ALABAMA STATE COMMITTEE OF PUBLIC HEALTH
DIVISION OF LICENSURE AND CERTIFICATION
ADMINISTRATIVE CODE

CHAPTER 420-5-10
NURSING FACILITIES

420-5-10-.13 Nursing Services.

(1) The facility must have sufficient nursing staff with the appropriate competencies and skill sets to provide nursing and related services to assure resident safety and attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care and considering the number, acuity, and diagnoses of the facility's resident population in accordance with the facility assessment.

(a) Sufficient Staff. The facility must provide services by each of the following types of personnel on a 24-hour basis to provide nursing care to all residents in accordance with resident care plans:

1) Licensed nurses, and other nursing personnel, including but not limited to nurse aides except when waived in this section.

2) The facility must designate a licensed nurse to serve as a charge nurse on each tour of duty except when waived in this section.

(2) The facility must ensure that licensed nurses have the specific competencies and skill sets necessary to care for residents' needs, as identified through resident assessments, and described in the plan of care.

(a) Providing care includes but is not limited to assessing, evaluating, planning, and implementing resident care plans and responding to resident's needs.

(b) Proficiency of nurse aides. The facility must ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for residents' needs, as identified through resident assessments, and described in the plan of care.

(3) Registered Nurse.

(a) The facility must use the services of a registered nurse for at least 8 consecutive hours a day, 7 days a week.

(b) The facility must designate a registered nurse to serve as the director of nursing on a full-time basis.

(c) The director of nursing may serve as a charge nurse only when the facility has an average daily occupancy of 60 or fewer residents.

(4) Required Training of Nursing Aides.

(a) General Rule. A facility must not use any individual working in the facility as a nurse aide for more than 4 months, on a full-time basis, unless:

1) That individual is competent to provide nursing related services.

2) That individual has completed a training and competency evaluation program; or

3) That individual has been deemed or determined competent by the Alabama Certified Nurse Aide Registry.

(b) Non-permanent Employees. A facility must not use on a temporary, per diem, leased, or any basis other than a permanent employee, any individual who does not meet the requirements in paragraphs (a) above or (c) below as a nurse aide.

(c) Competency. A facility must not use any individual who has worked less than 4 months as a nurse aide in that facility unless the individual:

1) Is a full-time employee in a state-approved training and competency evaluation program;

2) Has demonstrated competence through satisfactory participation in a state-approved nurse aide training and competency evaluation program; or

3) Has been deemed or determined competent by the Alabama Nurse Aide Registry.

(5) Registry Verification.

(a) Before allowing an individual to serve as a nurse aide, a facility must receive registry verification that the individual has met competency evaluation requirements unless:

1) The individual is a full-time employee in a training and competency evaluation program approved by the state; or

2) The individual can prove that he or she has recently successfully completed a training and competency evaluation program or competency evaluation program approved by the state and has not yet been included in the registry. Facilities must follow up to ensure that such an individual actually becomes registered.

(b) Multi-state Registry Verification. Before allowing an individual to serve as a nurse aide, a facility must seek information from every state registry established under sections 1819(e)(2)(A) or 1919(e)(2)(A) of the Act that the facility believes will include information on the individual as well as the Department of Human Resources Adult Protective Abuse Registry.

(c) Required Retraining. If, since an individual's most recent completion of a training and competency evaluation program, there has been a continuous period of 24 consecutive months during none of which the individual provided nursing or nursing-related services for monetary compensation, the individual must complete a new training and competency evaluation program or a new competency evaluation program.

(6) Regular In-service Education. The facility must complete a performance review of every nurse aide at least once every 12 months and must provide regular in-service education based on the outcome of these reviews. In-service training must comply with the requirements of 420-5-10-.24.

(7) Nursing Facilities. Waiver of requirement to provide licensed nurses on a 24-hour basis. To the extent that a facility is unable to meet the requirements of paragraphs 3(a) and (b) of this section, a state may waive such requirements with respect to the facility if:

(a) The facility demonstrates to the satisfaction of the state that the facility has been unable, despite diligent efforts (including offering wages at the community prevailing

rate for nursing facilities), to recruit appropriate personnel.

(b) The state determines that a waiver of the requirement will not endanger the health or safety of individuals staying in the facility.

(c) The state finds that, for any periods in which licensed nursing services are not available, a registered nurse or a physician is obligated to respond immediately to telephone calls from the facility.

(d) A waiver granted under the conditions listed in paragraph (7)(a) of this section is subject to annual state review.

(e) In granting or renewing a waiver, a facility may be required by the state to use other qualified, licensed personnel.

(f) The state agency granting a waiver of such requirements provides notice of the waiver to the Office of the State Long-Term Care Ombudsman (established under section 712 of the Older Americans Act of 1965) and the protection and advocacy system in the state for individuals with a mental disorder who are eligible for such services as provided by the protection and advocacy agency.

(g) The nursing facility that is granted such a waiver by a state notifies residents of the facility and their resident representatives of the waiver.

(8) SNFs. Waiver of the Requirement to Provide Services of a Registered Nurse for More Than 40 Hours a Week. The secretary of the federal Health and Human Services Agency may waive the requirement that an SNF provide the services of a registered nurse for more than 40 hours a week, including a director of nursing specified in paragraph (3)(b) of this section, if the secretary finds that:

(a) The facility is located in a rural area and the supply of skilled nursing facility services in the area is not sufficient to meet the needs of individuals residing in the area.

(b) The facility has one full-time registered nurse who is regularly on duty at the facility 40 hours a week.

(c) The facility either:

1) Has only patients whose physicians have indicated (through physicians' orders or admission notes) that they do not require the services of a registered nurse or a physician for a 48-hour period; or

2) Has made arrangements for a registered nurse or a physician to spend time at the facility, as determined necessary by the physician, to provide necessary skilled nursing services on days when the regular full-time registered nurse is not on duty.

(d) The secretary provides notice of the waiver to the Office of the State Long-Term Care Ombudsman (established under section 712 of the Older Americans Act of 1965) and the protection and advocacy system in the state for individuals with developmental disabilities or mental disorders.

(e) The facility that is granted such a waiver notifies residents of the facility and their resident representatives of the waiver.

(9) Nurse Staffing Information.

(a) Data Requirements. The facility must post the following information daily:

1) Facility name.

2) The current date.

3) The total number and the actual hours worked by the following categories of licensed and unlicensed nursing staff directly responsible for resident care per shift:

a. Registered nurses.

b. Licensed practical nurses or licensed vocational nurses (as defined under state law).

c. Certified nurse aides.

d. Resident census.

(b) Posting Requirements. The facility must post the nurse staffing data specified in paragraph (a) of this section daily at the beginning of each shift. Data must be posted as follows:

1) Clear and readable format.

2) In a prominent place readily accessible to residents and visitors.

(c) Public access to posted nurse staffing data. The facility must, upon oral or written request, make nurse staffing data available to the public for review at a cost not to exceed the community standard.

(d) Facility Data Retention Requirements. The facility must maintain the posted daily nurse staffing data for a minimum of 18 months, or as required by state law, whichever is greater.

Author: Patricia E. Ivie, Nancy L. Eady
Statutory Authority: Code of Ala. 1975, §§22-21-20, et seq.
History: Repealed and Replaced: Filed July 19, 1996; effective August 23, 1996. **Repealed and New Rule:** Published September 30, 2026; effective November 14, 2026.