

1 10A NCAC 13K .0401 is proposed for readoption with substantive changes as follows:

2  
3 **SECTION .0400 - PERSONNEL**

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5 **10A NCAC 13K .0401 PERSONNEL**

6 (a) Written policies shall be established and implemented by the agency regarding infection control and exposure to  
7 communicable diseases consistent with the rules set forth in 10A NCAC 41A. 41A, which is incorporated by reference,  
8 including subsequent amendments and editions. These policies and procedures shall include provisions for compliance  
9 with 29 CFR 1910 (~~Occupational~~ Occupational Safety and Health ~~Standards~~) Standards, which is incorporated by  
10 reference including subsequent ~~amendments.~~ amendments and editions. ~~Emphasis shall be placed on compliance with~~  
11 These editions shall include 29 CFR 1910.1030 (Airborne and Bloodborne Pathogens). Bloodborne Pathogens.  
12 Copies of Title 29 Part 1910 can be ~~purchased from the Superintendent of Documents, U.S. Government Printing~~  
13 ~~Office, P.O. Box 371954, Pittsburgh, PA 15250 7954 or by calling Washington, D.C. (202) 512 1800. The cost is~~  
14 ~~twenty one dollars (\$21.00) and may be purchased with a credit card.~~ obtained online at no charge at  
15 [https://www.osha.gov/pls/oshaweb/owadisp.show\\_document?p\\_id=10051&p\\_table=STANDARDS](https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_id=10051&p_table=STANDARDS).

16 (b) Hands-on care employees ~~must~~ shall have a baseline ~~skin~~ test for tuberculosis. Individuals who test positive ~~must~~  
17 shall demonstrate non-infectious status prior to assignment in a patient's home. Individuals who have previously tested  
18 positive to the tuberculosis ~~skin~~ test shall obtain a baseline and subsequent annual verification that they are free of  
19 tuberculosis symptoms. The verification shall be obtained from the local health department, a private ~~physician~~  
20 physician, or health nurse employed by the agency. The ~~Tuberculosis Control~~ Communicable Disease Branch of the  
21 North Carolina Department of Health and Human Services, Division of Public Health, ~~4902~~ 1905 Mail Service Center,  
22 Raleigh, NC ~~27699 1902~~ 27699-1905 will ~~provide,~~ provide free of charge guidelines for conducting and verification  
23 utilizing and Form ~~DEHNR~~ DHHS 3405 (Record of Tuberculosis Screening). Employees identified by agency risk  
24 assessment to be at risk for exposure ~~are required to~~ shall be subsequently tested ~~at intervals prescribed by OSHA~~  
25 ~~standards.~~ in accordance with Centers for Disease Control (CDC) guidelines, which is incorporated by reference with  
26 subsequent amendments and editions. A copy of the CDC guidelines can be obtained online at no charge at  
27 <https://search.cdc.gov/search/?query=TB+testing+intervals&sitelimit=&utf8=%E2%9C%93&affiliate=cdc-main>.

28 (b)(c) Written policies shall be established and implemented ~~which~~ by the agency that include personnel record  
29 content, orientation, patient family volunteer training, and in-service education. Records on the subject of in-service  
30 education and attendance shall be maintained by the agency and retained for ~~at least~~ one year.

31 (e)(d) Job descriptions for every position, including volunteers involved in direct patient/family services, shall be  
32 established ~~in writing which~~ by the agency and shall include the position's qualifications and specific responsibilities.  
33 ~~Individuals~~ Hospice team member(s) shall be assigned only to duties ~~for which that~~ they are trained and competent to  
34 ~~perform and when applicable for which they are properly licensed.~~ perform, or licensed to perform.

35 (d)(e) Personnel records shall be established and maintained for ~~all hospice staff,~~ team, both paid and direct  
36 patient/family services volunteers. These records shall be maintained ~~at least for~~ for one year after ~~termination from~~

1 ~~agency employment.~~ employment or volunteer service ends. When ~~requested,~~ requested by the State surveyors, the  
 2 records shall be available on the agency premises for inspection by the Department. The records shall include:

- 3 (1) an application or resume ~~which that~~ lists education, ~~training~~ training, and previous employment that  
 4 can be verified, including job title;
- 5 (2) a job description with record of acknowledgment by the ~~staff;~~ team member(s);
- 6 (3) reference checks or verification of previous employment;
- 7 (4) records of tuberculosis annual screening for ~~those employees for whom the test is necessary as~~  
 8 ~~described in Paragraph (a) of this Rule;~~ hands-on care team;
- 9 (5) documentation of Hepatitis B immunization or declination for hands on care ~~staff;~~ team;
- 10 (6) ~~airborne and~~ bloodborne pathogen training for ~~hands-on~~ hands-on care ~~staff;~~ team, including annual  
 11 updates, in compliance with 29 CFR 1910 and in accordance with the agency's exposure control  
 12 plan;
- 13 (7) performance evaluations according to agency ~~policy and~~ policy, or at least annually;
- 14 (8) verification of ~~staff credentials as applicable;~~ team member(s) credentials;
- 15 (9) records of the verification of competencies by agency supervisory personnel of ~~all~~ skills required of  
 16 hospice services personnel to carry out patient care ~~tasks to which the staff is assigned.~~ tasks. The  
 17 method of verification shall be defined in agency policy.

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 19 *History Note:* Authority G.S. 131E-202;  
 20 Eff. November 1, 1984;  
 21 Amended Eff. February 1, 1996; November 1, ~~1989~~ 1989;  
 22 Readopted Eff. January 1, 2021.