

10A NCAC 13D .3003 RESPIRATORY CARE, QUALIFIED PROFESSIONALS, NON-INVASIVE MECHANICAL VENTILATION, SPECIAL REQUIREMENTS FOR INVASIVE MECHANICAL VENTILATION AND STAFFING REQUIREMENTS IN SPECIAL CARE UNIT

- (a) Nursing homes shall comply with 42 CFR 483.25(i), which is incorporated by reference, including subsequent amendments. The Code of Federal Regulations may be accessed online free of charge at <https://ecfr.gov>.
- (b) Facilities having patients who receive non-invasive or invasive mechanical ventilation shall:
- (1) administer respiratory care in accordance with the scope of practice for respiratory therapists defined in G.S. 90-648; and
 - (2) provide pulmonary services from a physician who has training in pulmonary medicine. The physician shall be responsible for respiratory services and shall:
 - (A) establish with the respiratory therapist and nursing staff, ventilator policies and procedures, including emergency procedures;
 - (B) assess each ventilator assisted patient's status at least monthly with corresponding progress notes;
 - (C) respond to emergency communications 24 hours a day; and
 - (D) participate in individual care planning.
- (c) A facility may provide non-invasive mechanical ventilation via a portable respiratory support device designed to assist patients with breathing difficulties according to the manufacturer's instructions and with constant monitoring by qualified staff.
- (d) A facility must not provide patients with mechanical ventilation via an invasive artificial airway using an endotracheal tube or tracheostomy tube unless:
- (1) the Division of Health Service Regulation Construction Section has approved plans, drawings, and life safety code for safe operation of the specialized bed type;
 - (2) the Nursing Home Licensure and Certification Section has reviewed signed contracts for professionals providing pulmonary medicine, respiratory therapy, and durable medical equipment suppliers;
 - (3) the Nursing Home Licensure and Certification Section has reviewed staffing schedules;
 - (4) the Nursing Home Licensure and Certification Section has reviewed job specific orientation, unit policies and procedures, and emergency preparedness; and
 - (5) beds for patients receiving invasive mechanical ventilation are grouped into one specialized care unit and disclosure of the beds is on the nursing home initial, renewal, bed change, or change of ownership application.
- (e) Direct care nursing personnel staffing ratios established in Rule .2303 of this Subchapter shall not be applied to nursing services for patients who reside in a special care unit for residents who receive invasive mechanical ventilation. The minimum direct care nursing staff shall be 5.5 hours per patient day, allocated on a per shift basis as the facility chooses; however, in no event shall the direct care nursing staff fall below a registered nurse and a nurse aide I at any time during a 24-hour period.

*History Note: Authority G.S. 131E-104;
RRC objection due to lack of statutory authority Eff. July 13, 1995;
Eff. January 1, 1996;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. March 22, 2015;
Amended Eff. August 1, 2026; January 1, 2021.*