the renewal notice or request renewal in writing to the board; and

2. Submit the applicable renewal fee and penalty fee.

B. The documents required in subsection A of this section shall be received in the board office within one year of the initial expiration date. Postmarks shall not be considered.

18VAC95-20-190. [Repealed]

18VAC95-20-200. Reinstatement for nursing home administrator license or preceptor registration.

A. The board may reinstate a nursing home administrator license or preceptor registration that was not renewed within one year of the initial expiration date.

B. An applicant for nursing home administrator license reinstatement shall apply on a reinstatement form provided by the board, submit the reinstatement fee, and provide one of the following:

1. Evidence of the equivalent of 20 hours of continuing education for each year since the last renewal, not to exceed a total of 60 hours.

2. Evidence of active practice in another state or U.S. jurisdiction or in the U.S. armed services during the period licensure in Virginia was lapsed.

3. Evidence of requalifying for licensure by meeting the requirements prescribed in 18VAC95-20-220 or 18VAC95-20-225.

C. An applicant for preceptor reinstatement shall apply on a reinstatement form provided by the board, submit the reinstatement fee, and meet the current requirements for a preceptor in effect at the time of application for reinstatement.

18VAC95-20-210. [Repealed]

Part III. Requirements for Licensure.

18VAC95-20-220. Qualifications for initial licensure.

One of the following sets of qualifications is required for licensure as a nursing home administrator:

1. Degree and practical experience. The applicant shall (i) hold a baccalaureate or higher degree in nursing home administration or a health care administration field from an accredited ~~college or university~~ institution; (ii) have completed not less than a 320-hour internship in a licensed nursing home as part of the degree program under the supervision of a preceptor; and (iii) have received a passing grade on the national examination;

2. Certificate program. The applicant shall (i) hold a baccalaureate or higher degree from an accredited ~~college or university~~ institution; (ii) successfully complete a program with a minimum of 21 semester hours study in nursing home administration or health care administration from an accredited college or university; (iii) successfully complete not less than a 400-hour internship in a licensed nursing home as part of the certificate program under the supervision of a preceptor; and (iv) have received a passing grade on the national examination; or

3. Administrator-in-training program. The applicant shall have (i) successfully completed an A.I.T. program which meets the requirements of Part IV (18VAC95-20-300 et seq.) of this chapter and (ii) received a passing grade on the national examination.

18VAC95-20-225. Qualifications for licensure by endorsement.

The board may issue a license to any person who:

1. Holds a current, unrestricted license from any state or the District of Columbia; and

2. Meets one of the following conditions:

a. Has practiced nursing home administration for one year; or

b. Has education and experience equivalent to qualifications required by this chapter and has provided written evidence of those qualifications at the time of application for licensure.

18VAC95-20-230. Application package.

A. An application for licensure shall be submitted after the applicant completes the qualifications for licensure.

B. An individual seeking licensure as a nursing home administrator or registration as a preceptor shall submit:

1. A completed application as provided by the board;

2. Additional documentation as may be required by the board to determine eligibility of the applicant;

3. The applicable fee; and

4. An attestation that he has read and understands and will remain current with the applicable Virginia laws and regulations relating to the administration of nursing homes.

C. With the exception of school transcripts, examination scores, and verifications from other state boards, all parts of the application package shall be submitted at the same time. An incomplete package shall be retained by the board for one year, after which time the application shall be destroyed and a new application and fee shall be required.

18VAC95-20-240 to 18VAC95-20-290. [Repealed]

Part IV. Administrator-In-Training Program.

18VAC95-20-300. Administrator-in-training qualifications.

A. To be approved as an administrator-in-training, a person shall:

1. Have received a passing grade on a total of 60 semester hours of education from an accredited ~~college or university~~ institution;

2. Obtain a preceptor to provide training;

3. Submit the fee prescribed in 18VAC95-20-80;

4. Submit the application provided by the board; and

5. Submit additional documentation as may be necessary to determine eligibility of the applicant and the number of hours required for the A.I.T. program.

B. With the exception of school transcripts, all required parts of the application package shall be submitted at the same time. An incomplete package shall be retained by the board for on year after which time the application shall be destroyed and a new application and fee shall be required.

18VAC95-20-310. Required hours of training.

A. The A.I.T. program shall consist of 2,000 hours of continuous training in a facility as prescribed in 18VAC95-20-330 to be completed within 24 months. An extension may be granted by the board on an individual case basis. The board may reduce the required hours for applicants with certain qualifications as prescribed in subsection B and C of this section.

B. An A.I.T. applicant with prior health care work experience may request approval to receive a maximum 1,000 hours of credit toward the total 2,000 hours as follows:

1. Applicant shall have been employed full time for four of the past five consecutive years immediately prior to application as an assistant administrator or director of nursing in a training facility as prescribed in 18VAC95-20-330;

2. Applicants with experience as a hospital administrator shall have been employed full time for three of the past five years immediately prior to application as a hospital administrator-of-record or an assistant hospital administrator in a hospital setting having responsibilities in all of the following areas:

a. Regulatory;

b. Fiscal;

c. Supervisory;

d. Personnel; and

e. Management; or

3. Applicants who hold a license as a registered nurse shall have held an administrative level supervisory position for at least four of the past five consecutive years, in a training facility as prescribed in 18VAC95-20-330.

C. An A.I.T. applicant with the following educational qualifications shall meet these requirements:

1. An applicant with a master's or a baccalaureate degree in health care administration or a comparable field with no internship shall complete 320 hours in an A.I.T. program;

2. An applicant with a master's degree in an unrelated field shall complete 1,000 hours in an A.I.T. program;

3. An applicant with a baccalaureate degree in an unrelated field shall complete 1,500 hours in an A.I.T. program; or

4. An applicant with 60 semester hours of education in an accredited college or university shall complete 2,000 hours in an A.I.T. program.

D. An A.I.T. shall be required to serve weekday, evening, night and weekend shifts to receive training in all areas of nursing home operation.

18VAC95-20-320. [Repealed]

18VAC95-20-330. Training facilities.

Training shall be conducted only in:

1. A nursing home licensed by the Virginia Board of Health or by a similar licensing body in another jurisdiction;

2. An institution operated by the Virginia ~~State Mental Health, Mental Retardation and Substance Abuse Services Board~~ Department of Behavioral Health and Development Services in which long-term care is provided;

3. A certified nursing home owned or operated by an agency of any city, county, or the Commonwealth or of the United States government; or

4. A certified nursing home unit located in and operated by a licensed hospital as defined in §32.1-123 of the Code of Virginia, a state-operated hospital, or a hospital licensed in another jurisdiction.

18VAC95-20-340. Supervision of trainees.

A. Training shall be under the supervision of a preceptor who is registered or recognized by a licensing board.

B. A preceptor may supervise no more than two A.I.T.'s at any one time.

C. A preceptor shall:

1. Provide direct instruction, planning and evaluation;

2. Shall be routinely present with the trainee in the training facility **(Discussion: further definition or specificity??)**; and

3. Shall continually evaluate the development and experience of the A.I.T. to determine specific areas needed for concentration.

18VAC95-20-350 to 18VAC95-20-370. [Repealed]

18VAC95-20-380. Qualifications of preceptors.

To be registered by the board as a preceptor, a person shall:

1. Hold a current, unrestricted Virginia nursing home administrator license and be employed full time as an administrator in a training facility for a minimum of two of the past three years immediately prior to registration; and

2. Meet the application requirements in 18VAC95-20-230.

18VAC95-20-390. Training plan.

Prior to the beginning of the A.I.T. program, the preceptor shall develop and submit for board approval a training plan which shall include and be designed around the specific training needs of the administrator-in-training. The training plan shall include the ~~1996~~ Domains of Practice in the Job Analysis of Nursing Home Administrators approved by the National Association of Long Term Care Administrator Boards (NAB) in 2007 and incorporated by reference into these regulations. An A.I.T. program shall include training in each of the learning areas in the Domains of Practice.

18VAC95-20-400. Reporting requirements.

A. The preceptor shall maintain progress reports on forms prescribed by the board for each month of training.

B. The A.I.T.'s certificate of completion plus the accumulated original monthly reports shall be submitted by the preceptor to the board within 30 days following the completion of the A.I.T. program.

18VAC95-20-410 to 18VAC95-20-420. [Repealed]

18VAC95-20-430. Termination of program.

A. If the A.I.T. program is terminated prior to completion, the trainee and the preceptor shall each submit a written explanation of the causes of program termination to the board within five working days.

B. The preceptor shall also submit all required monthly progress reports completed prior to termination.

18VAC95-20-440. Interruption of program.

A. If the program is interrupted because the registered preceptor is unable to serve, the A.I.T. shall notify the board within five working days and shall obtain a new preceptor who is registered with the board within 60 days.

B. Credit for training shall resume when a new preceptor is obtained and approved by the board.

C. If an alternate training plan is developed, it shall be submitted to the board for approval before the A.I.T. resumes training.

18VAC95-20-450 to 18VAC95-20-460. [Repealed]

Part V. Refusal, Suspension, Revocation, and Disciplinary Action.

18VAC95-20-470. Unprofessional conduct.

The board may refuse to admit a candidate to an examination, refuse to issue or renew a license or approval to any applicant, suspend a license for a stated period of time or indefinitely, reprimand a licensee, place his license on probation with such terms and conditions and for such time as it may designate, impose a monetary penalty, or revoke a license for any of the following causes:

1. Conducting the practice of nursing home administration in such a manner as to constitute a danger to the health, safety, and well-being of the residents, staff, or public;

2. Failure to comply with federal, state, or local laws and regulations governing the operation of a nursing home;

3. Conviction of a felony or any misdemeanor involving abuse, neglect or moral turpitude;

4. ~~Failure to comply with any regulations of the board~~ Violating or cooperating with others in violating any of the provisions of Chapters 1 (§ 54.1-100 et seq.), 24 (§ 54.1-2400 et seq.) and this chapter or regulations of the board; or

5. Inability to practice with skill or safety.

18VAC95-20-471. Criteria for delegation of informal fact-finding proceedings to an agency subordinate.

A. Decision to delegate.

In accordance with § 54.1-2400 (10) of the Code of Virginia, the board may delegate an informal fact-finding proceeding to an agency subordinate upon determination that probable cause exists that a practitioner may be subject to a disciplinary action.

B. Criteria for delegation. Cases that may not be delegated to an agency subordinate include violations of standards of practice as set forth in subdivisions 1, 3 and 5 of 18VAC95-20-470, except as may otherwise be determined by a special conference committee of the Board.

C. Criteria for an agency subordinate.

1. An agency subordinate authorized by the board to conduct an informal fact-finding proceeding may include current or past board members and professional staff or other persons deemed knowledgeable by virtue of their training and experience in administrative proceedings involving the regulation and discipline of health professionals.

2. The executive director shall maintain a list of appropriately qualified persons to whom an informal fact-finding proceeding may be delegated.

3. The board may delegate to the executive director the selection of the agency subordinate who is deemed appropriately qualified to conduct a proceeding based on the qualifications of the subordinate and the type of case being heard.

18VAC95-20-480 to 18VAC95-20-740. [Repealed]

Tab 4

VIRGINIA BOARD OF LONG-TERM CARE ADMINISTRATORS

DISPOSITION OF DISCIPLINARY CASES FOR PRACTICING ON EXPIRED LICENSES

The Board of Long Term Care Administrators delegates to the Executive Director for the Board the authority to offer a prehearing consent order to resolve disciplinary cases in which a Licensee has been found to be practicing with an expired license.

Disciplinary Action for Practicing with an Expired License

The Board adopted the following guidelines for resolution of cases of practicing with an expired license:

Cause	Possible Action
First offense; 90 days or less	Confidential Consent Agreement
First offense; 91 days to one years	Consent Order; Monetary Penalty of $500
First offense; more than one year	Consent Order; Monetary Penalty of $1000
Second offense	Consent Order; Monetary Penalty of $2000