10.07.02.02 License Required.

B. Separate License Required. Separate licenses are required for facilities maintained on separate premises, even though they are operated under the same management. Separate licenses may be required for separate buildings on the same grounds.

C. Other License Required. A facility having a dual function, including care of the sick requiring hospital facilities in addition to rendering other care services, is required to be licensed for each level of health care rendered.

D. Posting of License Application and Instructions for Written Comment.

(1) At least 50 days before the anticipated date of the new license or relicensure, a facility shall conspicuously post:

(a) Its application for initial license or license renewal; or

(b) A notice describing where in the facility the application for licensure or relicensure may be found.

(2) The posting shall be near the entrance, in a manner which is plainly visible and easily read by the public.

(3) The posting shall include instructions for filing written comments to the Department.

E. Posting of License. A facility shall conspicuously post its license on the premises, at or near the entrance, in a manner which is plainly visible and easily read by the public.

10.07.02.03. Licensing Procedure.

...B. Restrictions of License.

(1) Nomenclature. Comprehensive care facilities or extended care facilities licensed under this regulation may not use in their title the words "Hospital", "Sanitorium", or "Sanitarium".

...(3) Local Law or Ordinance, Where Applicable. Comprehensive care facilities or extended care facilities located in political subdivisions which require them to meet certain standards shall submit proof to the Secretary that they meet local laws, regulations, or ordinances at the time application for license is submitted.

10.07.02.07 Administration and Resident Care.

A. Responsibility.

(1) The licensee shall be responsible for the overall conduct of the comprehensive care facility or extended care facility and for compliance with applicable laws and regulations.

(2) The administrator shall be responsible for the implementation and enforcement of all
provisions of the Patient’s Bill of Rights Regulations under COMAR 10.07.09.

B. Delegation to Administrator.

(1) The licensee, if not acting as an administrator, shall appoint as administrator a responsible person who is qualified by training and experience, and is licensed by the Board of Examiners of Nursing Home Administrators for the State. The administrator shall be responsible for the control of the operation on a 24-hour basis and shall serve full-time, except that an administrator may, with the Department’s approval, serve on a less than full-time basis for a maximum of two nursing facilities, one of which shall have a licensed capacity of 35 beds or less.

(2) The Department shall consider the following factors when considering whether to approve an administrator to serve on a less than full-time basis:

(a) Geographical location of the facilities;
(b) Ownership of the facilities;
(c) Organizational structure of the facilities;
(d) Size of the facilities; and
(e) Background and experience of the administrator.

C. Absence of Administrator. In the absence of the administrator, the facility at all times shall be under the direct and personal supervision of an experienced, trained, competent employee. When the director of nursing serves as relief for the administrator, he shall designate an experienced, qualified registered nurse to direct the nursing service. The relief director of nursing shall be freed from other responsibilities.

D. Excessive Absenteeism of Administrator. If the administrator is absent from the facility an excessive amount of time, and the Department determines that the director of nursing’s absence from nursing service is having an adverse effect on patient care, the Department may require the designation of a specific registered nurse who shall be named the "assistant director of nursing". The Department shall be notified of the name of the assistant director of nursing. When the designee is replaced, the Department shall be notified of the name of the registered nurse filling the vacancy.

E. Character. The administrator shall be of good moral character, in good physical and mental health, and shall demonstrate a genuine interest in the well-being and welfare of patients in the facility.

H. Employment Records. A written application shall be on file for each employee and shall contain:

(1) Employee's social security number.
(2) Home address.
(3) Educational background.
(4) Past employment with documentation that references have been considered by the facility. If the employee formerly worked in a nursing home, consideration shall be given to the record as it relates to abuse of patients, theft, and fires.
The licensure of personnel employed as registered or licensed practical nurses shall be verified by the facility.

10.07.02.09 Resident Care Policies.

A. Written Policies. Comprehensive care facilities and extended care facilities shall develop written policies, consistent with these regulations, to govern the nursing care and related medical or other services they provide covering the following:

(1) Admission, transfer, and discharge policies including categories of patients accepted and not accepted by the facility, or those who are required to transfer to another level of care. The facility's admission policy shall include a statement as to whether or not medical assistance patients will be admitted and if admitted, under what circumstances.

(2) Physician services.

(3) Patients' rights.

(4) Nursing services.

(5) Dietetic services.

(6) Specialized rehabilitative services—occupational therapy services, physical therapy services, speech pathology and audiology services.

(7) Pharmaceutical services.

(8) Laboratory and radiologic services.

(9) Dental services.

(10) Social services.

(11) Patient activities.

(12) Clinical records.

(13) Reports and action required in unusual circumstances.

(14) Utilization review.

(15) Infection control.

(16) Tuberculosis Surveillance. All comprehensive care facilities and extended care facilities shall have written policies and procedures, acceptable to the Department, for tuberculosis surveillance of all residents. See Regulation .21G of this chapter for tuberculosis surveillance requirements.

(17) Disaster plan.

(18) Housekeeping services, pest control, and laundry.

(19) Patient care management.

B. The patient care policies shall be developed with the advice of the principal physician (or medical staff or medical director, if applicable), and at least one registered nurse. Policies shall be reviewed at least annually by a group of professional personnel including one or more physicians and one or more registered nurses. Written policies shall be kept current with the policies used to administer the facility. For reference purposes, copies of the patient care policies shall be readily available to all personnel responsible for patient care.

C. Policies and Procedures.

(1) Upon the request of the Secretary or the Secretary's designee, the facility’s policies and procedures shall be made available to the Secretary for onsite review.
(2) The licensee shall submit to the Department any significant substantive changes to the policies and procedures which have occurred since review of the policies and procedures within 2 weeks of implementation of the changes.

10.07.02.12 Nursing Services.

E. Director of Nursing’s Vacancy Exceeding 30 Days. If the position of director of nursing remains vacant for a period of 30 days, the license may be revoked unless the administrator and the governing body are able to demonstrate that they have made every effort to obtain a replacement.

10.07.02.14 Specialized Rehabilitative Services

C. Policies and Procedures. Written administrative and patient care policies and procedures shall be developed for rehabilitative services by appropriate rehabilitation team members and representatives of the medical, administrative, and nursing staff. Policies shall provide for the coordination of rehabilitative services and the rehabilitative aspects of nursing.

10.07.02.14-1 Special Care Units — General.

A. A facility which holds a current and valid operating license may establish special care units with the approval of the Office of Licensing and Certification Programs and the Department’s Division of Engineering and Maintenance.

B. A facility may notify the Department of its intention to establish a special care unit before developing and submitting the required documents for approval as described in §C of this regulation.

10.07.02.14-2 Special Care Units—Respiratory Care Unit.

A. A respiratory care unit shall meet the:

(1) General requirements established for all special care units as outlined in Regulation .14-1 of this chapter; and

(2) Requirements of this regulation.

10.07.02.15 Pharmaceutical Services.

A. Facility Responsible for Pharmacy Services...Pharmaceutical services shall be provided in accordance with accepted professional principles and appropriate federal, State, and local laws. Any regulation in this chapter shall govern if higher.