

enjoyment of their rights.

[5-2-89; 7.9.2.24 NMAC – Rn, 7 NMAC 9.2.24, 8-31-00]

**7.9.2.25 HOUSING RESIDENTS IN LOCKED UNITS:** Definitions as used in this section:

**A. LOCKED UNIT:** means a ward, wing or room which is designated as a protected environment and is secured in a manner that prevents a resident from leaving the unit at will. A physical restraint applied to the body is not a locked unit. A facility locked for purposes of security is not a locked unit, provided that residents may exit at will. An alarmed unit does not constitute a locked unit.

**B. CONSENT:** means a written, signed request given without duress by a resident capable of understanding the nature of the locked unit, the circumstances of one's condition, and the meaning of the consent to be given.

(1) A resident or responsible party may give consent to reside in a locked unit.

(2) The consent shall be effective only for ninety (90) days from the date of the consent, unless revoked. Consent may be renewed for ninety (90) day periods pursuant to this subsection.

(3) The consent may be revoked by the resident if competent or by legal guardian at any time. The resident shall be transferred to an unlocked unit promptly following revocation.

**C. EMERGENCIES:** In an emergency, a resident may be confined in a locked unit if necessary to protect the resident or others from injury or to protect property, providing the facility immediately attempts to notify the physician for instructions. A physician's orders for the confinement must be obtained within twelve (12) hours. No resident may be confined for more than an additional seventy-two (72) hours under order of the physician.

[5-2-89; 7.9.2.25 NMAC – Rn, 7 NMAC 9.2.25, 8-31-00]

**7.9.2.26 ADMINISTRATOR/STATUTORY REFERENCE:** A nursing home shall be supervised by an administrator licensed under the Nursing Home Administrators Act, Sections 61-13-16 through 61-13-16 NMSA 1978. Supervision shall include, but not be limited to, taking all reasonable steps to provide qualified personnel to assure the health, safety, and rights of the residents.

**A. FULL-TIME ADMINISTRATOR:** Every nursing home shall be supervised full-time by an administrator licensed under the Nursing Home Administrators Act, except multiple facilities. If more than one nursing home or other licensed health care facility is located on the same or contiguous property, one full-time administrator may serve all the facilities.

**B. ABSENCE OF ADMINISTRATOR:** A person present in and competent to supervise the facility shall be designated to be in charge whenever there is not an administrator in the facility, and shall be identified to all staff.

**C. CHANGE OF ADMINISTRATOR:**

(1) Replacement of administrator: If it is necessary immediately to terminate an administrator, or if the licensee loses an administrator for other reasons, a replacement shall be employed or designated as soon as possible within one-hundred twenty (120) days of vacancy.

(2) Temporary replacement: During any vacancy in the position of administrator, the licensee shall employ or designate a person competent to fulfill the functions of an administrator immediately.

(3) Notice of change of administrator: When the licensee loses an administrator, the licensee shall notify the department within two (2) Department working days of such loss and provide written notification to the Department of the name and qualifications of the person in charge of the facility during the vacancy; and the name and qualifications of the replacement administrator, when known.

[7-1-60, 5-2-89; 7.9.2.26 NMAC – Rn, 7 NMAC 9.2.26, 8-31-00]

**7.9.2.27 EMPLOYEES:** In this section, "employee" means anyone directly employed by the facility on other than a consulting or contractual basis.

**A. QUALIFICATIONS AND RESTRICTIONS:** No person under eighteen (18) years of age shall be employed to provide direct care to residents.

**B. PHYSICAL HEALTH CERTIFICATIONS:** New Employees: Every employee shall be certified in