RULES 10A NCAC 13F FOR ADULT CARE HOMES OF SEVEN OR MORE BEDS



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contents of the proposal; and then extended an opportunity to request a conference with the agency proposing the administrative penalty, allowing the licensee 10 days to respond prior to forwarding the proposal to the Department. The conference, if requested of the county department of social services, shall include the county department director or his designee. The licensee may request a conference and produce information to cause the agency recommending the administrative penalty to change its proposal. The agency recommending the administrative penalty may rescind its proposal; or change its proposal and submit it to the Department or submit it unchanged to the Department pursuant to G.S. 131D-34(c2).

(b) An assistant chief of the Adult Care Licensure Section shall receive the proposal, review it for completeness and evaluate it to determine the penalty amount. If the proposal is complete, the assistant chief shall make a decision on the amount of penalty to be submitted for consideration and whether to recommend training in lieu of an administrative penalty pursuant to G.S. 131D-34(g1). If the proposal is incomplete, the assistant chief shall contact the agency that submitted the proposal to request necessary changes or additional material. When the proposal is complete and the amount of penalty determined, the assistant chief shall forward the proposal to the administrative penalty monitor for processing. If the assistant chief recommends training in lieu of an administrative penalty pursuant to G.S. 131D-34(g1), the recommendation shall be forwarded with the proposal.

(c) The Department shall notify the licensee by certified mail within 10 working days from the time the proposal is received by the administrative penalty monitor that an administrative penalty is being considered.

(d) The licensee shall have 10 working days from receipt of the notification to provide both the Department and the county department of social services any additional information relating to the proposed administrative penalty.

(e) If a facility fails to correct a Type A or a Type B violation within the time specified on the plan of correction, an assistant chief of the Adult Care Licensure Section shall make a decision on the amount of penalty pursuant to G.S. 131D-34(b)(1) and (2) and submit a penalty proposal for consideration by the Penalty Review Committee.

(f) The Penalty Review Committee shall consider Type A violations and Type A and Type B violations that have not been corrected within the time frame specified on the plan of correction. Providers, complainants, affected parties and any member of the public may attend Penalty Review Committee meetings. The Penalty Review Committee chair may ask questions of any of these persons, as resources, during the meeting. Time shall be allowed during the meeting for individual presentations which provide pertinent additional information. The order in which presenters speak and the length of each presentation shall be at the discretion of the Penalty Review Committee chair.

(g) The Penalty Review Committee shall have for review the entire record relating to the penalty recommendation and shall make recommendations after review of administrative penalty proposals, any supporting evidence, any additional information submitted by the licensee as described in Paragraph (d) of this Rule and the factors specified in G.S. 131D-34(c).

(h) There shall be no taking of sworn testimony or cross-examination of anyone during the course of the Penalty Review Committee meetings.

(i) If the Penalty Review Committee determines that the licensee has violated applicable rules or statutes, the Penalty Review Committee shall recommend an administrative penalty for each violation pursuant to G.S. 131D-34. Recommendations for adult care home penalties shall be submitted to the Chief of the Adult Care Licensure Section who shall have five working days from the date of the Penalty Review Committee meeting to determine and impose administrative penalties for each violation or require staff training pursuant to G.S. 131D-34(g1) and notify the licensee by certified mail.

(j) The licensee shall have 60 days from receipt of the notification to pay the penalty or shall file a petition for a contested case with the Office of Administrative Hearings within 30 days of the mailing of the notice of penalty imposition as provided by G.S. 131D-34.

History Note:

Authority G.S. 131D-2; 131D-34; 143B-165; S.L. 2002-0160; Eff. December 1, 1993; Temporary Amendment Eff. July 1, 2003; Amended Eff. June 1, 2004.

SECTION .0300 - PHYSICAL PLANT

10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows:

(1) New construction shall comply with the requirements of this Section.

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- (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Facility Services, 701 Barbour Drive, Raleigh, North Carolina, 27603 at no cost;
- New additions, alterations, modifications and repairs shall meet the technical requirements of this Section;
- Effective July 1, 1987, resident bedrooms and resident services shall not be permitted on the second floor of any facility licensed for seven or more beds prior to April 1, 1984 and classified as two-story wood frame construction by the North Carolina State Building Code;
- Rules in this Section are minimum requirements and are not intended to prohibit buildings, systems or operational conditions that exceed minimum requirements;
- (6) The bed capacity and services provided in a facility shall be in compliance with G.S. 131E, Article 9 regarding Certificate of Need. A facility shall be licensed for no more beds than the number for which required physical space and other required facilities are available;
- (7) Equivalency: Alternate methods, procedures, design criteria and functional variations from the physical plant requirements shall be approved by the Division when the facility can effectively demonstrate that the intent of the physical plant requirements are met and that the variation does not reduce the safety or operational effectiveness of the facility; and
- (8) Where rules, codes or standards have any conflict, the most stringent requirement shall apply and any conflicting requirement shall not apply.

History Note: Authority G.S. 131D-2; 143B-165; S.L. 2002-0160; 2003-0284; Temporary Adoption Eff. July 1, 2004; Eff. July 1, 2005.

10A NCAC 13F.0302 DESIGN AND CONSTRUCTION

(a) Any building licensed for the first time as an adult care home shall meet the requirements of the North Carolina State Building Code for new construction. All new construction, additions and renovations to existing buildings shall meet the requirements of the North Carolina State Building Code for I-2 Institutional Occupancy if the facility houses 13 or more residents or the North Carolina State Building Code requirements for Large Residential Care Facilities if the facility houses seven to twelve residents. The North Carolina State Building Code, all applicable volumes, which is incorporated by reference, including all subsequent amendments may be purchased from the Department of Insurance Engineering Division located at 322 Chapanoke Road, Suite 200, Raleigh, North Carolina 27603 at a cost of three hundred eighty dollars (\$380.00). The facility shall also meet all of the rules of this Section.

(b) Each facility shall be planned, constructed, equipped and maintained to provide the services offered in the facility.
(c) Any existing building converted from another use to an adult care home shall meet all requirements of a new facility.
(d) Any existing licensed facility that is closed or vacant for more than one year shall meet all requirements of a new

facility.

(e) The sanitation, water supply, sewage disposal and dietary facilities shall comply with the rules of the

North Carolina Division of Environmental Health, which are incorporated by reference, including all subsequent amendments. The "Rules Governing the Sanitation of Hospitals, Nursing and Rest Homes, Sanitariums, Sanatoriums, and Educational and Other Institutions", 15A NCAC 18A .1300 are available for inspection at the Department of Environment and Natural Resources, Division of Environmental Health, 2728 Capital Boulevard, Raleigh, North Carolina. Copies may be obtained from Environmental Health Services Section, 1632 Mail Service Center, Raleigh, North Carolina 27699-1632 at no cost.

(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.

History Note: Authority G.S. 131D-2; 143B-165; S.L. 2002-0160; 2003-0284; Eff. January 1, 1977; Readopted Eff. October 31, 1977; Amended Eff. July 1, 1990; September 1, 1986; April 1, 1984; Temporary Amendment Eff. September 1, 2003; Amended Eff. June 1, 2004; Temporary Amendment Eff. July 1, 2004; Amended Eff. July 1 2005.

10A NCAC 13F.0303 LOCATION

(a) An adult care home shall be in a location approved by local zoning boards.

(b) The facility shall be located so that hazards to the occupants are minimized.

(c) Plans for the building and site are to be reviewed and approved by the Construction Section of the Division of Facility Services prior to licensure.

(d) An adult care home may be located in an existing building or in a building newly constructed specifically for that purpose.

(e) The site of the proposed facility shall be approved by the Division of Facility Services prior to construction and shall:

- (1) be accessible by streets, roads and highways and be maintained for motor vehicles and emergency vehicle access;
- (2) be accessible to fire fighting and other emergency services;
- (3) have a water supply, sewage disposal system, garbage disposal system and trash disposal system approved by the local health department having jurisdiction;
- (4) meet all local ordinances and zoning laws; and
- (5) be free from exposure to pollutants known to the applicant or licensee.

History Note:

ote: Authority G.S. 131D-2; 143B-165; S.L. 2002-0160; 2003-0284;

Eff. January 1, 1977; Readopted Eff. October 31, 1977:

Amended Eff. January1, 1991; April 1, 1984;

Temporary Amendment Eff. July 1, 2003.

Amended Eff. June 1, 2004; Recodified from Rule .0301 Eff. July 1, 2004;

Temporary Amendment Eff. July 1, 2004;

Amended Eff. July 1, 2005.

10A NCAC 13F.0304 PLANS AND SPECIFICATIONS

(a) When construction or remodeling of an adult care home is planned, two copies of Construction Documents and specifications shall be submitted by the applicant or appointed representative to the Division for review and approval. As a preliminary step to avoid last minute difficulty with final plan approval, Schematic Design Drawings and Design Development Drawings may be submitted for approval prior to the required submission of Construction Documents.
(b) Approval of Construction Documents and specifications shall be obtained from the Division prior to licensure.

Approval of Construction Documents shall expire after one year unless a building permit for the construction has been obtained.

(c) If an approval expires, renewed approval shall be issued by the Division, provided revised Construction Documents meeting all current regulations, codes and standards are submitted by the applicant or appointed representative and reviewed by the Division.

(d) Any changes made during construction shall require the approval of the Division to assure that licensing requirements are maintained.

(e) Completed construction or remodeling shall conform to the requirements of this Section including the operation of all building systems and shall be approved in writing by the Division prior to licensure or occupancy. Within 90 days following licensure, the owner or licensee shall submit documentation to the Division that "as built" drawings have been received from the builder.

(f) The applicant or designated agent shall notify the Division when actual construction or remodeling starts and at points when construction is 50 percent, 75 percent and 90 percent complete and upon final completion.

History Note: Authority G.S. 131D-2; 143B-165; S.L. 2002-0160; 2003-0284; Temporary Adoption Eff. July 1, 2004; Eff. July 1, 2005.

PHYSICAL ENVIRONMENT 10A NCAC 13F .0305

(a) An adult care home shall provide living arrangements to meet the individual needs of the residents, the live-in staff and other live-in persons.

(b) The requirements for each living room and recreational area are:

- Each living room and recreational area shall be located off a lobby or corridor. At least 50 percent of (1)required living and recreational areas shall be enclosed with walls and doors;
 - In buildings with a licensed capacity of 15 or less, there shall be a minimum area of 250 square feet; (2)
- In buildings with a licensed capacity of 16 or more, there shall be a minimum of 16 square feet per (3) resident: and
- Each living room and recreational area shall have windows. (4)
- (c) The requirements for the dining room are:
 - The dining room shall be located off a lobby or corridor and enclosed with walls and doors; (1)
 - In buildings with a licensed capacity of 15 or less, there shall be a minimum of 200 square feet; (2)
 - In building with a licensed capacity of 16 or more, there shall be a minimum of 14 square feet per (3)resident; and
 - The dining room shall have windows. (4)
- (d) The requirements for the bedroom are:
 - The number of resident beds set up shall not exceed the licensed capacity of the facility; (1)
 - There shall be bedrooms sufficient in number and size to meet the individual needs according to age (2)and sex of the residents, any live-in staff and other persons living in the home. Residents shall not share bedrooms with staff or other live-in non-residents;
 - Only rooms authorized as bedrooms shall be used for residents' bedrooms; (3)
 - Bedrooms shall be located on an outside wall and off a corridor. A room where access is through a (4) bathroom, kitchen, or another bedroom shall not be approved for a resident's bedroom;
 - There shall be a minimum area of 100 square feet excluding vestibule, closet or wardrobe space in (5) rooms occupied by one person and a minimum area of 80 square feet per bed, excluding vestibule, closet or wardrobe space, in rooms occupied by two people;
 - The total number of residents assigned to a bedroom shall not exceed the number authorized for that (6) particular bedroom;
 - A bedroom may not be occupied by more than two residents. (7)
 - Resident bedrooms shall be designed to accommodate all required furnishings; (8)
 - Each resident bedroom shall be ventilated with one or more windows which are maintained operable (9) and well lighted. The window area shall be equivalent to at least eight percent of the floor space and be provided with insect screens. The window opening may be restricted to a six-inch opening to inhibit resident elopement or suicide. The windows shall be low enough to see outdoors from the bed and chair, with a maximum 36 inch sill height; and
 - Bedroom closets or wardrobes shall be large enough to provide each resident with a minimum of 48 (10)cubic feet of clothing storage space (approximately two feet deep by three feet wide by eight feet high) of which at least one-half shall be for hanging clothes with an adjustable height hanging bar.
- (e) The requirements for bathrooms and toilet rooms are:
 - Minimum bathroom and toilet facilities shall include a toilet and a hand lavatory for each 5 residents (1)and a tub or shower for each 10 residents or portion thereof;
 - Entrance to the bathroom shall not be through a kitchen, another person's bedroom, or another (2)bathroom:
 - Toilets and baths for staff and visitors shall be in accordance with the North Carolina State Building (3) Code, Plumbing Code;
 - Bathrooms and toilets accessible to the physically handicapped shall be provided as required by (4) Volume I-C, North Carolina State Building Code, Accessibility Code;
 - The bathrooms and toilet rooms shall be designed to provide privacy. Bathrooms and toilet rooms with (5)two or more water closets (commodes) shall have privacy partitions or curtains for each water closet. Each tub or shower shall have privacy partitions or curtains;
 - Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents; (6)
 - Each home shall have at least one bathroom opening off the corridor with: (7)
 - a door of three feet minimum width; (A)

- (B) a three feet by three feet roll-in shower designed to allow the staff to assist a resident in taking a shower without the staff getting wet;
- (C) a bathtub accessible on at least two sides;
- (D) a lavatory; and
- (E) a toilet.
- (8) If the tub and shower are in separate rooms, each room shall have a lavatory and a toilet;
- Bathrooms and toilet rooms shall be located as conveniently as possible to the residents' bedrooms;
 Resident toilet rooms and bathrooms shall not be utilized for storage or purposes other than those indicated in Item (4) of this Rule;
- (11) Toilets and baths shall be well lighted and mechanically ventilated at two cubic feet per minute. The mechanical ventilation requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation;
- (12) Nonskid surfacing or strips shall be installed in showers and bath areas; and
- (13) The floors of the bathrooms and toilet rooms shall have water-resistant covering.
- (f) The requirements for storage rooms and closets are:
 - (1) General Storage for the Home. A minimum area of five square feet (40 cubic feet) per licensed capacity shall be provided. This storage space shall be either in the facility or within 500 feet of the facility on the same site;
 - (2) Linen Storage. Storage areas shall be adequate in size and number for separate storage of clean linens and separate storage of soiled linens. Access to soiled linen storage shall be from a corridor or laundry room;
 - (3) Food Storage. Space shall be provided for dry, refrigerated and frozen food items to comply with sanitation rules;
 - (4) Housekeeping storage requirements are:
 - (A) A housekeeping closet, with mop sink or mop floor receptor, shall be provided at the rate of one per 60 residents or portion thereof; and
 - (B) There shall be separate locked areas for storing cleaning agents, bleaches, pesticides, and other substances which may be hazardous if ingested, inhaled or handled. Cleaning supplies shall be monitored while in use;
 - (5) Handwashing facilities with wrist type lever handles shall be provided immediately adjacent to the drug storage area;
 - (6) Storage for Resident's Articles. Some means for residents to lock personal articles within the home shall be provided; and
 - (7) Staff Facilities. Some means for staff to lock personal articles within the home shall be provided.
- (g) The requirements for corridors are:
 - (1) Doors to spaces other than reach-in closets shall not swing into the corridor;
 - (2) Handrails shall be provided on both sides of corridors at 36 inches above the floor and be capable of supporting a 250 pound concentrated load;
 - (3) Corridors shall be lighted with night lights providing 1 foot-candle power at the floor; and
 - (4) Corridors shall be free of all equipment and other obstructions.
- (h) The requirements for outside entrances and exits are:
 - (1) Service entrances shall not be through resident use areas;
 - (2) All steps, porches, stoops and ramps shall be provided with handrails and guardrails;
 - (3) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys; and
 - (4) In homes with at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer, each exit door accessible by residents shall be equipped with a sounding device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. If a central system of remote sounding devices is provided, the control panel for the system shall be located in the office of the administrator or in a location accessible only to staff authorized by the administrator to operate the control panel.
- (i) The requirements for floors are:
 - (1) All floors shall be of smooth, non-skid material and so constructed as to be easily cleanable;
 - (2) Scatter or throw rugs shall not be used; and
 - (3) All floors shall be kept in good repair.

(j) Soil Utility Room. A separate room shall be provided and equipped for the cleaning and sanitizing of bed pans and shall have handwashing facilities.

(k) Office. There shall be an area within the home large enough to accommodate normal administrative functions.

(1) The requirements for laundry facilities are:

- (1) Laundry facilities shall be large enough to accommodate washers, dryers, and ironing equipment or work tables;
- (2) These facilities shall be located where soiled linens will not be carried through the kitchen, dining, clean linen storage, living rooms or recreational areas; and
- (3) A minimum of one residential type washer and dryer each shall be provided in a separate room which is accessible by staff, residents and family, even if all laundry services are contracted.
- (m) The requirements for outside premises are:
 - (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition;
 - (2) If the home has a fence around the premises, the fence shall not prevent residents from exiting or entering freely or be hazardous; and
 - (3) Outdoor walkways and drives shall be illuminated by no less than five foot-candles of light at ground level.

(n) Alternate methods, procedures, design criteria and functional variations from the physical environment requirements, because of extraordinary circumstances, new programs or unusual conditions, shall be approved by the Division when the facility can effectively demonstrate to the Division's satisfaction that the intent of the physical environment requirements are met and the variation does not reduce the safety or operational effectiveness of the facility.

History Note:

Authority G.S. 131D-2; 131D-4.5; 143B-165; S.L. 1999-0334; 2002-0160; 2003-0284; Eff. January 1, 1977;
 Readopted Eff. October 31, 1977;
 Amended Eff. July 1, 1990; April 1, 1987; July 1, 1984; April 1, 1984;
 Temporary Amendment Eff. December 1, 1999;
 Amended Eff. July 1, 2000;
 Recodified from Rule .0303 Eff. July 1, 2004;
 Temporary Amendment Eff. July 1, 2004;
 Amended Eff. July 1, 2005.

10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS

(a) Adult care homes shall:

- (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;
- (2) have no chronic unpleasant odors;
- (3) have furniture clean and in good repair;
- (4) have a North Carolina Division of Environmental Health approved sanitation classification at all times in facilities with 12 beds or less and North Carolina Division of Environmental Health sanitation scores of 85 or above at all times in facilities with 13 beds or more;
- (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards;
- (6) have a supply of bath soap, clean towels, washcloths, sheets, pillow cases, blankets, and additional coverings adequate for resident use on hand at all times;
- (7) make available the following items as needed through any means other than charge to the personal funds of recipients of State-County Special Assistance:
 - (A) protective sheets and clean, absorbent, soft and smooth pads;
 - (B) bedpans, urinals, hot water bottles, and ice caps; and
 - (C) bedside commodes, walkers, and wheelchairs;
- (8) have television and radio, each in good working order;
- (9) have curtains, draperies or blinds at windows in resident use areas to provide for resident privacy;
- (10) have recreational equipment, supplies for games, books, magazines and a current newspaper available for residents;
- (11) have a clock that has numbers at least 1½ inches tall in an area commonly used by the residents; and
 (12) have at least one telephone that does not depend on electricity or cellular service to operate.

(b) Each bedroom shall have the following furnishings in good repair and clean for each resident:

- (1)A bed equipped with box springs and mattress or solid link springs and no-sag innerspring or foam mattress. Hospital bed appropriately equipped shall be arranged for as needed. A water bed is allowed if requested by a resident and permitted by the home. Each bed shall have the following: at least one pillow with clean pillow case; (A)

 - clean top and bottom sheets on the bed, with bed changed as often as necessary but at least (B) once a week: and
 - (C) clean bedspread and other clean coverings as needed;
- a bedside type table: (2)
- chest of drawers or bureau when not provided as built-ins, or a double chest of drawers or double (3)dresser for two residents:
- a wall or dresser mirror that can be used by each resident; (4)
- a minimum of one comfortable chair (rocker or straight, arm or without arms, as preferred by resident), (5) high enough from floor for easy rising;
- (6) additional chairs available, as needed, for use by visitors;
- individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (7)
- (8) a light overhead of bed with a switch within reach of person lying on bed; or a lamp. The light shall provide a minimum of 30 foot-candle power of illumination for reading.

(c) The living room shall have functional living room furnishings for the comfort of aged and disabled persons, with coverings that are easily cleanable.

(d) The dining room shall have the following furnishings:

- (1)small tables serving from two to eight persons and chairs to seat all residents eating in the dining room; tables and chairs equal to the resident capacity of the home shall be on the premises; and
- chairs that are sturdy, without rollers unless retractable or on front legs only, non-folding and designed (2)to minimize tilting.

(e) This Rule shall apply to new and existing facilities.

History Note: Authority G.S. 131D-2; 143B-165; S.L. 2002-0160; 2003-0284; Eff. January 1, 1977; Readopted Eff. October 31, 1977; Amended Eff. April 1, 1987; April 1, 1984; Temporary Amendment Eff. September 1, 2003. Amended Eff. June 1, 2004; Recodified from Rule .0304 Eff. July 1, 2004; Temporary Amendment Eff. July 1, 2004; Amended Eff. July 1, 2005.

10A NCAC 13F.0307 FIRE ALARM SYSTEM

(a) The fire alarm system in adult care homes shall be able to transmit the fire alarm signal automatically to the local emergency fire department dispatch center, either directly or through a central station monitoring company connection. (b) Any applicable fire safety requirements required by city ordinances or county building inspectors shall be provided. (c) In a facility licensed before April 1, 1984 and constructed prior to January 1, 1975, the building, in addition to meeting the requirements of the North Carolina State Building Code in effect at the time the building was constructed, shall be provided with the following:

- A fire alarm system with pull stations within five feet of each exit and sounding devices which are (1)audible throughout the building;
- Products of combustion (smoke) U/L listed detectors in all corridors. The detectors shall be no more (2)than 60 feet from each other and no more than 30 feet from any end wall;
- Heat detectors or products of combustion detectors in all storage rooms, kitchens, living rooms, dining (3) rooms and laundries;
- All detection systems interconnected with the fire alarm system; and (4)
- Emergency power for the fire alarm system, heat detection system, and products of combustion (5) detection with automatic start generator or trickle charge battery system capable of operating the fire alarm systems for 24 hours and able to sound the alarm for five minutes at the end of that time. Emergency egress lights and exit signs shall be powered from an automatic start generator or a U/L approved trickle charge battery system capable of operation for 1-1/2 hours when normal power fails.

(d) When any facility not equipped with a complete automatic fire extinguishment system replaces the fire alarm system, each bedroom shall be provided with smoke detectors. Other building spaces shall be provided with such fire detection devices as required by the North Carolina State Building Code and requirements of this Subchapter.

History Note: Authority G.S. 131D-2; 143B-165; S.L. 2002-0160; 2003-0284; Eff. January 1, 1977; Readopted Eff. October 31, 1977; Amended Eff. April 1, 1984; Recodified from Rule .0305 Eff. July 1, 2004; Temporary Amendment Eff. July 1, 2004; Amended Eff. July 1, 2005.

10A NCAC 13F.0308 FIRE EXTINGUISHERS

(a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof.

(b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop.

History Note:

Authority G.S. 131D-2; 143B-153; Eff. January 1, 1977; Readopted Eff. October 31, 1977; Amended Eff. July 1, 1990; April 1, 1987; April 1, 1984; Recodified from Rule .0306 Eff. July 1, 2004.

10A NCAC 13F.0309 PLAN FOR EVACUATION

(a) A written fire evacuation plan (including a diagrammed drawing) which has the written approval of the local Code Enforcement Official shall be prepared in large print and posted in a central location on each floor of an adult care home. The plan shall be reviewed with each resident on admission and shall be a part of the orientation for all new staff.
(b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire

Prevention Code Enforcement Official.

(c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved.

(d) A written disaster plan, which has the written approval of or has been documented as submitted to the local emergency management agency and the local agency designated to coordinate special needs sheltering during disasters, shall be prepared and updated at least annually and shall be maintained in the facility.

(e) A facility that elects to be designated as a special care shelter during an impending disaster or emergency event shall follow the guidelines established by the latest Division of Social Services' State of North Carolina Disaster Plan which is available at no cost from the N.C. Division of Social Services, 2401 Mail Service Center, Raleigh, NC 27699-2401. The facility shall contact the Division of Facility Services to determine which licensure rules may be waived according to G.S. 131D-7 to allow for emergency care shelter placements prior to sheltering during the emergency event.
(f) This Rule shall apply to new and existing facilities.

History Note:

Authority G.S. 131D-2; 143B-165; S.L. 2002-0160; 2003-0284; Eff. January 1, 1977; Readopted Eff. October 31, 1977; Amended Eff. April 1, 1987; April 1, 1984; Recodified from Rule .0307 Eff. July 1, 2004; Temporary Amendment Eff. July 1, 2004; Amended Eff. July 1, 2005.

10A NCAC 13F.0310 ELECTRICAL OUTLETS

All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters.

History Note: Authority G.S. 131D-2; 143B-165; S.L. 2002-0160; 2003-0284; Eff. January 1, 1977; Readopted Eff. October 31, 1977; Amended Eff. April 1, 1984; Recodified from Rule .0308 Eff. July 1, 2004; Temporary Amendment July 1, 2004; Amended Eff. July 1, 2005.

10A NCAC 13F.0311 OTHER REQUIREMENTS

(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.

(b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances.

- (1) Built-in electric heaters, if used, shall be installed or protected so as to avoid burn hazards to residents and room furnishings.
- (2) Unvented fuel burning room heaters and portable electric heaters are prohibited.
- (3) Fireplaces, fireplace inserts and wood stoves shall be designed or installed so as to avoid a burn hazard to residents. Fireplace inserts and wood stoves shall be U.L. listed.
- (4) Ovens, ranges and cook tops located in resident activity or recreational areas shall not be used except under facility staff supervision. The degree of staff supervision shall be based on the facility's assessment of the capabilities of each resident. The operation of the equipment shall have a locking feature provided, that shall be controlled by staff.
- (5) Ovens, ranges and cook tops located in resident rooms shall have a locking feature provided, controlled by staff, to limit the use of the equipment by residents who have been assessed by the facility to be incapable of operating the equipment in a safe manner.

(c) Air conditioning or at least one fan per resident bedroom and living and dining areas shall be provided when the temperature in the main center corridor exceeds 80 degrees F (26.7 degrees C).

(d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C).

(e) All multi-story facilities shall be equipped with elevators.

(f) In addition to the required emergency lighting, minimum lighting shall be as follows:

- (1) 30 foot-candle power for reading;
- (2) 10 foot-candle power for general lighting; and
- (3) 1 foot-candle power at the floor for corridors at night.

(g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces:

- (1) soiled linen storage;
- (2) soil utility room;
- (3) bathrooms and toilet rooms;
- (4) housekeeping closets; and
- (5) laundry area.

(h) In facilities licensed for 7-12 residents, an electrically operated call system shall be provided connecting each resident bedroom to the live-in staff bedroom. The resident call system activator shall be such that they can be activated with a single action and remain on until deactivated by staff at the point of origin. The call system activator shall be within reach of the resident lying on the bed.

(i) In newly licensed facilities without live-in staff, an electrically operated call system shall be provided connecting each resident bedroom and bathroom to a staff station. The resident call system activator shall be such that they can be activated with a single action and remain on until deactivated by staff at the point of origin. The call system activator shall be within reach of the resident lying on the bed.

(j) Except where otherwise specified, existing facilities housing persons unable to evacuate without staff assistance shall provide those residents with hand bells or other signaling devices.

(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.

History Note:

e: Authority G.S. 131D-2; 143B-165; S.L. 1999-0334; 2002-0160; 2003-0284; Eff. January 1, 1977; Readopted Eff. October 31, 1977; Amended Eff. July 1, 1990; April 1, 1987; April 1, 1984; Temporary Amendment Eff. December 1, 1999; Amended Eff. July 1, 2000; Recodified from Rule .0311 Eff. July 1, 2004; Temporary Amendment Eff. July 1, 2004; Amended Eff. July 1, 2005.

10A NCAC 13F.0312 BUILDING CODE AND SANITATION REQUIREMENTS

History Note:

Authority G.S. 131D-2; 143B-165; S.L .2002-0160; 2003-0284; Eff. January 1, 1977; Readopted Eff. October 31, 1977; Recodified from Rule .0310 Eff. July 1, 2004; Temporary Repeal Eff. July 1, 2004; Repealed Eff. July 1, 2005.

SECTION .0400 - STAFF QUALIFICATIONS

10A NCAC 13F.0401 CERTIFICATION OF ADMINISTRATOR The administrator of an adult care home licensed on or after January 1, 2000, shall be certified by the Department under the provisions of G.S. 90, Article 20A.

History Note: Authority G.S. 90-288; 131D-2; 143B-165; S.L. 1999-0334; S.L. 1999-0443; S.L. 2002-0160; Temporary Adoption Eff. December 1, 1999; Eff. July 1, 2000; Amended Eff. June 1, 2004.

10A NCAC,13F.0402 QUALIFICATIONS OF ADMINISTRATOR-IN-CHARGE

The administrator-in-charge, who is responsible to the administrator for carrying out the program in an adult care home in the absence of the administrator, shall meet the following requirements:

- (1) be 21 years or older;
- (2) be a high school graduate or certified under the G.E.D. program or have passed an alternative examination established by the Department;
- (3) have six months training or experience related to management or supervision in long term care or health care settings or be a licensed health professional, licensed nursing home administrator or certified assisted living administrator; and
- (4) earn 12 hours a year of continuing education credits related to the management of adult care homes or care of aged and disabled persons.

History Note: Authority G.S. 131D-2; 131D-4.5; 143B-165; S.L. 2002-0160; 2003-0284; Eff. January 1, 1977; Readopted Eff. October 31, 1977; Temporary Amendment Eff. December 1, 1999; Amended Eff. July 1, 2000; Temporary Amendment Eff. July 1, 2003; Amended Eff. June 1, 2004.

10A NCAC 13F.0403 QUALIFICATIONS OF MEDICATION STAFF

(a) Adult care home staff who administer medications, hereafter referred to as medication aides, and staff who directly supervise the administration of medications shall have documentation of successfully completing the clinical skills validation portion of the competency evaluation according to Paragraphs (d) and (e) of Rule 10A NCAC 13F .0503 prior

to the administration or supervision of the administration of medications. Persons authorized by state occupational licensure laws to administer medications are exempt from this requirement.

(b) Medication aides and their direct supervisors, except persons authorized by state occupational licensure laws to administer medications, shall successfully pass the written examination within 90 days after successful completion of the clinical skills validation portion of a competency evaluation according to Rule .0503 of this Section.

(c) Medication aides and staff who directly supervise the administration of medications, except persons authorized by state occupational licensure laws to administer medications, shall complete six hours of continuing education annually related to medication administration.

History Note:

 Authority G.S. 131D-2; 131D-4.5; 143B-165; S.L. 1999-0334; 2002-0160; 2003-0284; Temporary Adoption Eff. January 1, 2000; December 1, 1999; Eff. July 1, 2000; Temporary Amendment Eff. July 1, 2004; Amended Eff. July 1, 2005.

10A NCAC 13F.0404 QUALIFICATIONS OF ACTIVITY DIRECTOR

There shall be a designated adult care home activity director who meets the following qualifications:

- (1) The activity director (employed on or after August 1, 1991) shall meet a minimum educational requirement by being at least a high school graduate or certified under the GED Program or by passing an alternative examination established by the Department of Health & Human Services.
- (2) The activity director hired on or after July 1, 2005 shall have completed or complete, within nine months of employment or assignment to this position, the basic activity course for assisted living activity directors offered by community colleges or a comparable activity course as determined by the Department based on instructional hours and content. A person with a degree in recreation administration or therapeutic recreation or who is state or nationally certified as a Therapeutic Recreation Specialist or certified by the National Certification Council for Activity Professionals meets this requirement as does a person who completed the activity coordinator course of 48 hours or more through a community college before July 1, 2005.

History Note: Authority G.S. 131D-2; 143B-165; S.L. 2002-0160; 2003-0284; Eff. January 1, 1977; Readopted Eff. October 31, 1977; Amended Eff. April 1, 1987; April 1, 1984; Temporary Amendment Eff. July 1, 2003; Amended Eff. June 1, 2004; Temporary Amendment Eff. July 1, 2004; Amended Eff. July 1, 2005.

10A NCAC 13F.0405 QUALIFICATIONS OF FOOD SERVICE SUPERVISOR

(a) The food service supervisor shall be experienced in food service and willing to accept consultation from a registered dietitian.

*(b) Rule 10A NCAC 13G .0405 (c) and (d) shall control for this Subchapter.

History Note: Authority G.S. 131D-2; 143B-153; Eff. January 1, 1977; Readopted Eff. October 31, 1977; Amended Eff. April 1, 1987; April 1, 1984.

*This cross- reference is no longer necessary. Rule 13F.0406 is applicable.

10A NCAC 13F.0406 TEST FOR TUBERCULOSIS

(a) Upon employment or living in an adult care home, the administrator and all other staff and any live-in non-residents shall be tested for tuberculosis disease in compliance with control measures adopted by the Commission for Health Services as specified in 10A NCAC 41A .0205 including subsequent amendments and editions. Copies of the rule are available at no charge by contacting the Department of Health and Human Services Tuberculosis Control Program, 1902 Mail Service Center, Raleigh, NC 27699-1902.