



# Bureau of Assisted Living

## Community-based Residential Facility Initial Licensing





# Regulations

- DHS 83 – Community-based Residential Facilities:  
[https://docs.legis.wisconsin.gov/code/admin\\_code/dhs/030/83](https://docs.legis.wisconsin.gov/code/admin_code/dhs/030/83)
- Chapter 50 Wisconsin Statutes:  
<https://docs.legis.wisconsin.gov/statutes/statutes/50/I/033>
- DHS 12 – Caregiver Background Checks:  
[http://docs.legis.wisconsin.gov/code/admin\\_code/dhs/001/12](http://docs.legis.wisconsin.gov/code/admin_code/dhs/001/12)
- DHS 13 – Reporting and Investigation of Caregiver Misconduct:  
[http://docs.legis.wisconsin.gov/code/admin\\_code/dhs/001/13](http://docs.legis.wisconsin.gov/code/admin_code/dhs/001/13)



## What is a Community-based Residential Facility (CBRF)?

“Community-based residential facility” means a place where 5 or more adults who are not related to the operator or administrator and who do not require care above intermediate level nursing care, reside and receive care, treatment or services that are above the level of room and board but that include no more than 3 hours of nursing care per week per resident. “Community-based residential facility” **Chapter 50.01(1)g.**



# CBRF Classes DHS 83.04

**Class A** – limited to residents who are able to respond to emergencies and exit the facility without any help

**Class C** – may serve residents who are not capable of responding to emergencies and need help to exit the facility

AA – Class A ambulatory

AS – Class A semi ambulatory

ANA – Class A non ambulatory

CA – Class C ambulatory

CS – Class C semi ambulatory

CNA – Class C non ambulatory

**Facility Size:**      Small – 5 to 8 beds  
                              Medium – 9 to 20 beds  
                              Large – 21 or more beds



# Client Groups DHS 83.02 (16)

Developmentally Disabled

Advanced Age

Irreversible Dementia/Alzheimer's

Emotionally Disturbed/Mental Illness

Alcohol/Drug Dependent

Physically Disabled

Persons with Traumatic Brain Injury

Terminally Ill

Corrections Clients

Pregnant Women Who Need Counseling



# Wisconsin CBRF Licensing Process

- Starting an CBRF
  - <https://www.dhs.wisconsin.gov/regulations/cbrf/openingfacility.htm>.



## Plan Review DHS 83.63 (2)

- **New and remodeled.** Plans for all new construction, additions, and remodeling projects for CBRFs shall be approved by the department before beginning construction, except under sub. (4) (b).
- **Existing buildings.** Existing buildings applying for CBRF licensure after April 1, 2009, shall submit plans for department review for compliance with this subsection.
- **Plan submission.** At least 2 sets of working drawings and specifications shall be submitted to the department. The drawings shall be scaled and to dimension. The review process begins after the department receives all required documents and fees



# Community Advisory Committee

## DHS 83.05/Chapter 50.03(4)g

- Prior to initial licensure of a community-based residential facility, the applicant for licensure shall make a good faith effort to establish a community advisory committee consisting of representatives from the proposed community-based residential facility, the neighborhood in which the proposed community-based residential facility will be located and a local unit of government. The community advisory committee shall provide a forum for communication for those persons interested in the proposed community-based residential facility. Any committee established under this paragraph shall continue in existence after licensure to make recommendations to the licensee regarding the impact of the community-based residential facility on the neighborhood. The department shall determine compliance with this paragraph both prior to and after initial licensure.



# CBRF Initial Licensing Checklist

https://www.dhs.wisconsin.gov/forms1/f6/f62416.pdf

dhs.wisconsin.gov Wisconsin Legislature: DHS 83...

DEPARTMENT OF HEALTH SERVICES  
Division of Quality Assurance  
F-62416 (06/2015)

STATE OF WISCONSIN  
Wis. Admin. Code ch. DHS 83  
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**COMMUNITY BASED RESIDENTIAL FACILITY (CBRF)  
INITIAL LICENSURE CHECKLIST**

Name - CBRF \_\_\_\_\_

Address - Facility (Street Address) \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ Zip Code \_\_\_\_\_

Name - Reviewer \_\_\_\_\_ Date Form Completed (MM/dd/yyyy) \_\_\_\_\_

**A completed application includes completion and/or submission of all the items in Sections A and B, as well as the review of items by an assisted living surveyor to ensure compliance with applicable regulations.**

**A. Plan Review**

All CBRFs, regardless of size, shall have a plan submittal (1) prepared by a design professional, (2) submitted to the Department of Health Services (DHS), and (3) reviewed prior to construction. Existing structures seeking CBRF licensure shall also have completed the plan review process prior to licensure. If an existing CBRF is being considered for purchase, it is important to note that there is **no transfer of licensure**. Additional information regarding plan review is available on the DHS website at: <https://www.dhs.wisconsin.gov/regulations/plan-review/index.htm>

<input type="checkbox"/>	1. Plans have been prepared by a design professional to substantiate compliance with DHS 83, Wisconsin Commercial Building Code, Wisconsin Uniform Dwelling Code, or any applicable local municipal zoning codes.
<input type="checkbox"/>	2. Plans have been submitted to DHS, allowing 45 working days for completion of the review.
<input type="checkbox"/>	3. Plans accurately identify all exits, congregate dining and living square footage areas, and exterior window opening sizes.
<input type="checkbox"/>	4. Detection plans accurately identify all smoke and heat locations per DHS 83.
<input type="checkbox"/>	5. Sprinkler plans, specifications, and hydraulic calculations comply with DHS 83.

Done



# CBRF Initial Licensing Checklist

## cont.

A screenshot of a web browser displaying a checklist for CBRF Initial Licensing. The browser address bar shows the URL: https://www.dhs.wisconsin.gov/forms1/f6/f62416.pdf. The checklist items are as follows:

- 6. Facility has been inspected either by DHS, Department of Safety and Professional Services (DSPS), or local municipality.
- 7. Owner or facility designated representative has resolved all plan review conditions and inspection concerns.
- 8. Documentation of plan reviews, inspections, and permits are available for the licensing specialist.

**B. Required Application Materials**

- 1. Fully completed DQA form F-60287, *CBRF Initial License Application*
- 2. Background check completed by Office of Caregiver Quality on the licensee and all non-residents age 10 and older
- 3. Floor plan (no larger than 11 x 17') *DHS 83.05(2)(b)*
- 4. A biennial licensing fee of \$389, plus \$50.25 per resident based on capacity of facility  
**NOTE:** For a PROBATIONARY LICENSE, the fee for 12 months is 1/2 this amount.
- 5. Evidence of financial ability to operate for 60 days *DHS 83.05(2)(f)*
- 6. DQA form F-62674A, *Assisted Living Facility Model Balance Sheet* *DHS 83.05(2)(e)*
- 7. Program statement *DHS 83.05(2)(a)*
- 8. Fire inspection *DHS 83.05(2)(c)*
- 9. The Department (DHS) has received a response to the hazard request from the municipality or thirty (30) days have elapsed since DHS sent the hazard request to the municipality.
- 10. Verification of Completion Certificate - CBRF Webcast, if a new provider
- 11. Emergency plan *DHS 83.47(2)*
- 12. Admission agreement *DHS 83.29*
- 13. Community Advisory Committee documentation *DHS 83.05(3)* and *Chapter 50.03(4)(g), Wis. Stats.*
- 14. Resident rights, house rules policy *DHS 83.32*
- 15. Grievance procedure *DHS 83.33*
- 16. Approval by the Department of Natural Resources where a public water supply is not available
- 17. Documentation of approval of building plans by DHS and/or Dept. of Commerce
- 18. Documentation of final inspection of the building by DHS and/or Dept. of Commerce
- 19. Documentation of sprinkler plan approval for new construction or documentation of sprinkler system inspection for existing



# CBRF Initial Licensing Checklist

## cont.

https://www.dhs.wisconsin.gov/forms1/f6/f62416.pdf

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- 19. Documentation of sprinkler plan approval for new construction or documentation of sprinkler system inspection for existing buildings
- 20. Documentation of smoke and heat detection system compliance

CBRF Initial Licensure Checklist F-62416 (06/2015) Page 2 of 2

- 21. Well water test results, if applicable DHS 83.46(3)
- 22. Administrator qualifications (degrees, licenses, training completions, and/or resumes) DHS 83.15(1)
- 23. Furnace and chimney inspection results DHS 83.46(1)(c)
- 24. Pet vaccinations, if applicable DHS 83.39(5)

**C. The following items will be reviewed during the on-site visit or tour of the facility.**

- 1. Background Information Disclosure (DHS form F-82064) and completed background check for employees
- 2. Resident room size (60/80/100) DHS 83.54(4)
- 3. Carpet flame spread rating DHS 83.61(2)
- 4. Clothes dryer vented with rigid metal ducting DHS 83.44(1)(c)
- 5. Windows operate easily, are screened, and have window coverings DHS 83.60
- 6. Water temperature at 115 degrees F or less DHS 83.55(6)(b)
- 7. Fire extinguishers with current tags mounted at the proper height and in the proper locations DHS 83.47(4)(a-b)
- 8. Posting of house rules, resident rights, grievance procedure, activity schedule, and exit diagram DHS 83.13(3)
- 9. Emergency plan readily available to all employees DHS 83.47(2)(a)
- 10. Menus available to residents DHS 83.41(2)(c)2
- 11. Medication management (tasks) DHS 83.07(2)(a)

Done



# Background Check

- Any individual applicant
  - Submit a Background Information Disclosure (BID) form and Background Information Disclosure Appendix (BID Appendix)
- Any principal officers or board members of a corporation applying for licensure who has regular, direct contact with residents
  - Submit a BID and BID Appendix
- Any non-client resident (individuals age 10 and older who are not residents but live at the CBRF)
  - Submit a BID and BID Appendix

Information, forms, and mailing address for the BID and BID Appendix can be found at:

<https://www.dhs.wisconsin.gov/caregiver/enity.htm>



# CBRF Application Form

- CBRF Initial License Application:  
<http://dhs.wisconsin.gov/forms1/F6/F60287.pdf>
- Licensee or designee signature is required
- A licensing fee of **\$389.00 + \$50.25 per resident** based on capacity of facility is charged every two years. The fee is submitted with the application and made payable to "DQA."
- **LICENSING FEES ARE NOT REFUNDABLE**
- Incomplete applications are not accepted



# Probationary License

- Applicants not previously licensed by the Department will be issued a probationary license
- Valid for 12 months
- Submit  $\frac{1}{2}$  of the required fees
  - Example: 8-bed CBRF
    - $\$389 + \$402 (8 \times \$50.25) = \$791$
    - $\$791 \div 2 = \$395.50$



# CBRF Application

A screenshot of a web browser displaying the Wisconsin Department of Health Services website. The browser's address bar shows the URL: https://www.dhs.wisconsin.gov/forms1/f6/f60287.pdf. The page content includes the department's name, the form title, and a list of required items for the application.

**DEPARTMENT OF HEALTH SERVICES**  
Division of Quality Assurance  
F-60287 (03/2013)

**STATE OF WISCONSIN**  
Chapter 50.03(3)(b), Wis. Stats.  
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## COMMUNITY BASED RESIDENTIAL FACILITY (CBRF) INITIAL LICENSE APPLICATION

- Completion of this form is required by Chapter 50.03(3)(b), Wis. Stats.
- Failure to complete this form completely and accurately may result in licensure denial and/or delay in processing.
- Send the completed form with the items listed below to the Division of Quality Assurance (DQA) regional office assigned to the county in which the facility is located. DQA regional office locations are found at: [http://dhs.wisconsin.gov/rl\\_dsl/Contacts/ALSreglmap.htm](http://dhs.wisconsin.gov/rl_dsl/Contacts/ALSreglmap.htm)
- Contact the appropriate regional office if you have questions about completion of this form.
- **THE FOLLOWING ITEMS MUST BE SUBMITTED WITH THE APPLICATION FORM:**
  - Program statement
  - Background check
  - Floor plan with dimensions, exits, room usage
  - Fire inspection
  - Emergency plan
  - Admission agreement
  - Community Advisory Committee documentation
  - Resident Rights and House Rules policies
  - Grievance procedure
  - Evidence of site approval, if zoned
  - Verification of Completion of CBRF webcast, if a new provider
  - Biennial license fee (**NON-REFUNDABLE**) – Check payable to: **DQA**
  - *Assisted Living Facility Model Balance Sheet* (DQA form F-62674A)
  - Evidence of 60-day operating funds

**NOTE:** The licensee is responsible for notifying the Division of Quality Assurance in writing of any change in the information



# CBRF Application

<https://www.dhs.wisconsin.gov/forms1/f6/f60287.pdf>

**NOTE: The licensee is responsible for notifying the Division of Quality Assurance in writing of any change in the information provided on this application.**

Yes  No Did you submit form F-82064 (BID) and form F-82069 (BID Appendix) to the Office of Caregiver Quality at the address listed below?  
**DHS / Division of Quality Assurance**  
**Office of Caregiver Quality**  
**P.O. Box 2969**  
**Madison, WI 53701-2969**

Yes  No Does the Community Based Residential Facility have a contract with a county agency or managed care organization to serve publicly funded individuals?

**I. GENERAL INFORMATION**

Name – Facility				FEIN
Address – Facility (Street / PO Box)	City	State	Zip Code	County

Provide specific directions to the facility from the closest major STATE highway.



# CBRF Application

Browser address bar: <https://www.dhs.wisconsin.gov/forms1/f6/f60287.pdf>

Size of CBRF (Check one.)		Class / Type of CBRF (Check one.)		
<input type="checkbox"/> Small (5-8 residents)	<input type="checkbox"/> Medium (9-20 residents)	<input type="checkbox"/> Large (21 or more residents)	<input type="checkbox"/> Ambulatory Class A (AA)	<input type="checkbox"/> Semi-Ambulatory Class A (AS)
			<input type="checkbox"/> Non-Ambulatory Class A (ANA)	<input type="checkbox"/> Ambulatory Class C (CA)
				<input type="checkbox"/> Semi-ambulatory Class C (CS)
				<input type="checkbox"/> Non-ambulatory Class C (CNA)

**NOTE: Any change in the above information requires submission of new documents.**

Name – Licensee [Individual or Corporation (legal entity)]			Birth Date - Licensee	
Street Address – Licensee		City	State	Zip Code
Telephone Number - Licensee	FAX Number - Licensee	E-mail Address - Licensee		

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# CBRF Application

https://www.dhs.wisconsin.gov/forms1/f6/f60287.pdf

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### III. FINANCIAL INFORMATION

*A current balance sheet must be submitted with this application.*

Monthly Operating Expenses	
All Salaries (licensee, caregivers, contract providers, etc.)	\$
Lease or Mortgage	\$
All Other (food, supplies, utilities, insurance, taxes, etc.)	\$
<b>TOTAL Monthly Expenses</b>	<b>\$</b>

If income from residents would not be adequate to pay your monthly operating expenses, you must have other sources of funds or income that may be used to continue the operation of the facility for at least a 60-day period.

#### All Other Sources of Income

*Check all that apply.*

<input type="checkbox"/> Savings or other financial reserves	<input type="checkbox"/> Line of credit
<input type="checkbox"/> Purchase contract (county agency or managed care organization)	<input type="checkbox"/> Loan
<input type="checkbox"/> Outside employment	



# CBRF Program Statement

## DHS 83.06

- The program statement shall accurately include all of the following:
- DHS 83.06(1)(a) The name of the licensee, the administrator and the staff position in charge when the licensee or administrator is away from the CBRF.
- DHS 83.06(1)(b) Employee availability, including 24 hour staffing patterns and the availability of a licensed nurse, if any.
- DHS 83.06(1)(c) The resident capacity of the CBRF.
- DHS 83.06(1)(d) The class of the CBRF under s. DHS 83.04 (2).



# CBRF Program Statement

## DHS 83.06

- DHS 83.06(1)(e) The client group to be served. If serving more than one client group, the program statement shall include an explanation acceptable to the department of how the client groups are compatible with one another.
- DHS 83.06(1)(f) A complete description of the program goals and services consistent with the needs of residents.
- DHS 83.06(1)(g) Limitations of services, including the criteria for determining who may reside in the CBRF.
- DHS 83.06(1)(h) Respite care services, if provided.



# Fit/Qualified DHS 83.07

- **ELIGIBILITY.** An applicant may not be licensed unless the department determines the applicant is fit and qualified to operate a CBRF.
- **DHS 83.07(2) STANDARDS.** In determining whether a person is fit and qualified, the department shall consider all of the following:
- **DHS 83.07(2)(a) *Compliance history.*** Compliance history with Wisconsin or any other state's licensing requirements and with any federal certification requirements, including any license revocation or denial.
- **DHS 83.07(2)(b) *Criminal history.*** Arrest and criminal records, including any of the following:
- **DHS 83.07(2)(b)1.** Crimes or acts involving abuse, neglect or mistreatment of a person or misappropriation of property of the person.
- **DHS 83.07(2)(b)2.** Crimes or acts subject to elder abuse reporting under s. 46.90, Stats.



# Fit/Qualified DHS 83.07

- DHS 83.07(2)(b)3. Crimes or acts related to the manufacture, distribution, prescription, use, or dispensing of a controlled substance.
- DHS 83.07(2)(b)4. Fraud or substantial or repeated violations of applicable laws and rules in the operation of any health care facility or in the care of dependent persons.
- DHS 83.07(2)(b)5. A conviction or pending criminal charge which substantially relates to the care of adults or minors, to the funds or property of adults or minors, or to the operation of a residential or health care facility.
- DHS 83.07(2)(c) *Financial history*. Financial stability, including:
  - DHS 83.07(2)(c)1. Financial history and financial viability of the owner or related organization.
  - DHS 83.07(2)(c)2. Outstanding debts or amounts due to the department or other government agencies, including unpaid forfeitures and fines.



# Balance Sheet

Browser address bar: <https://www.dhs.wisconsin.gov/forms1/f6/f62674a.pdf>

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**MODEL BALANCE SHEET**

DEPARTMENT OF HEALTH SERVICES  
 Division of Quality Assurance  
 F62674A-0001 (07/08)

STATE OF WISCONSIN  
 Chapter SCS 55.02(4)(i), Wis. Stats.  
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- This form may be used when submitting a license application for an Adult Family Home (AFH), a Community Based Residential Facility (CBRF) or a Home Health Agency (HHA).
- Read instructions on page 2 before completing this form.

Name - Agency: \_\_\_\_\_ Date Completed: \_\_\_\_\_

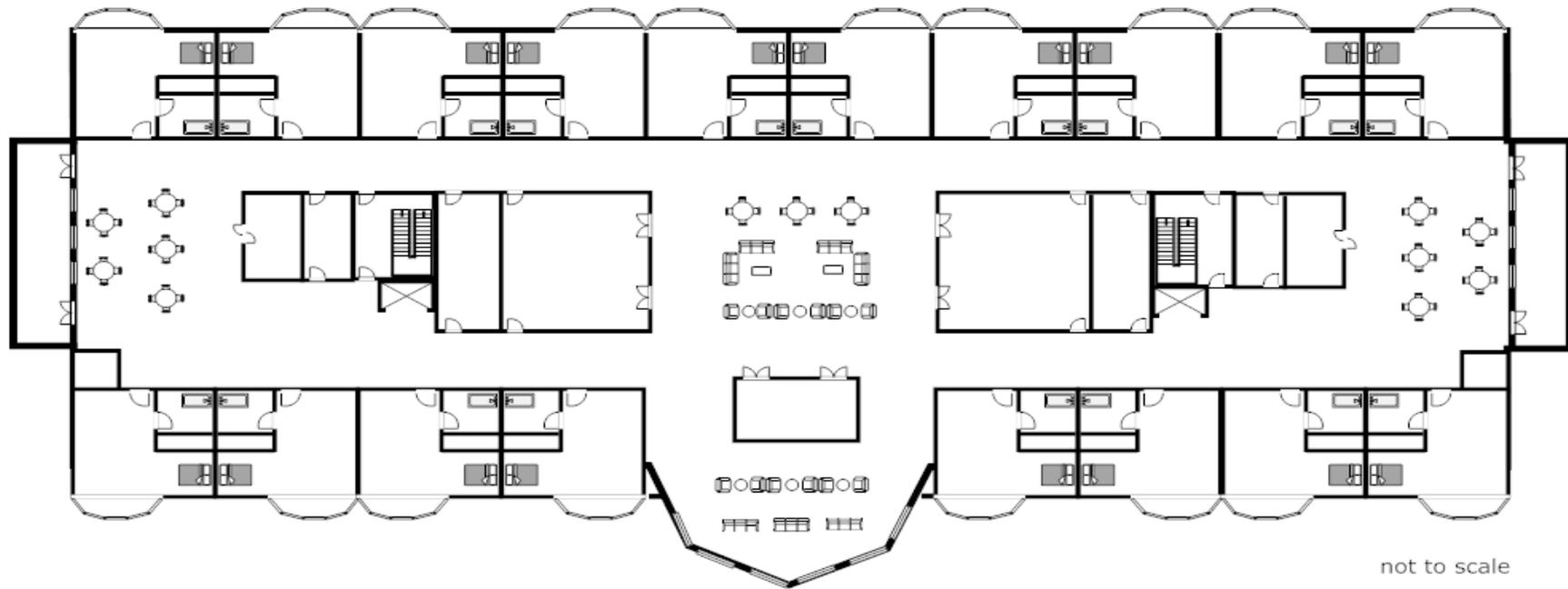
Address: \_\_\_\_\_

ASSETS		LIABILITIES	
Current Assets		Current Liabilities	
Cash in Bank		Accounts Payable	
Other Short Term Investments (e.g. money market, stocks, CDs)		Loans Payable (due within 12 months)	
Prepaid Expenses		Accrued Payroll / Withholding	
Receivables		Taxes Payable	
Other (Specify)		Current Portion of Long Term Debt	
		Other (Specify)	
<b>Total Assets (Current)</b>		<b>Total Liabilities (Current)</b>	
Fixed Assets		Long Term Liabilities	
Vehicles		Loans Payable (due after 12 months) (e.g. bank overdraft, mortgage, vehicles, bank loans, etc.)	
Furniture and Equipment		Other (Specify)	
Leasehold Improvements			
Real Estate / Buildings			
Other (Specify)			
<b>Total Assets (Fixed)</b>		<b>Total Liabilities (Long Term)</b>	
<b>TOTAL ASSETS (Current plus Fixed)</b>		<b>TOTAL LIABILITIES (Current plus Long Term)</b>	
Total Assets must equal the sum total of owner's total liability and owner's equity (net worth)			
OWNER'S EQUITY (NET WORTH)		TOTAL ASSETS	
TOTAL ASSETS		TOTAL LIABILITIES	
TOTAL LIABILITIES		OWNER'S EQUITY	
OWNER'S EQUITY		TOTAL ASSETS	



# CBRF Floor Plan

Assisted Living: Residential Unit Plan





# Bedroom Sizes DHS 83.54 (4)

- DHS 83.54(4)(a) In existing class AA and class CA CBRFs, single occupancy bedrooms shall have a minimum of 80 square feet per resident and 60 square feet per resident in multiple occupancy bedrooms. Minimum square footage shall be calculated exclusive of toilet rooms and closets.
- DHS 83.54(4)(b) In existing class AS, class CS, class ANA and class CNA CBRFs, and all newly constructed CBRFs, single occupancy bedrooms shall have a minimum of 100 square feet per resident and 80 square feet per resident in multiple occupancy bedrooms. Minimum square footage shall be calculated exclusive of toilet rooms and closets.
- DHS 83.54(4)(c) A bedroom shared by residents who require different classes of licensure shall meet the highest applicable square footage required for all residents sharing the bedroom.
- DHS 83.54(5) BASEMENT BEDROOMS. Basement bedrooms shall have at least 2 means of exiting that provide unobstructed egress to the outside or grade level. Windows in the basement shall not be considered exits.



# Common Dining/Living Space

## DHS 83.52

- DHS 83.52(1)(a) The minimum common dining and living space shall be 60 square feet per ambulatory or semi-ambulatory resident or other occupant, and 90 square feet per non-ambulatory resident or other occupant.
- DHS 83.52(1)(b) For each resident apartment, the CBRF may apply 25% of the total floor space of the habitable rooms in the apartment, not including bedroom or bathroom floor space, toward the required congregate dining and living area requirement under par. (a), but may not exceed 30 square feet per resident.
- DHS 83.52(1)(c) Egress paths through common-use areas may not be counted in the common space calculation.
- DHS 83.52(1)(d) Common dining space shall be large enough to accommodate all residents in no more than 2 shifts.
- DHS 83.52(2) ACCESS. Common dining and living space shall be internally accessible to all residents.



## Exiting DHS 83.59

- EXITS. All habitable floors shall have at least 2 exits providing unobstructed travel to the outside. Small class AA CBRFs licensed on or before April 1, 2009, with no more than 2 habitable floors may have one exit from the second floor.
- DHS 83.59(1)(a) Class AS, class ANA, class CS and class CNA CBRFs shall have at least 2 grade level or ramped exits to grade.



# Exiting DHS 83.59

- Exit doors and doors in exit passageways shall have a clear opening of at least 32 inches in width and 76 inches in height.
- DHS 83.59(1)(d) Exit passageways, stairways and doors in class AA facilities shall be at least 30 inches clear opening in width. Class AA facilities licensed on or before April 1, 2009, shall have a minimum width of 28 inches clear opening for existing passageways, stairways and doors.
- DHS 83.59(1)(e) No exit passageway may be through areas such as a resident room, bath or toilet room, closet or furnace rooms.
- DHS 83.59(1)(f) Exit passageways and stairways to outside exits shall be at least 36 inches in width and maintained clear and unobstructed at all times. Exit passageways and stairways to outside exits shall be at least 32 inches in width in facilities licensed on or before April 1, 2009. In existing large facilities, the minimum corridor width shall be at least 4 feet.



# Exiting DHS 83.59

- DHS 83.59(6)(a) *Slope*. In existing buildings, all exterior ramps shall have a slope of not more than one foot of rise in 12 feet of run. In existing buildings, an existing interior ramp with a slope of one foot of rise in 8 feet may be retained to overcome a total height not greater than 2 feet when the floor area does not permit a 1:12 ramp. The ramps shall have a slip-resistant surface and shall have no side slope.
- DHS 83.59(6)(b) *Width*. Ramps shall be at least 4 feet wide, of which not more than 4 inches on each side may be occupied by a handrail.
- DHS 83.59(6)(c)1. Ramps in CBRFs initially licensed on or after January 1, 1997, shall have a handrail on each side which shall be mounted between 34 inches and 38 inches above the ramp surface. CBRFs licensed before January 1, 1997, shall have handrails mounted at least 30 inches above the ramp surface.



## Exiting DHS 83.59

- DHS 83.59(6)(c)2. Handrails on unenclosed ramps shall include an intermediate parallel rail at mid-height.
- DHS 83.59(6)(d) *Clearance*. Where ramps are provided to doorways, the ramp on each side of the doorway shall be level for 5 feet from the door.
- DHS 83.59(6)(e) *Platforms*. Ramps having a 1:12 slope shall have a level platform at 30-foot intervals. All ramps shall have level platforms at least 5 feet long where they turn and at least 5 feet by 5 feet level landing at the bottom of the ramp.



## Windows DHS 83.60

- DHS 83.60(1) MINIMUM SIZE. Every habitable room shall have at least one outside window with a total window area of at least 8% of the floor area in the room. The window shall be openable from the inside without the use of tools or keys. The openable area of the window shall be not less than 4% of the floor area of the room.



# Fire Protection System

## DHS 83.48

- INTERCONNECTED SMOKE AND HEAT DETECTION SYSTEM.
- DHS 83.48(1)(a) Except as provided under sub. (2), the CBRF shall have an interconnected smoke detection system pursuant to s. 50.035 (2), Stats., and shall have an interconnected heat detection system to protect the entire CBRF so that if any detector is activated, an alarm audible throughout the building will be triggered.
- DHS 83.48(1)(b) Smoke and heat detectors shall be installed and maintained in accordance with NFPA 72 National Fire Alarm Code and the manufacturer's recommendation. Smoke detectors powered by the CBRF's electrical system shall be tested by CBRF personnel according to manufacturer's recommendation, but not less than once every other month. CBRFs shall maintain documentation of tests and maintenance of the detection system.



# Fire Protection System

## DHS 83.48

- LOCATION. Pursuant to s. 50.035 (2) (b), Stats., all facilities shall have at least one smoke detector located at each of the following locations:
- DHS 83.48(4)(a) At the top of every open stairway.
- DHS 83.48(4)(b) On the hallway side of every enclosed stairway on each floor level.
- DHS 83.48(4)(c) Spaced not more than 30 feet apart in every corridor, and not further than 15 feet from any wall or in accordance with the manufacturer's separation specifications.
- DHS 83.48(4)(d) In each common use room, including a living room, dining room, family room, lounge and recreation room, but excluding a kitchen, bathroom or laundry room.



# Fire Protection System

## DHS 83.48

- DHS 83.48(4)(e) In each bedroom.
- DHS 83.48(4)(f) In all non-resident living areas, except the furnace, bathroom, kitchen and laundry room.
- DHS 83.48(4)(g) Additional smoke detectors shall be located where wall projections from the ceiling or lintels exceed 8 inches.
- DHS 83.48(4)(h) In the basement, or in each room of the basement except a furnace or laundry room.



# Fire Protection System

## DHS 83.48

- SPECIFIC LOCATIONS FOR HEAT DETECTORS. CBRFs shall have at least one heat detector integrated with the smoke detection system at all of the following locations or in accordance with the heat detector manufacturer's specifications:
  - DHS 83.48(6)(a) Kitchen.
  - DHS 83.48(6)(b) Attached garage.
  - DHS 83.48(6)(c) All enclosed compartments of the attic.
  - DHS 83.48(6)(d) Furnace room.
  - DHS 83.48(6)(e) Laundry room.



# Fire Protection System

## DHS 83.48

- DHS 83.48(8)(a)1. A complete NFPA 13D residential sprinkler system shall be used in a CBRF licensed for 16 or fewer residents only when each room or compartment in the CBRF requires no more than 2 sprinkler heads. When an NFPA 13D sprinkler system is used it shall have a 30-minute water supply for at least 2 sprinkler heads. Entrance foyers shall have sprinklers. The department may determine an NFPA 13R residential sprinkler system shall be installed in a CBRF with one or more rooms or compartments having an unusually high ceiling, a vaulted ceiling, a ceiling with exposed beams or other design or construction features that inhibit proper water discharge when the square footage of each room or compartment in the CBRF would ordinarily allow an NFPA 13D sprinkler system.
- DHS 83.48(8)(a)2. A complete NFPA 13R residential sprinkler system shall be used in a CBRF licensed for 16 or fewer residents when one or more rooms or compartments in the CBRF require more than 2 sprinkler heads and not more than 4 sprinkler heads. A fire department connection is not required for an NFPA 13R sprinkler system.



# Fire Protection System

## DHS 83.48

- DHS 83.48(8)(a)3. . A complete NFPA 13 automatic sprinkler system shall be used in a CBRF licensed for more than 16 residents.
- DHS 83.48(8)(a)4. All sprinkler systems under subds. 1. to 3. installed after January 1, 1997, shall be equipped with residential sprinkler heads in all bedrooms, apartments, all other habitable rooms and corridors.
- DHS 83.48(8)(a)5. All large facilities initially licensed on or after January 1, 1997, shall be protected by a complete automatic sprinkler system, except a class AA CBRF that has an equivalent safety system approved by the department.
- DHS 83.48(8)(a)6. All large facilities initially licensed before January 1, 1997, of non-fire resistive construction shall be protected by a complete automatic sprinkler system, except a class AA CBRF that has an equivalent safety system approved by the department.



# Admission Agreement

## DHS 83.29

- DHS 83.29(2)(e) Terms for refunding charges for services paid in advance, entrance fees, or security deposits in the case of transfer, death or voluntary or involuntary discharge.
- DHS 83.29(2)(f) A statement that the amount of the security deposit may not exceed one month's fees for services, if a security deposit is collected.
- DHS 83.29(2)(g) Terms for holding and charging for a resident's room during a resident's temporary absence. This paragraph does not apply to a resident in the custody of a government correctional agency.
- DHS 83.29(2)(h) Reasons and notice requirements for involuntary discharge or transfer, including transfers within the CBRF. This paragraph does not apply to a resident in the custody of a government correctional agency.



# Grievance Procedure

## DHS 83.33

- Include name, address and phone number of advocacy groups
- Include name, address and phone number of department's regional office:  
<https://www.dhs.wisconsin.gov/dqa/bal-regionalmap.htm>
- Establish a grievance procedure in accordance with s. DHS 94.40
- Assist residents with grievance procedures
- Coercion to discourage an individual from filing a grievance is prohibited
- Maintain a copy of any investigation



# Emergency Plan

## DHS 83.47

- DHS 83.47(2)(a)1. Procedures for orderly evacuation or other department-approved response during an emergency or disaster. The plan shall include procedures for any resident who refuses to follow evacuation or emergency procedures.
- DHS 83.47(2)(a)2. The CBRF's response to serious illness or accidents.
- DHS 83.47(2)(a)3.. Procedures to follow when a resident is missing.
- DHS 83.47(2)(a)4. The CBRF's preparation for and response to severe weather including tornado and flooding.
- DHS 83.47(2)(a)5.. A route to dry land when the CBRF is located in a flood plain.
- DHS 83.47(2)(a)6. Location of an emergency shelter for the residents.
- DHS 83.47(2)(a)7. A means of transporting residents to the emergency shelter.
- DHS 83.47(2)(a)8. How meals and medications will be provided to residents at the emergency shelter.



# Rights of Residents DHS 83.32

- Provide a copy of and explain resident rights, grievance procedure and house rules
- Copies of resident rights, grievance procedure and house rules must be posted in a prominent public place



# Rights of Residents

- Rights of residents living in CBRFs are specified in:
  - Chapter 50.09, Wisconsin Statutes
  - DHS 83.32(3)
  - DHS 94
  - Chapter 51.61, Wisconsin Statutes
  - Chapter 54, 55, 155 and 304, Wisconsin Statutes



# Licensee Responsibilities DHS

## 83.14

- Comply with all laws
- Report changes in client group, capacity or class to department
- Notify department within 7 days of an administrator change
- Ensure a copy of DHS 83 is available
- Not permit any condition creating a risk to residents' health, safety or welfare
- Ensure that the presence of other occupants does not adversely affect residents' health, safety or welfare



# Administrator Qualifications

## DHS 83.15

- Capacity to respond to needs of residents and manage the CBRF
- Must meet one of the following:
  - Associate degree or higher in a health care related field; or
  - Bachelor's degree in a field other than in health care and one year experience working in a health care related field; or
  - Bachelor's degree in a field other than in health care and successful completion of a department-approved assisted living administrator's training course; or
  - Minimum of 2 years experience in a health care related field and successful completion of a department-approved assisted living administrator's training course; or
  - A valid nursing home administrator's license

Information regarding a department approved administrator training course can be found at:

<https://www.dhs.wisconsin.gov/regulations/cbrf/assistedliving-training.htm>



# Staff Qualifications DHS

## 83.16

- All employees must have the skills, education, experience and ability to fulfill the employee's job requirements
- Must be at least 18 years old



# Admission Procedures

## DHS 83.28

- Assessment of resident prior to admission
- Provide written information regarding services available and charges for those services
- Provide admission agreement
- Health screening for communicable disease, including tuberculosis
- Develop temporary service plan
- Explain resident rights, house rules and grievance procedure
- Advanced directive determination



# Resident Assessment DHS 83.35

- Completed prior to admission, when there is a change in needs, abilities and condition, and at least annually
- Must include all of the following areas:
  - Physical health
  - Medications
  - Presence and intensity of pain
  - Nursing procedures
  - Mental and emotional health
  - Behavior patterns
  - Risks, including choking, falling and elopement
  - Capacity for self-care
  - Capacity for self-direction
  - Social Participation
- Based on the current diagnostic, medical and social history
- Face-to-face interview with the person and family members
- Written report of the assessment retained in the resident's record



# Individual Service Plan

## DHS 83.35

- Temporary service plan must be developed on admission
- ISP must be developed within 30 days based on the assessment
- Must include all of the following:
  - Resident's needs and desired outcomes
  - Program services, frequency and approaches
  - Measurable goals with specific time limits for attainment
  - Specified methods for delivering needed care and who is responsible
- Developed with participation by the resident, resident's guardian or designated representative, placing agency and service coordinator
- Dated and signed by the resident or designated representative
- Reviewed annually and with any significant change in the resident's condition or preferences
- Resident care staff shall have continual access to the ISP



# CBRF Licensing Process

- Review of application materials plus fees
- Background check completed on applicant
- Plan Review completed
- Licensing visit scheduled and completed

\*Notification of approval or denial of licensure will be issued within 70 days of receipt of a complete application and the onsite visit.

**DENIED**

**APPROVED**



# Assisted Living Resources

- Division of Quality Assurance (DQA) Consultant List  
<https://www.dhs.wisconsin.gov/regulations/consultantlist.pdf>
- Assisted Living Public Directories  
<https://www.dhs.wisconsin.gov/guide/assisted-living.htm>
- DQA Numbered Memorandums  
<https://www.dhs.wisconsin.gov/dqa/memos/index.htm>
- Family Care (General Information) and link to Managed Care Organizations (MCOs)  
<https://www.dhs.wisconsin.gov/familycare/background.htm>
- Wisconsin Economic Development Corporation (WEDC) – Starting a Business in Wisconsin  
<http://inwisconsin.com/>