1	10A NCAC 13	D .2001 is proposed for amendment as follows:
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3		SECTION .2000 – GENERAL INFORMATION
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5	10A NCAC 13	3D .2001 DEFINITIONS
6	In addition to	the definitions set forth in 131E-101, the The following definitions will shall apply throughout this
7	Subchapter:	
8	(1)	"Abuse" means the willful infliction of injury, unreasonable confinement, intimidation of
9		punishment with resulting physical harm, pain, or mental anguish.
10	(2)	"Accident" means an unplanned event resulting in the injury or wounding, no matter how slight, or
11		a patient or other individual.
12	(3)	"Addition" means an extension or increase in floor area or height of a building.
13	(4)	"Administrator" as defined in G.S. 90-276(4).
14	(5)	"Alteration" means any construction or renovation to an existing structure other than repair
15		maintenance, or addition.
16	(6)	"Brain injury long term care" means an interdisciplinary, intensive maintenance program for patients
17		who have incurred brain damage caused by external physical trauma and who have completed a
18		primary course of rehabilitative treatment and have reached a point of no gain or progress for more
19		than three consecutive months. Brain injury long term care is provided through a medically
20		supervised interdisciplinary process and is directed toward maintaining the individual at the optima
21		level of physical, cognitive, and behavioral functions.
22	(7)	"Capacity" means the maximum number of patient or resident beds for which the facility is licensed
23		to maintain at any given time.
24	(8)	"Combination facility" means a combination home as defined in G.S. 131E-101.
25	(9)	"Comprehensive, inpatient rehabilitation program" means a program for the treatment of persons
26		with functional limitations or chronic disabling conditions who have the potential to achieve a
27		significant improvement in activities of daily living, including bathing, dressing, grooming
28		transferring, eating, and using speech, language, or other communication systems. A
29		comprehensive, inpatient rehabilitation program utilizes a coordinated and integrated
30		interdisciplinary approach, directed by a physician, to assess patient needs and to provide treatmen
31		and evaluation of physical, psychosocial, and cognitive deficits.
32	(10)	"Department" means the North Carolina Department of Health and Human Services.
33	(11)	"Director of nursing" means a registered nurse who has authority and direct responsibility for al
34		nursing services and nursing care.
35	(12)	"Discharge" means a physical relocation of a patient to another health care setting, the discharge of
36		a patient to his or her home, or the relocation of a patient from a nursing bed to an adult care home
37		bed, or from an adult care home bed to a nursing bed.

2 licensed facility, or a proposed remodeled licensed facility that will be built according to design 3 development drawings and specifications approved by the Department for compliance with the standards established in Sections .3100, .3200, and .3400 of this Subchapter, to the effective date of 4 5 this Rule. 6 (14)"Facility" means a nursing facility or combination facility as defined in this Rule. 7 (15)"Incident" means any accident, event, or occurrence that is unplanned, or unusual, and has actually 8 caused harm to a patient, or has the potential for harm. 9 (16)"Inpatient rehabilitation facility or unit" means a free-standing facility or a unit (unit pertains to 10 contiguous dedicated beds and spaces) within an existing licensed health service facility approved 11 in accordance with G.S. 131E, Article 9 to establish inpatient, rehabilitation beds and to provide a 12 comprehensive, inpatient rehabilitation program. 13 (17)"Interdisciplinary" means an integrated process involving representatives from disciplines of the 14 health care team. 15 (18)"Licensee" means the person, firm, partnership, association, corporation, or organization to whom 16 a license to operate the facility has been issued. The licensee is the legal entity that is responsible 17 for the operation of the business. 18 (19)"Medication error rate" means the measure of discrepancies between medication that was ordered 19 for a patient by the health care provider and medication that is actually administered to the patient. 20 The medication error rate is calculated by dividing the number of errors observed by the surveyor 21 by the opportunities for error, multiplied times 100. 22 (20)"Misappropriation of property" means the deliberate misplacement, exploitation, or wrongful, 23 temporary or permanent use of a patient's belongings or money without the patient's consent. 24 (21)"Neglect" means a failure to provide goods and services necessary to avoid physical harm, mental 25 anguish, or mental illness. 26 (22)"New facility" means a proposed facility, a proposed addition to an existing facility, or a proposed 27 remodeled portion of an existing facility that will be built according to design development drawings 28 and specifications approved by the Department for compliance with the standards established in 29 Sections .3100, .3200, and .3400 of this Subchapter after the effective date of this Rule. 30 (23)"Nurse Aide" means a person who is listed on the N.C. Nurse Aide Registry and provides nursing 31 or nursing-related services to patients in a nursing home. A nurse aide is not a licensed health 32 professional. Nursing homes that participate in Medicare or Medicaid shall comply with 42 CFR 33 Part 483.75(e), which is incorporated by reference, including subsequent amendments. The Code 34 of Federal Regulations may be accessed at 35 http://www.access.gpo.gov/nara/cfr/waisidx_08/42cfr483_08. https://www.ecfr.gov. 36 (24) "Nursing facility" means a nursing home as defined in G.S. 131E-101. 37 "Patient" means any person admitted for nursing care. (25)

"Existing facility" means a facility currently licensed, a proposed facility, a proposed addition to a

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(13)

1	(26)	"Remodeling" means alterations, renovations, rehabilitation work, repairs to structural systems, and
2		replacement of building systems at a nursing or combination facility.
3	(27)	"Repair" means reconstruction or renewal of any part of an existing building for the purpose of its
4		maintenance.
5	(28)	"Resident" means any person admitted for care to an adult care home part of a combination facility
6		as defined in G.S. 131E 101. facility.
7	(29)	"Respite care" means services provided for a patient on a temporary basis, not to exceed 30 days.
8	(30)	"Surveyor" means an authorized a representative of the Department who inspects nursing facilities
9		and combination facilities to determine compliance with rules rules, laws, and regulations as set
10		forth in G.S. 131E-117; Subchapters 13D and 13F of this Chapter; and 42 CFR Part 483,
11		Requirements for States and Long Term Care Facilities.
12	(31)	"Ventilator dependence" means a physiological dependency by a patient on the use of a ventilator
13		for more than eight hours a day.
14	(32) (31) "Violation" means a failure to comply with the regulations, standards, and requirements rules, laws,
15		and regulations as set forth in G.S. 131E-117 and 131D-21; Subchapters 13D and 13F of this
16		Chapter; or 42 CFR Part 483, Requirements for States and Long Term Care Facilities, that directly
17		relates to a patient's or resident's health, safety, or welfare, or which that creates a substantial risk
18		that death, or serious physical harm will may occur.
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20	History Note:	Authority G.S. 131E-104;
21		RRC objection due to lack of statutory authority Eff. July 13, 1995;
22		Eff. January 1, 1996;
23		Readopted Eff. July 1, 2016. <u>2016;</u>
24		Amended Eff. January 1, 2021.