

SUBCHAPTER 31. MANDATORY PHYSICAL ENVIRONMENT

8:39-31.1 Mandatory construction standards

(a) No construction, renovation or addition shall be undertaken without first obtaining approval from the Department, Long-Term Care Licensing and Certification Program and/or the Department of Community Affairs, Health Care Plan Review Unit.

(b) New construction, alterations and additions of long-term care facilities shall comply with the Uniform Construction Code (N.J.A.C. 5:23) as adopted by the New Jersey Department of Community Affairs. The New Jersey Uniform Construction Code may be obtained from the Construction Code Element of the Department of Community Affairs, P.O. Box 805, Trenton, New Jersey 08625-0805.

(c) Fire safety maintenance and retrofit of long-term care facilities shall comply with the Uniform Fire Safety Code (N.J.A.C. 5:18) as adopted by the New Jersey Department of Community Affairs. The New Jersey Uniform Fire Safety Code may be obtained from the Fire Safety Element of the Department of Community Affairs, P.O. Box 809, Trenton, New Jersey 08625-0809.

(d) Required annual maintenance inspections by the Department of Health and Senior Services for a facility participating in the Medicare or Medicaid programs shall be conducted in accordance with the edition of the National Fire Protection Association's Life Safety Code that has been adopted by the Federal Health Care Financing Administration, incorporated herein by reference, as amended and supplemented; however, this code shall not be enforced to exceed the requirements of the Uniform Construction Code referenced in (b) above. A facility that does not participate in either the Medicare or Medicaid programs shall be inspected under the version of the Life Safety Code in effect at the time of original licensure; however, this code shall not be enforced to exceed the requirements of the Uniform Construction Code referenced in (b) above. (Copies of the Life Safety Code may be obtained from the National Fire Protection Association, Battery March Park, Quincy, MA 02200).

8:39-31.2 Mandatory general maintenance

a) Personnel engaged in general maintenance activities shall receive orientation upon employment and, at least once a year, education or training in principles of asepsis, cross-infection control, and safe practices.

(b) There shall be a system for reporting physical plant, safety, and maintenance problems to a designated staff member and documentation of the correction of such problems.

(c) A current, written preventive maintenance program shall be implemented. Records of inspections and repairs shall be maintained for at least one year.

(d) Written instructions for operating and maintaining equipment shall be systematically retained and followed.

(e) The facility shall be kept in good repair and maintained without harm or jeopardy to residents.

(f) There shall be a maintenance contract on elevators that includes routine maintenance inspections.

(g) The standby emergency power generator shall be checked weekly, tested under load monthly, and serviced in accordance with generally accepted engineering practices.

(h) Temperature shall be in accordance with requirements specified in the 1996-97 edition of "Guidelines For Design and Construction of Hospital and Health Care Facilities" (American Institute of Architects Academy of Architecture for Health, with assistance from the U.S. Department of Health and

Human Services. The American Institute of Architects Press: Washington, DC), incorporated herein by reference.

(i) There shall be a comprehensive, current, written preventive maintenance program for the electrical system that is documented and followed.

8:39-31.3 Mandatory quality assurance for housekeeping

Facilities that contract with a housekeeping service shall use quality assurance measures to ensure that the housekeeping requirements of this chapter are met.

8:39-31.4 Mandatory housekeeping policies and procedures

(a) The facility shall provide and maintain a safe, clean and orderly environment for residents.

(b) The facility shall have a written schedule that determines the frequency of cleaning and maintaining all equipment, structures, areas, and systems.

(c) Mattresses, mattress pads and coverings, pillows, bedsprings, and other furnishings shall be properly maintained and kept clean and replaced as needed. They shall be thoroughly cleaned and disinfected on a regular schedule and whenever a new resident is using them.

(d) Scatter rugs shall be not permitted and floors shall be coated with slip-resistant floor finish.

(e) Carpeting shall be kept clean and odor free and shall not be frayed, worn, torn, or buckled.

(f) All equipment and environmental surfaces shall be clean to sight and touch.

8:39-31.5 Pest control

(a) Effective and safe controls shall be used to minimize and eliminate the presence of rodents, flies, roaches and other vermin in the facility.

1. The premises shall be kept in such condition as to prevent the breeding, harborage, or feeding of vermin.

2. All openings to the outer air shall be effectively protected against the entrance of insects.

8:39-31.6 Mandatory fire and emergency preparedness

(a) Employees shall be trained in procedures to be followed in an emergency operations plan and instructed in the use of fire fighting equipment and resident evacuation of the buildings as part of their initial orientation and at least annually thereafter.

(b) Fire drills shall be conducted a total of 12 times per year, with at least one drill on each shift and one drill on a weekend. The facility shall attempt to have the local fire department participate in at least one fire drill per year. An actual alarm shall be considered a drill if it is documented.

(c) Fire regulations and procedures shall be posted in each unit and/or department. A written evacuation diagram that includes evacuation procedures and locations of fire exits, alarm boxes, and fire extinguishers shall be posted conspicuously on a wall in each resident care unit and/or department throughout the facility.

(d) There shall be a procedure for investigating and reporting fires. All fires shall be reported to the Department immediately by phone and followed up in writing within 72 hours. In addition, a written report

of the investigation by the fire department containing all pertinent information shall be forwarded to the Department as soon as it becomes available.

(e) Smoking regulations shall be developed, implemented, and enforced in accordance with N.J.S.A. 26:3D-1 et seq. and 26:3D-7 et seq.

1. Residents shall not be permitted to smoke in their rooms and in other secluded areas. The facility may enforce a no-smoking rule for staff and visitors.

2. Restricted smoking areas shall be designated and rules governing such smoking promulgated and rigidly enforced. Nonflammable ashtrays in sufficient numbers shall be provided in permitted smoking areas. In any area where smoking is permitted, there shall be adequate outside ventilation.

3. At the facility's option, it may institute a smoke-free policy. Any prospective smoke-free policy shall be set forth in the facility's admission agreement and shall only apply to residents entering the facility on or after the policy's effective date. The facility shall protect the rights of residents who smoke by providing a designated area with adequate outside ventilation for controlled smoking. If inside, the designated smoking room shall be adequately ventilated to prevent recirculation of smoke to other areas of the facility. If outside, the designated area shall provide reasonable protection from inclement weather.

(f) The facility shall have a written comprehensive emergency operations plan developed in coordination with the local office of emergency management. This plan shall:

1. Identify potential hazards that could necessitate an evacuation, including natural disasters, national disasters, industrial and nuclear accidents, and labor work stoppage;

2. Identify the facility and an alternative facility to which residents would be relocated, and include signed, current agreements with the facilities;

3. Identify the number, type and source of vehicles available to the facility for relocation and include signed current agreements with transportation providers. Specially configured vehicles shall be included;

4. Include a mechanism for identifying the number of residents, staff, and family members who would require relocation and procedures for evacuation of non-ambulatory residents from the facility;

5. List the supplies, equipment, records, and medications that would be transported as part of an evacuation, and identify by title the individuals who would be responsible;

6. Identify essential personnel who would be required to remain on duty during the period of relocation;

7. Identify by title and post in a prominent place the name(s) of the persons who will be responsible for the following:

i. Activating the emergency operations plan, issuing evacuation orders, and notifying of State and municipal authorities;

ii. Alerting and notifying of staff and residents;

iii. Facility shutdown and restart;

iv. In place sheltering of residents and continuity of medical care; and

v. Emergency services such as security and firefighting; and

8. Describe procedures for how each item in (f)7 above will be accomplished.

(g) There shall be a written plan for receiving residents who are being relocated from another facility due to a disaster. This plan shall include at least an estimate of the number and type of residents the facility would accommodate and how staffing would be handled at different occupancy levels.

(h) Copies of the emergency operations plan shall be sent to municipal and county emergency management officials for their review.

(i) The administrator shall serve as, or appoint, a disaster planner for the facility.

1. The disaster planner shall meet with county and municipal emergency management coordinators at least once each year to review and update the written comprehensive evacuation plan; or if county or municipal officials are unavailable for this purpose, the facility shall notify the State Office of Emergency Management.

2. While developing the facility's evacuation plan, the disaster planner shall coordinate with the facility or facilities designated to receive relocated residents.

(j) Any staff member who is designated as the acting administrator shall be knowledgeable about and authorized to implement the facility's plans in the event of an emergency.

(k) All staff shall be oriented to the facility's current plans for receiving and evacuating residents in the event of a disaster, including their individual duties.

(l) The facility shall ensure that residents receive nursing care throughout the period of evacuation and return to the original facility.

(m) The facility shall ensure that evacuated residents who are not discharged are returned to the facility after the emergency is over.

(n) The facility shall maintain at least a three-day supply of food and have access to an alternative supply of water in case of an emergency.

(o) The facility shall conduct at least one evacuation drill each year, either simulated or using selected residents. State, county, and municipal emergency management officials shall be invited to attend the drill at least 10 working days in advance.

(p) The facility shall establish a written heat emergency action plan which specifies procedures to be followed in the event that the indoor air temperature is 82 degrees Fahrenheit or higher for a continuous period of four hours or longer.

1. These procedures shall include the immediate notification of the Department of Health and Senior Services.

2. In implementing a heat emergency action plan, a facility shall not prevent a resident from having a room temperature in his or her resident room in excess of 82 degrees Fahrenheit if the resident and the resident's roommate, if applicable, so desire, and if the resident's physician approves.

3. A heat emergency plan need not be implemented if the resident care areas are not affected by an indoor temperature in excess of 82 degrees Fahrenheit.

4. The heat emergency action plan shall include a comprehensive series of measures to be taken to protect residents from the effects of excessively high temperatures.

8:39-31.7 Mandatory safety requirements

(a) An outlet that is connected to an emergency power supply shall be used wherever life-sustaining equipment is in operation.

(b) All draperies, curtains, and wastebaskets shall be maintained flame retardant.

(c) All decorations shall be flame retardant. Open flames used for decoration or religious ceremonies shall not be left unsupervised.

(d) Cooking equipment shall be properly installed and maintained.

(e) Lint traps in clothes dryers shall be kept in a clean and safe condition.

(f) Kerosene heaters and staff and resident-owned heating devices shall not be permitted.

(g) Extension cords shall not be permitted unless they are provided by the maintenance or engineering department of the facility, inspected regularly, and inventoried by the maintenance and engineering department. Extension cords shall be for temporary use only in resident care areas.

(h) Hot (95 to 110 degrees Fahrenheit) and cold running water shall be provided. Hot water in resident areas shall not exceed 110 degrees Fahrenheit.

8:39-31.8 Mandatory space and environment; all facilities

(a) The facility shall provide for and operate adequate ventilation in all areas used by residents. All areas of the facility used by residents shall be equipped with air conditioning and the air conditioning shall be operated so that the temperature in these areas does not exceed 82 degrees Fahrenheit.

(b) All exit doors to the facility shall be kept externally locked from 8:00 P.M. until 6:30 A.M.

(c) All residents shall have, in their rooms:

1. A bed and a mattress of the correct size to fit the bed;
2. Sheets, blankets, a pillow, and additional pillow if required or desired;
3. A bed table with drawer;
4. A separate closet area and shelves for personal needs;
5. A privacy curtain around the bed excepting private rooms;
6. An unobstructed doorway;
7. Window coverings that are properly mounted and maintained;
8. Night lights;
9. Call bells immediately accessible to the resident in bed or an individual at bedside;
10. A comfortable chair for each resident in his or her room for use by the resident or resident's visitor;
11. An individual light for each resident in a room;

12. Supplies for oral needs, including a denture cup, if needed, and a clean toothbrush;

13. A basin, comb, and bedpan and/or urinal unless clearly unnecessary, stored in an appropriate storage space convenient to the resident; and

14. A waste receptacle.

(d) Glare from windows and reflections on floors and tables in the multi-purpose or dining room shall be controlled.

(e) All supplies and equipment in the facility shall be of such quality as not to break or tear easily.

(f) Each facility shall provide:

1. Good lighting at entrances and, where applicable, in parking areas;

2. A walker or a tripod cane to each resident who requires mechanical assistance to walk; and

3. A wheelchair to each resident who is not ambulatory.

SUBCHAPTER 32. ADVISORY PHYSICAL ENVIRONMENT

8:39-32.1 Advisory general maintenance

(a) Inspections or rounds are conducted at least monthly by a designated person or committee on all units and areas for maintenance problems. Results of these rounds are reported to the administrator.

(b) Maintenance services are under the supervision of an employee with at least one of the following:

1. Five years of experience in maintaining a physical plant;
2. A baccalaureate degree in engineering from an accredited college or university and two years of experience in maintaining a physical plant; or
3. Professional licensure in New Jersey as an engineer with one year of experience in maintaining a physical plant.

8:39-32.2 Advisory fire and emergency preparedness

(a) The facility conducts at least two evacuation drills each year, either simulated or using selected residents, at least one of which is conducted on a weekend or during an evening or night work shift. Results of the drills are to be summarized in a written report, which is shared with the county and municipal emergency management coordinators.

(b) A municipal, county, or State emergency management official conducts an education or training program in the facility on disaster planning and emergency preparedness at least once a year.

(c) Fire drills are conducted annually on each weekend shift.

8:39-32.3 Advisory safety

(a) There is a committee responsible for physical plant and resident safety and maintenance, which includes, at a minimum, representatives from administration, nursing, and maintenance services and meets at least quarterly.

(b) Regularly scheduled training meetings are held for residents and families, addressing safety issues in the facility.