1 10A NCAC 13D .2101 is proposed to be amended as follows: 2 3 10A NCAC 13D .2101 APPLICATION REQUIREMENTS 4 (a) An A legal entity shall submit an application for licensure for a new facility shall be submitted to the Nursing 5 Home Licensure and Certification Section of the Division of Health Service Regulation at least 30 days prior to a 6 license being issued or patients admitted. 7 (b) The application shall contain the following: 8 (1) legal identity of applicant (licensee) and mailing address; 9 (2) name or names under which the facility is presented to the public; 10 (3) location and mailing address of facility; 11 (4) ownership disclosure; 12 (5) accreditation data; 13 (6)(5) bed complement; 14 (7)(6) magnitude and scope of services offered; 15 (8)(7) name and current license number of the administrator; and 16 name and current license number of the director of nursing; and (9)(8) 17 (9) name and current license number of the medical director. 18 19 Authority G.S. 131E-104; 131E-102; History Note: 20 Eff. January 1, 1996; 21 Amended Eff. January 1, 2012.

1	10A NCAC 13D .2110 is proposed for repeal as follows:		
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3	10A NCAC 13D .2110 PUBLIC ACCESS TO DEPARTMENT LICENSURE RECORDS		
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5	History Note: Authority G.S. 8-53; 108A-80; 131E-104; 131E-124(c); 132-1.1;		
6	Eff. January 1, 1996. <u>1996</u> ;		
7	Repealed Eff. January 1, 2012.		
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10A NCAC 13D .2209 is proposed for amendment as follows:

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10A NCAC 13D .2209 INFECTION CONTROL

- 4 (a) The A facility shall establish and maintain an infection control program for the purpose of providing a safe,
- 5 clean and comfortable environment and preventing the transmission of diseases and infection.
- 6 (b) Under the infection control program, the facility shall decide what procedures, such as isolation techniques, are
- 7 needed for individual patients, investigate episodes of infection and attempt to control and prevent infections in the
- 8 facility.
- 9 (c) The facility shall maintain records of infections and of the corrective actions taken.
- 10 (d) The facility shall ensure communicable disease screening, testing including tuberculosis, as required by 10A
- 11 NCAC 41A, "Communicable Disease Control" which is incorporated by reference, including subsequent
- 12 amendments. Copies of these Rules may be obtained at no charge by contacting the N.C. Department of Health and
- Human Services, Division of Public Health, Tuberculosis Control Branch, 1902 Mail Service Center, Raleigh, North
- 14 <u>Carolina 27699-1902</u>. <u>Screening shall be done upon prior to admission of all patients being admitted from settings</u>
- other than hospitals, nursing facilities or combination facilities; facilities. prior to or upon admission for all patients
- 16 admitted from hospitals, nursing facilities and combination facilities; and Staff shall be screened within seven days
- 17 upon the hiring of all staff of the hire date. The facility shall ensure tuberculosis screening annually thereafter for
- patients and staff staff. as required by 10A NCAC 41A, "Communicable Disease Control" which is incorporated by
- 19 reference, including subsequent amendments. Copies of these Rules may be obtained at no charge by contacting the
- 20 N.C. Department of Health and Human Services, Division of Public Health, Tuberculosis Control Branch, 1902
- 21 Mail Service Center, Raleigh, North Carolina 27699 1902. Identification of a communicable disease does not, in all
- 22 cases, in and of itself, preclude admission to the facility.
- 23 (e) All cases of reportable disease as defined by 10A NCAC 41A "Communicable Disease Control" and epidemic
- 24 outbreaks, and poisonings outbreaks consisting of two or more linked cases of disease transmission shall be reported
- 25 immediately to the local health department.
- 26 (f) The facility shall isolate use isolation precautions for any patient deemed appropriate by the its infection control
- 27 program. program and as recommended by the following Centers for Disease Control guidelines, Management of
- 28 Multidrug-Resistant Organisms In Healthcare Settings, 2006
- 29 http://www.cdc.gov/ncidod/dhqp/pdf/ar/MDROGuideline2006.pdf and 2007 Guideline for IsolationPrecautions:
- 30 Preventing Transmission of Infectious Agents in Healthcare Settings,
- 31 http://www.cdc.gov/hicpac/2007ip/2007isolationprecautions.html.
- 32 (g) The facility shall prohibit any employee with a communicable disease or infected skin lesion from direct contact
- with patients or their food, if direct contact is the mode of transmission of the disease.
- 34 (h) The facility shall require all staff to use good hand washing technique as indicated in the Centers for Disease
- 35 Control and Prevention "Guidelines for Hand Washing in Hospital Environmental Control," as published by the U.S.
- 36 Department of Health and Human Services, Public Health Service which is incorporated by reference, including
- 37 subsequent amendments. Copies may be purchased from the National Technical Information Service, U.S.

1	Department of C	ommerce, 5285 Port Royal Road, Springfield, Virginia, 22161 for fifteen dollars and 95 cents
2	(\$15.95). Contro	ol, "Guideline for Hand Hygiene in Health-Care Settings, Recommendations of the Healthcare
3	Infection Contro	l Practices Advisory Committee and the HICPAC/SHEA/APIC/IDSA Hand Hygiene Task Force".
4	This information	can be accessed at http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5116a1.htm.
5	(i) All linen sha	ll be handled, store, processed and transported so as to prevent the spread of infection.
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7	History Note:	Authority G.S. 131E-104; <u>131E-113</u>
8		Eff. January 1, 1996;
9		Amended Eff. January 1, 2012.
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1	10A NCAC 13D .2304 is proposed for amendment as follows:		
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3	10A NCAC 13D .2304 NURSE AIDES		
4	(a) The A facility shall employ or contract individuals as nurse aides in compliance with N.C. General Statute 131E,		
5	Article 15 and facilities certified for Medicare or Medicaid participation shall also comply with 42 CFR Part 483		
6	which is incorporated by reference, including subsequent amendments. Copies of the The Code of Federal		
7	Regulations may be purchased from the Superintendent of Documents, U.S. Government Printing Office, P.O. Box		
8	371954, Pittsburgh, PA 15202 7954 for thirty eight dollars (\$38.00) and may be purchased with a credit card by a		
9	direct telephone call to the G.P.O. at (202) 512 1800. accessed at		
10	http://www.access.gpo.gov/nara/cfr/waisidx_08/42cfr483_08.		
11	(b) The \underline{A} facility shall provide to the Department, upon request, verification of in-service training and of past or		
12	present employment of any nurse aide employed by the facility.		
13			
14	History Note: Authority G.S. 131E-104; 131E-111; 131E-255; 143B-165; 42 U.S.C. 1395; 42 U.S.C. 1396;		
15	Eff. January 1, 1996;		
16	Amended Eff. January 1, 2012.		

2 3 10A NCAC 13D .2308 ADULT CARE HOME PERSONNEL REQUIREMENTS 4 (a) The administrator of a combination home shall designate a person to be in charge of the adult care home 5 residents at all times. The nurse-in-charge of the nursing facility may also serve as supervisor-in-charge of the 6 domiciliary beds. 7 (b) If adult care home beds are located in a separate building or a separate level of the same building, there shall be 8 a person on duty in the adult care home portion of the facility at all times 9 © The facility shall comply with all rules in Subchapter 10A NCAC 13F, Licensing of Homes for the Aged and 10 Infirm, which is incorporated by reference, including all subsequent amendments. Copies of these Rules can be 11 obtained free of charge from the Division of Health Service Regulation, Adult Care Licensure Section, 2708 Mail 12 Service Center, Raleigh, NC 27699 2708. 13 14 History Note: *Authority G.S. 131E-104;* 15 Eff. January 1, 1996. 16 Amended Eff: January 1, 2012.

10A NCAC 13D .2308 is proposed for amendment as follows:

1	10A NCAC 13D .	2605 is proposed to be amended as follows:		
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3	10A NCAC 13D	2605 DRUG STORAGE AND DISPOSITION		
4	(a) The pharmacist and director of nursing A facility shall ensure that drug storage areas are clean, secure, well			
5	lighted and well ventilated; that room temperature is maintained between 59 degrees F. and 86 degrees F.; and that			
6	the following conditions are met:			
7	(1)	All drugs shall be maintained under locked security except when under the immediate or direct		
8		physical supervision of a nurse or pharmacist.		
9	(2)	Drugs requiring refrigeration shall be stored in a refrigerator containing a thermometer and		
10		capable of maintaining a temperature range of 2 degrees C. to 8 degrees C. (36 degrees F. to 46		
11		degrees F.) Drugs shall not be stored in a refrigerator containing non-drugs and non-drug related		
12		items, except when stored in a separate container.		
13	(3)	Drugs intended for topical use, except for ophthalmic, otic and transdermal medications, shall be		
14		stored in a designated an area separate from the drugs intended for oral and injectable use.		
15	(4)	Drugs that are outdated, discontinued or deteriorated shall be removed from the facility within		
16		five days.		
17	(b) Upon discontinuation of a drug or upon discharge of a patient, the remainder of the drug supply shall be			
18	disposed of promptly. according to the facility's policy. If it is reasonably expected that the patient shall will return			
19	to the facility and that the drug therapy will be resumed, the remaining drug supply may be held for not more than			
20	30 calendar days a	after the date of discharge or discontinuation.		
21	(c) The disposition of drugs shall be in accordance with written policies and procedures established by the Quality			
22	Assurance Comm	ittee.		
23	(d) Destruction of	of controlled substances shall be in compliance with <u>Disposal of Unused Controlled Substances</u>		
24	From Nursing Ho	me as described in North Carolina Controlled Substance Act and Regulations (10A NCAC 26E		
25	.0406) 10A NCA	<u>C 26E .0406</u> , which is hereby incorporated by reference including subsequent amendments.		
26	Copies of the rule	s may be obtained from the Drug Regulatory Branch, Division of Mental Health, Developmental		
27	Disabilities and St	ubstance Abuse Services, 3016 Mail Service Center, Raleigh, NC 27699 3016 at a cost of thirteen		
28	dollars (\$13.00).	These rules can be accessed online at http://reports.oah.state.nc.us/ncac.asp.		
29				
30	History Note:	Authority G.S. 131E-104; 131E-117;		
31		RRC objection due to lack of statutory authority Eff. July 13, 1995;		
32		Eff. January 1, 1996.		
33		Amended Eff. January 1, 2012.		

1 10A NCAC 13D .2606 is proposed for amendment as follows: 2 3 10A NCAC 13D .2606 PHARMACEUTICAL RECORDS 4 (a) The pharmacist A facility shall ensure that accurate records of the receipt, use and disposition of drugs are 5 maintained and readily available. 6 (b) The director of nursing and pharmacist A facility shall ensure accountability of controlled substances as defined 7 by the Disposal of Unused Controlled Substances From Nursing Home as described in North Carolina Controlled 8 Substance Act and Regulations (10A NCAC 26E .0406) 10A NCAC 26E .0406, which is hereby incorporated by 9 reference including subsequent amendments. Copies of the rules may be obtained from the Drug Regulatory 10 Branch, Division of Mental Health, Developmental Disabilities and Substance Abuse Services, 3016 Mail Service 11 Center, Raleigh, NC 27699 3016 at a cost of thirteen dollars (\$13.00). These rules can be accessed online at 12 http://reports.oah.state.nc.us/ncac.asp. 13 14 History Note: Authority G.S. 131E-104; 131E-117; 15 RRC objection due to lack of statutory authority Eff. July 13, 1995; 16 Eff. January 1, 1996; 17 Amended Eff. January 1, 2012.

10A NCAC 13D .2607 is proposed for amendment as follows:

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10A NCAC 13D .2607 EMERGENCY DRUGS

- 4 (a) The A facility shall maintain a supply of emergency drugs in compliance with 21 NCAC 46 .1403 10A NCAC
- 5 26E .0408 which is hereby incorporated by reference including subsequent amendments. Copies of the rule may be
- 6 obtained from the North Carolina Board of Pharmacy, P.O. Box 459, Carrboro Plaza, Highway 54 Bypass, Carrboro,
- 7 North Carolina 27510 at a cost of eight dollars and forty eight cents (\$8.48). This rule can be accessed online at
- 8 http://reports.oah.state.nc.us/ncac.asp.
- 9 (b) Emergency drugs shall be stored in a portable container sealed with an easily breakable closure which cannot be
- 10 resealed or reused and shall be readily accessible for use.
- 11 (c) Emergency drug kits shall be stored in a secure area locked storage cabinet or room out of site sight of patients
- and the general public. If stored in a locked area the kits shall be immediately accessible to all licensed nursing
- personnel.
- 14 (d) All emergency drugs and quantity to be maintained shall be approved by the Quality Assurance Committee.
- 15 Committee as defined in 10A NCAC 13D .2212.
- 16 (e) If emergency drug items require refrigerated storage, they shall be stored in a separate sealed container within
- 17 the medication refrigerator. The container shall be labeled to indicate the emergency status of the enclosed drug and
- sealed as indicated in Paragraph (b) of this Rule.
- 19 (f) An accurate inventory of emergency drugs and supplies shall be maintained with each emergency drug kit.
- 20 (g) The pharmacist A facility shall personally examine the refrigerated and non-refrigerated emergency drug supply
- at least every 90 days and make any necessary changes at that time.
- 22 (h) The facility shall have written policies and procedures which are enforced to ensure that in the event the sealed
- emergency drug container is opened and contents utilized, immediate steps are taken to replace the items used.
- 24 (i) The availability of a controlled substance in an emergency kit shall be in compliance with the North Carolina
- 25 Controlled Substances Act and Regulations (10A NCAC 26E) which is hereby incorporated by reference including
- subsequent amendments. Copies of the rules may be obtained from the Drug Regulatory Branch, Division of Mental
- 27 Health, Developmental Disabilities and Substance Abuse Services, 3016 Mail Service Center, Raleigh, NC 27699-
- 28 3016 at a cost of thirteen dollars (\$13.00). These rules can be accessed online at
- 29 http://reports.oah.state.nc.us/ncac.asp.

- 31 *History Note: Authority G.S. 131E-104; 131E-117;*
- 32 RRC objection due to lack of statutory authority Eff. July 13, 1995;
- 33 *Eff. January 1, 1996;*
- 34 Amended Eff. January 1, 2012.

10A NCAC 13D .2701 is proposed for amendment as follows:

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10A NCAC 13D .2701 PROVISION OF NUTRITION AND DIETETIC SERVICES

- 4 (a) The A facility shall ensure that each patient is provided with a palatable diet that meets his or her daily nutritional and specialized nutritional needs.
- 6 (b) The facility shall designate a person to be known as the director of food service who shall be responsible for the 7 facility's dietetic service and for supervision of dietetic service personnel. If this person is not a dietitian, licensed 8 dietitian/nutritionist or a registered dietitian with the Commission on Dietetic Registration, he or she shall meet the 9 criteria for membership in the Dietary Managers Association which is hereby incorporated by reference including 10 subsequent amendments and editions. Copies of criteria may be obtained from the Dietary Managers Association, 11 406 SurrySurrey Woods Drive, St. Charles , IL 60174 at no cost. or it can be accessed online at 12 www.DMAonline.org. If the course has not been completed, this person shall be enrolled in a course and making 13 satisfactory progress for completion within the time limit specified by course requirements. a Certified Dietary 14 Manager who is certified by the Certifying Board of the Dietary Managers, Dietetic Technician Registered, who is 15 registered by the Commission on Dietetic Registration of the American Dietetic Association, or an individual who 16 has met the academic requirements as referenced in G.S. 90-357(3)b.1,c.1 and d, then the person shall enroll in a 17 course of study to obtain these qualifications and make satisfactory progress for completion within the time limit
- 19 (c) If the food service supervisor is not a dietitian, the facility shall employ a <u>licensed dietitian/nutritionist dietitian</u>
 20 on at least a consultant basis. The consultant shall submit written reports <u>of clinical and food service operation</u>
 21 recommendations to the administrator and food service supervisor.
- 22 (d) The dietitian shall spend sufficient time in the facility to assure the following parameters of nutrition have been addressed and that recommended successful interventions by the facility have been met:
 - (1) An analysis of weight loss or gain;
- 25 (2) Laboratory values;

specified by course requirements.

- (3) Clinical indicators of malnutrition;
- (4) Drug therapy that may contribute to nutritional deficiencies;
- (5) The amount of meal and supplement consumed to meet nutritional needs;
- Increased nutritional needs related to disease state or deterioration in physical or mental status, i.e., decubitus, low protein status, inadequate intake, or nutrition provided via enteral or parenteral route.
 - (e) There shall be sufficient dietetic personnel employed competent to meet the nutritional needs of all patients in the areas of therapeutic diets, food preparation and service, principles of sanitation, and resident's rights as related to food services.
- 35 (f) The facility shall ensure that menus are followed which meet the nutritional needs of patients in accordance with 36 the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National 37 Academy of Sciences which are incorporated by reference, including subsequent amendments. Copies of this

- 1 publication can may be obtained by contacting The National Academy Press, 2101 Constitution Avenue N.W.,
- 2 Lockbox 285, Washington, D.C., 20055, 500 Fifth St. N.W., Washington, D.C. 20001 or accessing it at
- 3 http://www.nap.edu/catalog.php?record_id=1349. Cost of this publication is eighteen dollars and ninety five cents
- 4 (\$18.95) and includes shipping and handling. Menus shall:
 - (1) be planned at least 14 days in advance,
 - (2) provide for substitutes of similar nutritive value for patients who refuse food that is served, and
- 5 be provided to patients orally or written through such methods as posting, posting and daily announcements, periodic newsletters, etc. announcements.
- 9 (g) Food must be prepared to conserve its nutritive value and appearance.
- 10 (h) Food shall be served at the preferred temperature as discerned by the resident and customary practice, in a form
- 11 to meet the patient's individual needs and with assistive devices as dictated by the patient's needs. Hot foods shall
- leave the kitchen (or steam table) above 140 135 degrees F; and cold foods below 41 degrees F; F. and freezer
- temperatures at 0 degrees F or below. The freezer must keep frozen foods frozen solid.
- 14 (i) If patients require assistance in eating, food shall be maintained at the appropriate temperature until assistance is
- 15 provided.

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- 16 (j) All diets, including enteral and parenteral nutrition therapy, shall be as ordered by the physician or other legally
- authorized person, and served as ordered.
- 18 (k) At least three meals shall be served daily to all patients in accordance with medical orders.
- 19 (I) No more than 14 hours shall elapse between an evening meal containing a protein food and a morning meal
- 20 containing a protein food.
- 21 (m) Hour-of-sleep (hs) nourishment shall be available to patients upon request or in accordance with nutritional
- 22 plans
- 23 (n) Between meal fluids for hydration shall be available and offered to all patients in accordance with medical
- 24 orders.

- 25 (o) The facility shall have a current online or hard copy nutrition care manual or handbook approved by the
- dietitian, medical staff and the Administrator which shall be used in the planning of the regular and therapeutic diets
- and be accessible to all staff.
- 28 (p) Food services shall comply with Rules Governing the Sanitation of Restaurants and Other Foodhandling
- 29 Establishments (15A NCAC 18A .1300) as promulgated by the Commission for Public Health which is are
- 30 incorporated by reference, including subsequent amendments, assuring storage, preparation, and serving of food
- 31 under sanitary conditions. Copies of these Rules can be obtained, at no charge, by contacting the N.C. Department
- 32 of Environment and Natural Resources, Division of Environmental Health Services, 1630 Mail Service Center,
- Raleigh, NC 27699 1630. accessed online at http://www.deh.enr.state.nc.us/rules.htm
- 35 *History Note: Authority G.S. 131E-104*; <u>90-368(4)</u>
- 36 RRC objection due to lack of statutory authority Eff. July 13, 1995;
- 37 Eff. January 1, 1996.