



Office of Health Assurance and Licensing

## **NURSING HOME**

### **Initial Application – Notice of Readiness**

#### **Notice of Readiness for Nursing Home Licensure Inspection**

The Ohio Department of Health, Office of Health Assurance and Licensing, will attempt to schedule an inspection within eight (8) weeks of receiving a complete application and a “Notice of Readiness” form. The home may admit up to, but no more than, two (2) residents before the home has received a nursing home license.

By completing this form, the operator attests to meeting all applicable nursing home licensure requirements set forth in Chapter 3721. of the Revised Code (RC) and Chapter 3701-17 of the Ohio Administrative Code (OAC). Below is a list of requirements. The list is not intended to be all inclusive:

<b>Requirement</b>	<b>Law/Rule Reference</b>
Residents’ rights notices/policies/postings	RC 3721.12 and 3721.13
Qualified staff	OAC 3701-17-06 & 3701-17-07
Licensed Nursing Home Administrator	OAC 3701-17-06
Medical Director	OAC 3701-17-13
Director of Nursing	OAC 3701-17-08
Food Service Manager and Dietician	OAC 3701-17-18
Direct care staff	OAC 3701-17-07.1
Activities Director and Social Services Director	OAC 3701-17-09
Quality Assurance Committee	OAC 3701-17-06
All policies and procedures, including, but not limited to:	
Infection control	OAC 3701-17-11
Food service policy to accommodate religious, ethnic and cultural/personal preferences	OAC 3701-17-18
Temperatures in resident areas outside acceptable temperature range	OAC 3701-17-24
Call signal system in good working order	OAC 3701-17-16
Functioning kitchen and food service facilities; planned menus; and sufficient food supplies	OAC 3701-17-18
Resident records and reports	OAC 3701-17-19
Written Disaster Preparedness Plan and postings	OAC 3701-17-25
Room/area suitable for dining and recreation	OAC 3701-17-21
Laundry facilities and supplies	OAC 3701-17-11 and 3701-17-21
Bathrooms and toilet rooms in compliance with Ohio building code; one toilet room directly accessible for each resident sleeping room	OAC 3701-17-21 and 3701-17-22
Bed, bedside table, bedside light, bureau or equivalent comfortable chair, waste basket and adequate closet space for each resident	OAC 3701-17-16 and 3701-17-23



Supplies and equipment necessary to provide services	OAC 3701-17-16 and 3701-17-17
Arrangement for pharmacy services	OAC 3701-17-17

Application has been submitted for:

- ☐ Medicaid participation
- ☐ Medicare participation
- ☐ Not Applicable

If an application has been submitted for Medicare and/or Medicaid participation, do you want the licensure inspection to occur on or about the same time as the Medicare/Medicaid certification survey?

- ☐ Yes. If yes, the licensure inspection will not be scheduled until a complete Medicare and/or Medicaid application is received by the Office of Health Assurance and Licensing.
- ☐ No. If no, the licensure inspection will be scheduled regardless of whether the Office of Health Assurance and Licensing has received a complete Medicare and/or Medicaid application.

**Name of Home:**

**Address of Home:**

**By signing this document, I am stating that the home listed above is or will be ready for licensure inspection on . I understand that failure to be ready for inspection on this date may result in a denial of the license application.**

**Print/type name and title of undersigned:**

**Signature:**