

.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.

F. Staffing.

(1) The administrator shall employ sufficient and satisfactory personnel as specified in this chapter to give adequate patient care and to do feeding, maintenance, cleaning, and housekeeping.

(2) A facility may request a "voluntary admissions ceiling" by submitting a written request to the Department to authorize a temporary restriction on patient admissions based upon anticipated bed usage. When the facility wishes to request that the restriction be removed, the request shall include the specific effective date and a statement that personnel staffing is sufficient to meet the State's requirements at the designated census figure. The Department shall approve the increase in beds within 72 hours following receipt of the facility's documentation that the required additional staff is "in place" to serve the increased number of beds. Management of the facility may not permit the patient census to exceed the admissions ceiling without prior approval from the Department.

(3) As requested by the Department, the administrator or his designee shall telephone the Department's central bed registry, advising the Department of:

- (a) The number of vacant licensed beds in the facility;
- (b) The levels of care of the beds reported vacant;
- (c) The types of patients who will be accepted—private, Medicare, or Medicaid.

G. Educational Program. An ongoing educational program shall be planned and conducted for the development and improvement of skills of all the facility's personnel, including training related to problems and needs of the aged, ill, and disabled. Records shall be maintained reflecting attendance, by name and title, and training content. In-service training shall include at least:

- (1) Prevention and control of infections;
- (2) Fire prevention programs and patient related safety procedures in emergency situations or conditions;
- (3) Accident prevention;
- (4) Confidentiality of patient information;
- (5) Preservation of patient dignity, including protection of the patient's privacy and personal and property rights;
- (6) Psychophysical and psychosocial needs of the aged ill;
- (7) Receipt by each employee of appropriate orientation to the facility and its policies, and to the employee's position and duties;
- (8) Approval by the Department of the orientation and training programs.

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.
- (5) The licensure of personnel employed as registered or licensed practical nurses shall be verified by the facility.

I. Supportive Personnel. To support placement in a specific position, there shall be sufficient documentation in the employee's record reflecting his training and experience. In instances when an aide is to be assigned to a particular service such as dietary, physical therapy, or occupational therapy, the person in charge of the service shall be responsible for the evaluation and approval of the qualifications.

J. New Supportive Personnel. New supportive personnel shall be credited for 50 percent of their working time until the employee's orientation program, as approved by the Department, is completed. The person in charge of the service to which the employee is assigned shall have input into the contents of the orientation program. Policies for the orientation program shall include the number of hours of orientation required for the various levels of supportive personnel. Following the period of orientation the person responsible for the orientation program and the person in charge of the service shall indicate satisfactory completion of the orientation program of the employee. The responsible department's approval shall be in writing, signed by the appropriate department head whose license number, if applicable shall be recorded in the record. In new facilities the director of nursing and supervisors of the various services, dietary, housekeeping, rehabilitation, and social services, shall be responsible for orienting the new supportive personnel to the facility's policies and procedures and to the physical plant. There shall be a complete orientation for all the employees in life safety and disaster preparedness. The number of daily admissions of patients shall be controlled to allow sufficient time for on-the-job training. Before the opening of the facility all supportive personnel shall have a minimum of 2 days of orientation training.

K. Relief Personnel. Provision shall be made for qualified relief personnel during vacations or other relief periods.

L. Availability of Information. The administrator shall make available to the Secretary such information as may be requested to insure that the facility is meeting the requirements of these and other applicable regulations.