

disease and infection.

8.20.b. Infection control program. A nursing home shall establish and implement an infection control program under which it:

8.20.b.1. Investigates, controls, and prevents infections in the nursing home;

8.20.b.2. Determines what procedures, such as isolation, should be applied to a resident and isolates only to the extent that is required to protect the resident and others; and

8.20.b.3. Maintains a record of incidents, investigations, and corrective actions related to infections.

8.20.b.3.A. The records shall provide for analysis of causal factors and identification of preventative actions to be implemented.

8.20.c. Preventing spread of infection.

8.20.c.1. Policies and Procedures. A nursing home shall establish and implement policies and procedures consistent with current accepted standards of practice regarding the administration of pneumococcal vaccine, influenza vaccine, and screening for tuberculosis.

8.20.c.2. Isolation. When the nursing home staff determines by means of the infection control program that a resident needs isolation to prevent the spread of infection, the nursing home shall isolate the resident or make arrangements to have the resident transferred to a nursing home which can better meet the needs of the resident if the nursing home is unable to provide the required degree of isolation.

8.20.c.3. Employee restrictions. A nursing home shall prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease.

8.20.c.4. Hand-washing. A nursing home shall require staff to wash their hands after each direct resident contact and after engaging in any activity for which hand washing is indicated by accepted standards of professional practice.

8.20.d. Linens. Personnel shall handle, store, process, and transport linens in order to prevent the spread of infection.

'64-13-9. Physical Facilities, Equipment and Site Information.

9.1. Applicability; Construction, Additions; Renovations; Other Standards.

9.1.a. If the director determines that changes necessary for compliance with this section of this rule would create an undue hardship for a nursing home in existence at the time this rule becomes effective, the nursing home may be governed by rules which were in effect prior to the effective date of this rule.

9.1.b. The standard for construction, renovations, and alterations are the relevant sections of the 1996-1997 edition of *The Guidelines for Design and Construction of Hospitals and Health Care Facilities*, as recognized by the American Institute of Architects, Academy of Architecture for Health with assistance from the U. S. Department of Health and Human Services.

64CSR13

9.1.c. A nursing home shall comply with the 1996 Edition of the National Fire Protection Association (NFPA) of ANFPA 99 Standards for Health Care Facilities.@

9.1.d. A nursing home shall comply with the state building code Building Officials and Code Administrators, 13th Ed. 1996 (BOCA).

9.1.e. A nursing home shall comply with all applicable provisions of the Americans with Disabilities Act (ADA).

9.1.f. A nursing home shall submit a complete set of architectural, structural, and mechanical drawings, drawn to scale not less than one-eighth (1/8) inch equals one (1) foot, and shall be approved by the director before construction begins.

9.1.f.1. This requirement applies to new construction, additions, renovations, or alterations to existing nursing homes.

9.1.g. The submitted drawings and specifications shall be prepared, signed and sealed by a person registered to practice architecture in the State of West Virginia.

9.1.g.1. The project shall be inspected during the construction phase by a registered professional architect or his or her representative.

9.1.h. The requirement for a registered architect may be waived by the director depending on the scope of the project.

9.1.i. A nursing home shall submit complete architectural drawings and specifications for any alterations, renovations, and equipment modifications or additions which may necessitate changes to the nursing home floor plan, impact on safety, or require the services of a design professional, and shall be approved by the director prior to beginning any construction.

9.1.j. Minor renovations that do not alter floor plans, impact on safety or require the services of a design professional may not require approval of the director.

9.1.k. A performance statement shall be obtained by the owner from the builder and design professional of a proposed nursing home stating that in constructing the nursing home the builder has followed the plans which are on file with and approved by the director.

9.1.l. All new facilities, additions, and alterations shall be inspected by the director and shall have the director=s approval in writing prior to admitting residents.

9.1.l.1. A nursing home shall request in writing a pre-opening inspection no less than thirty (30) days prior to the proposed opening date.

9.1.m. All fees specified in the Division of Health rule, AFees for Services,@ 64CSR51, for site inspections of new construction or major renovations, architectural review of drawings and specifications, and inspections of new projects prior to opening are the responsibility of the nursing home or design professional.

9.1.n. Unless substantial construction is started within one (1) year of the date of approval of final drawings, the owner or architect shall secure written notification from the director that the plan approval for construction is still valid and in compliance with this rule.

9.2. Site Characteristics and Accessibility.

9.2.a. Sites for all new nursing homes and sites for additions to existing nursing homes shall be inspected by the director prior to site development and the completion of final drawings and specifications.

9.2.b. The site shall be located in an environment that is free from flooding and excessive noise sources such as railroads, freight yards, traffic arteries and airports.

9.2.b.1. The site shall not be exposed to excessive smoke, foul odors or dust.

9.2.c. The site shall have good drainage, approved sewage disposal, an approved potable water supply, electricity, telephone and other necessary utilities available on or near the site.

9.2.d. The site shall be accessible to physicians, emergency services and other necessary services.

9.2.e. Accessibility and transportation to the site and the nursing home shall be facilitated by paved, hard surfaced, all weather roads which are kept passable at all times.

9.2.e.1. The road shall connect directly to a paved hard surface highway.

9.2.e.2. Grades to all sites shall permit access for emergency vehicles and fire fighting equipment in all weather conditions.

9.2.f. Parking areas shall be sufficient according to the guidelines set by the American Institute of Architects.

9.2.g. Hard surface walks, a minimum of forty-eight (48) inches wide with a slip resistant surface, shall be provided at all entries and exits and connect into the main walk or parking area.

9.2.h. Soil conditions shall be reviewed as necessary by a qualified soils engineer and if conditions require, earth core boring shall be conducted.

9.2.h.1. The design professional shall supply the director with copies of soil test reports if engineered fill is installed or if other soil tests are conducted.

9.2.i. Local building codes and zoning restrictions shall be followed.

9.2.i.1. The owner, or his or her designee, shall maintain documentation certifying compliance signed by local fire, building and zoning officials, and this documentation shall be available for review.

9.3. Increase in Bed Capacity.

9.3.a. Bed capacity may be increased after the director has determined that the nursing home physical facilities will support the increase and there is compliance with other requirements including certificate of need requirements.

9.4. Equipment and Furnishings in Resident Rooms.

9.4.a. A nursing home shall provide each resident with a bed that accommodates his or her individual

needs.

9.4.b. A nursing home shall provide each resident with a night stand that has a drawer for toilet articles and utensils.

9.4.c. The nursing home shall provide a chair for each resident that accommodates the resident's individual needs.

9.4.d. The nursing home shall provide each resident with reasonable closet and drawer space for clothing and personal items.

9.4.d.1. Shelves and drawers shall be positioned at a height that accommodates the needs of the individual resident.

9.4.e. Each resident shall have individual towel bars or an equivalent. In semi-private rooms towel bars shall be located to encourage individual use.

9.4.f. A nursing home shall provide cubicle curtains that assure visual privacy for each resident.

9.4.g. A nursing home shall provide window dressings and curtains or draperies, maintained in good condition.

9.5. Laundry and Linens.

9.5.a. A nursing home shall have written procedures for handling, storing, processing, and transporting linens and other laundered goods in a manner to prevent the spread of infection.

9.5.b. A nursing home shall provide at least one clean, comfortable pillow for each bed and additional pillows shall be available.

9.5.c. A nursing home shall provide clean waterproof mattresses or mattress covers that are non-absorbent.

9.5.d. Sufficient supplies of linens shall be available to nursing personnel to assure the cleanliness and comfort of each resident.

9.5.e. The nursing home shall provide each resident with individual towels, wash cloths, and blankets.

9.5.f. When electric blankets are used, they shall be UL approved and checked periodically by the nursing home's staff for safety.

9.6. Nursing Equipment and Sterile Supplies.

9.6.a. A nursing home shall have the sufficient quantity and type of nursing equipment to meet the individual care needs for each resident.

9.6.b. All electrical resident care equipment shall be maintained, inspected and tested in accordance with the manufacture recommendations, and the applicable sections of the ANational Fire Protection Association NFPA 99 Standard for Health Care Facilities@.

9.6.c. All non-electrical equipment used for inhalation therapy (oxygen) shall be stored and maintained in accordance with the applicable sections of the ANational Fire Protection Association NFPA 99 Standard for Health Care Facilities@.

9.6.d. If a nursing home provides electrical life support services, all electrical equipment used to sustain life shall be connected to an emergency generator, through a critical branch electrical system.

9.6.d.1. The generator and all critical branch electrical circuits shall comply with the standards as identified in the ANational Fire Protection Association NFPA 99 Standard for Health Care Facilities@.

9.6.e. All equipment shall be maintained in accordance with section 8.19 of this rule.

9.6.f. Clean nursing equipment and sterile supplies shall be stored in a clean work room or store room that does not permit resident contact.

9.6.g. Sterile supplies shall not be stored under sink drains, in soiled utility rooms or in areas where contamination may occur.

9.6.h. Sterile supplies shall not be stored nor used beyond their dated shelf life.

9.6.i. Damaged supplies and utensils shall not be used.

9.7. General Maintenance and Housekeeping.

9.7.a. A nursing home shall be constructed, maintained and equipped to protect the health and safety of residents, personnel, and the public.

9.7.b. All new nursing homes shall establish and maintain the nursing home and equipment in accordance with the guidelines in the 1996-1997 Edition of the Guidelines for Design and Construction of Hospitals and Health Care Facilities as recognized by The American Institute of Architects for Health.

9.7.c. All existing nursing homes shall establish and maintain the nursing home and equipment in accordance with the guidelines referenced in the Minimum Requirements of Construction and Equipment for Hospitals and Medical Facilities - U.S. Department of Health Education and Welfare (DHEW NO. (HRA) 81-14500).

9.7.d. A nursing home shall establish and implement a maintenance program that assures that:

9.7.d.1. All equipment is operable;

9.7.d.2. The interior and exterior of the building is safe; and

9.7.d.3. The grounds are maintained in a presentable condition free from rubbish and other health hazards of a similar nature.

9.7.e. A nursing home shall establish and implement a housekeeping program and services that assures a clean, sanitary environment.

9.7.f. A nursing home shall provide a comfortable, home-like environment for

residents.

9.7.g. A nursing home shall be kept free of insects, rodents and vermin by an effective pest control program. Insecticidal strips are prohibited.

9.7.h. Pesticides shall be applied only by an applicator certified by the United States Department of Agriculture.

9.7.i. A nursing home shall have sufficient supplies for housekeeping and maintenance properly stored and conveniently located to permit frequent cleaning of floors, walls, woodwork, windows, and screens, and to facilitate building and grounds maintenance.

9.8. Solid Waste and Bio-Hazard Waste Disposal.

9.8.a. A nursing home shall have procedures and contracts for disposing of bio-hazardous waste.

9.8.a.1. Chain of custody receipts and forms shall be maintained by the nursing home for one (1) year.

9.8.b. A nursing home shall have procedures for disposing of non-hazardous medical waste and similar waste that is not considered hazardous in a safe sanitary manner.

9.8.c. Solid waste, including garbage and refuse, shall be removed from the building daily or more often as necessary.

9.8.d. All garbage and refuse shall be stored in durable, covered, leak-proof and vermin-proof containers or dumpsters.

9.8.d.1 The containers and dumpsters shall be kept clean of all residue accumulation.

9.8.e. All garbage and refuse shall be disposed of in accordance with the applicable provisions of state and local law and rules governing the management of garbage and refuse.

9.9. Water Supply.

9.9.a. A nursing home shall have a water supply that is safe and of sufficient capacity to meet the residents' needs and the requirements of the sprinkler system.

9.9.b. A nursing home shall have as its source of water a public water system that complies with West Virginia Division of Health Rules, Public Water Systems, 64CSR3, or a water well that complies with West Virginia Division of Health Rules, Water Well Regulations, 64CSR19 and Water Well Design Standards, 64CSR46.

9.9.c. A nursing home shall have hot and cold running water in sufficient supply to meet the needs of the residents.

9.9.d. Hot water distribution systems serving resident care areas shall be recirculating to provide continuous hot water at each hot water outlet.

9.9.d.1. The temperatures shall be appropriate for comfortable use but shall not exceed 110E

degrees.

9.9.e. A nursing home shall have written agreements with water suppliers to deliver water when there is a loss of the normal supply.

9.10. Sewage Disposal.

9.10.a. Sewage disposal shall be in accordance with West Virginia Division of Health Rules, Sewage System Rules, and West Virginia Division of Health Rules, Sewage Treatment and Collection System Design Standards, 64CSR47.

9.10.b. The sewage system shall be adequate to meet the nursing home=s needs.

9.10.c. Sewage systems shall be kept in good working order and shall be properly operated and maintained.

9.11. Fire Safety, Disaster and Emergency Preparedness.

9.11.a. A nursing home shall provide evidence of compliance with applicable rules of the State Fire Commission.

9.11.a.1. Any variation to compliance with the fire code shall be coordinated with the department and approved in writing by the state fire marshal.

9.11.b. A nursing home shall have a written internal and external disaster and emergency preparedness plan approved by the director that sets forth procedures to be followed in the event of an internal or external disaster or emergency that could severely affect the operation of the nursing home.

9.11.c. The disaster and emergency preparedness plan shall have procedures to be followed in the event of the following: fire, missing resident, high winds, tornadoes, bomb threats, utility failure, flood and severe winter weather.

9.11.d. The disaster and emergency preparedness plan shall include at least an alternate shelter agreement, an emergency transportation policy, and an emergency food supply list and menu that will provide nutrition for all persons residing in the nursing home for a minimum of seventy-two (72) hours.

9.11.e. The disaster and emergency preparedness plan shall be developed and maintained with the assistance of qualified fire safety and other emergency response teams.

9.11.f. There shall be copies of the disaster and emergency preparedness plan at all staff stations or emergency control stations.

9.11.f.1. The disaster and emergency preparedness plan shall be located in an area that allows visual contact at all times. The nursing home staff shall know the location of the plan at all times.

9.11.g. The local fire department shall be provided with a floor and disaster plan and be given opportunities to become familiar with the nursing home.

9.11.h. A nursing home shall have a written plan and procedures for transferring casualties and uninjured residents.

9.11.h.1. These procedures shall include the transfer of pertinent resident records including identification information, diagnoses, allergies, advance directives, medications and treatments, and other records needed to ensure continuity of care.

9.11.i. A nursing home shall have written instructions regarding the location and use of alarm systems, signals and fire fighting equipment.

9.11.j. A nursing home shall have information regarding methods of fire containment.

9.11.k. A nursing home shall have written instructions regarding accessibility for evacuation routes.

9.11.l. The disaster and emergency preparedness plan shall be reviewed and updated by the administrator or his or her designee on an annual basis and signed and dated by the administrator or his or her designee to verify the plan was reviewed.

9.11.m. Emergency call information shall be conspicuously posted near each telephone in the nursing home, exclusive of telephones in resident rooms. This information shall include at least the following:

9.11.m.1. The telephone numbers of the fire department, the police, and ambulance service and other appropriate emergency services; and

9.11.m.2. Key personnel telephone numbers, including at least the following:

9.11.m.2.A. The administrator;

9.11.m.2.B. The director of nursing or nurse on call;

9.11.m.2.C. The maintenance director or safety director;

9.11.m.2.D. The physician on call; and

9.11.m.2.E. Other appropriate personnel.

9.11.n. A nursing home shall have at least one non-coin operated telephone or one extension on each resident occupied unit and additional telephones and extensions if needed to summon help in case of an emergency.

9.11.o. A nursing home shall provide an area of sufficient space to hold the congregate population of the nursing home with a heat source that is supplied with emergency electrical power from the emergency power source.

9.12. Disaster Training.

9.12.a. A nursing home shall operate an internal disaster preparedness program that includes orientation and ongoing training and drills in procedures and specific assignments.

9.12.b. The internal disaster plan shall be rehearsed at least annually.

9.12.c. Fire drills shall be held at least quarterly for each shift.

9.12.d. Disaster Rehearsal and Fire Drill Reports. A nursing home shall keep on file for at least two (2) years, a dated written report and an evaluation of each disaster rehearsal and fire drill conducted on the premises.

9.13. Animals.

9.13.a. Any nursing home where animals visit or are boarded shall have policies that assure the general well-being of residents as approved by the director. The policies shall comply with local health ordinances.

'64-13-10. Administration.

10.1. A nursing home shall be administered in a manner that enables it to use its resources effectively and efficiently to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident.

10.2. Licensure.

10.2.a. A nursing home shall be licensed pursuant to section 3 of this rule.

10.2.b. A nursing home shall operate and provide services in compliance with all applicable federal, state, and local laws, rules, and codes and with accepted professional standards and principles that apply to professionals providing services in a nursing home.

10.3. Governing Body.

10.3.a. A nursing home shall have a governing body.

10.3.b. The governing body shall adopt and enforce rules governing the health care and safety of residents, the protection of their personal and property rights, and the operation of the nursing home.

10.3.c. The governing body shall develop a written nursing home plan that will be reviewed annually. In addition to the other requirements described in law and in this rule, the nursing home plan shall include:

10.3.c.1. An annual operating budget, including all anticipated income and expenses; and

10.3.c.2. A capital expenditure plan for at least a three (3) year period.

10.3.d. The governing body shall assure the development and maintenance of written policies and procedures that govern the services the nursing home provides.

10.3.d.1. The policies and procedures shall include as a minimum all policies and procedures required by this rule.

10.3.d.2. A copy of each written policy and procedure shall be available for inspection on request by the nursing home's staff and residents and by members of the public.

'64-13-11. Human Resources.