GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2009

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HOUSE BILL 456 PROPOSED COMMITTEE SUBSTITUTE H456-PCS50548-SHf-25

	Short Title:	Fech. & Org. Changes/Certain DHHS Facilities.	(Public)
	Sponsors:		
	Referred to:		
		March 9, 2009	
1 2 3		A BILL TO BE ENTITLED MAKE TECHNICAL AND ORGANIZATIONAL CHANGE NG THE LICENSURE AND INSPECTION OF FACILIT	
4		BLED INDIVIDUALS.	
5		sembly of North Carolina enacts:	
6 7	following new A	CTION 1.(a) Chapter 131D of the General Statutes is amend Article to read:	led by adding the
8	Ionowing new 7	"Article 1B.	
9		"Licensing of Maternity Homes."	
10	SEC	TION 1.(b) G.S. 131D-1 is recodified as G.S. 131D-10.10	under Article 1B
11		D of the General Statutes.	
12	SEC	CTION 1.(c) The title of Article 1 of Chapter 131D of the	e General Statutes
13	reads as rewritte	en:	
14		"Article 1.	
15		Licensing of Facilities.	
16	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Adult Care Homes."	
17		CTION 1.(d) G.S. 131D-2 is repealed.	
18		TION 1.(e) Article 1 of Chapter 131D of the General Statut	
19	Section I(c) of	this act, is amended by adding the following new Parts to read	:
20	110 101D 0 1 D	"Part 1. Licensing.	
21 22	" <u>§ 131D-2.1. D</u> As used in t		
22 23	$\frac{As used \ln t}{(1)}$	Abuse. – The willful or grossly negligent infliction of phy	veical pain injury
23 24	<u>(1)</u>	or mental anguish, unreasonable confinement, or the	
25		negligent deprivation by the administrator or staff of an a	
26		services which are necessary to maintain mental and physic	
27	(2)	Administrator. – A person approved by the Department	
28		Human Services who has the responsibility for the tot	
29		licensed adult care home.	
30	<u>(3)</u>	Adult care home An assisted living residence in w	hich the housing
31		management provides 24-hour scheduled and unschedu	led personal care
32		services to two or more residents, either directly or for	
33		through formal written agreement with licensed home	
34		agencies. Some licensed adult care homes provide super	vision to persons



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		with cognitive impairments whose decisions, if mad	e independently, may
		jeopardize the safety or well-being of themselves or	
		require supervision. Medication in an adult care home	e may be administered
		by designated trained staff. Adult care homes that prov	
		unrelated residents are commonly called family care ho	
	<u>(4)</u>	Amenities Services such as meals, housekeeping	
,	<u> </u>	grocery shopping that do not involve hands-on persona	
	(5)	Assisted living residence Any group housing and	
1		two or more unrelated adults, by whatever name it	is called, that makes
		available, at a minimum, one meal a day and house	ekeeping services and
		provides personal care services directly or through	
		agreement with one or more licensed home care or l	hospice agencies. The
		Department may allow nursing service exceptions on	a case-by-case basis.
		Settings in which services are delivered may in	nclude self-contained
		apartment units or single or shared room units with	private or area baths.
		Assisted living residences are to be distinguished	from nursing homes
,		subject to provisions of G.S. 131E-102. There are the	hree types of assisted
		living residences: adult care homes, adult care homes	that serve only elderly
)		persons, and multiunit assisted housing with service	ces. As used in this
)		section, "elderly person" means:	
		a. Any person who has attained the age of 55	5 years or older and
		requires assistance with activities of daily	living, housing, and
		services, or	
		b. Any adult who has a primary diagnosis of A	Alzheimer's disease or
		other form of dementia who requires assistant	nce with activities of
		daily living, housing, and services provi	ided by a licensed
		Alzheimer's and dementia care unit.	-
	<u>(6)</u>	Compensatory agent A spouse, relative, or other can	retaker who lives with
1		a resident and provides care to a resident.	
	<u>(7)</u>	Department The Department of Health and Human	Services unless some
		other meaning is clearly indicated from the context.	
	(8)	Exploitation. – The illegal or improper use of an aged	or disabled resident or
		the aged or disabled resident's resources for another's p	orofit or advantage.
	<u>(9)</u>	Family care home An adult care home having two	to six residents. The
		structure of a family care home may be no more than	two stories high, and
		none of the aged or physically disabled persons being	g served there may be
		housed in the upper story without provision for	two direct exterior
		ground-level accesses to the upper story.	
	(10)	Multiunit assisted housing with services An assisted	ed living residence in
)		which hands-on personal care services and nursing	g services which are
		arranged by housing management are provided by a	licensed home care or
		hospice agency through an individualized written ca	are plan. The housing
		management has a financial interest or financial affilia	ation or formal written
		agreement which makes personal care services acc	essible and available
		through at least one licensed home care or hospice age	ency. The resident has
)		a choice of any provider, and the housing managem	ent may not combine
,		charges for housing and personal care services. A	-
		compensatory agents, must be capable, through i	informed consent, of
		entering into a contract and must not be in need of	
)		Assistance with self-administration of medications	may be provided by
		appropriately trained staff when delegated by a licens	
			<i>a</i> • •

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	the home care agency's established plan of care. Mult	iunit assisted housing
	with services programs are required to register with the	he Division of Health
	Service Regulation and to provide a disclosure state	ment. The disclosure
	statement is required to be a part of the annual rental co	ontract that includes a
	description of the following requirements:	
	a. Emergency response system;	
	b. Charges for services offered;	
	c. Limitations of tenancy;	
	c.Limitations of tenancy;d.Limitations of services;	
	e. Resident responsibilities;	
	e.Resident responsibilities;f.Financial/legal relationship between housing m	anagement and home
	care or hospice agencies;	<u> </u>
	g. A listing of all home care or hospice agencies	and other community
	services in the area;	<u>/</u>
	h. An appeals process; and	
	i. Procedures for required initial and annual re	sident screening and
	referrals for services.	
	Continuing care retirement communities, subject t	o regulation by the
	Department of Insurance under Chapter 58 of the	
	exempt from the regulatory requirements for multiunit	
	services programs.	
(11)	Neglect. – The failure to provide the services nec	essary to maintain a
<u> </u>	resident's physical or mental health.	
(12)	Personal care services. – Any hands-on services allows	ed to be performed by
<u>-</u>	In-Home Aides II or III as outlined in Department rules	•
(13)	Registration. – The submission by a multiunit assisted	
<u>,</u>	provider of a disclosure statement containing all the in	
	in subdivision (10) of this section.	
(14)	Resident. – A person living in an assisted living resider	nce for the purpose of
<u>-</u>	obtaining access to housing and services provided of	± ±
	housing management.	
(15)	Secretary. – The Secretary of Health and Human Servi	ces unless some other
<u> </u>	meaning is clearly indicated from the context.	
"§ 131D-2.2. Pe	ersons not to be cared for in adult care homes an	d multiunit assisted
	ng with services; hospice care; obtaining services.	
	Care Homes. – Except when a physician certifies that a	ppropriate care can be
provided on a ter	mporary basis to meet the resident's needs and prevent un	nnecessary relocation,
	s shall not care for individuals with any of the followi	
needs:		-
(1)	Ventilator dependency;	
$\overline{(2)}$	Individuals requiring continuous licensed nursing care;	
$\overline{(3)}$	Individuals whose physician certifies that place	ment is no longer
	appropriate;	
<u>(4)</u>	Individuals whose health needs cannot be met in the sp	ecific adult care home
	as determined by the residence; and	
(5)	Such other medical and functional care needs as	s the Medical Care
	Commission determines cannot be properly met in an a	
(b) Multi	unit Assisted Housing With Services. – Except when a p	
	can be provided on a temporary basis to meet the resider	
** *	cation, multiunit assisted housing with services shall no	• • • • •
	ollowing conditions or care needs:	

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l	<u>(1)</u>	Ventilator dependency;
2	(2)	Dermal ulcers III and IV, except those stage III ulcers which are determined
3		by an independent physician to be healing;
Ļ	<u>(3)</u>	Intravenous therapy or injections directly into the vein, except for
	- <u></u> -	intermittent intravenous therapy managed by a home care or hospice agency
		licensed in this State;
	<u>(4)</u>	Airborne infectious disease in a communicable state that requires isolation of
	<u>~_/</u>	the individual or requires special precautions by the caretaker to prevent
		transmission of the disease, including diseases such as tuberculosis and
		excluding infections such as the common cold;
	(5)	Psychotropic medications without appropriate diagnosis and treatment plans;
	<u>(6)</u>	Nasogastric tubes;
	$\frac{(0)}{(7)}$	Gastric tubes, except when the individual is capable of independently
		feeding himself or herself and caring for the tube, or as managed by a home
		care or hospice agency licensed in this State;
	<u>(8)</u>	Individuals requiring continuous licensed nursing care;
	(9)	Individuals whose physician certifies that placement is no longer
	<u>())</u>	appropriate;
	(10)	<u>Unless the individual's independent physician determines otherwise</u> ,
	<u>(10)</u>	individuals who require maximum physical assistance as documented by a
		uniform assessment instrument and who meet Medicaid nursing facility
		level-of-care criteria as defined in the State Plan for Medical Assistance.
		Maximum physical assistance means that an individual has a rating of total
		dependence in four or more of the seven activities of daily living as
		documented on a uniform assessment instrument;
	(11)	Individuals whose health needs cannot be met in the specific multiunit
	<u>(11)</u>	assisted housing with services as determined by the residence; and
	(12)	Such other medical and functional care needs as the Medical Care
	(12)	Commission determines cannot be properly met in multiunit assisted
		housing with services.
	(c) Hospi	ce Care. – At the request of the resident, hospice care may be provided in an
		esidence under the same requirements for hospice programs as described in
		upter 131E of the General Statutes.
		ning Services. – The resident of an assisted living facility has the right to
		at the resident's own expense from providers other than the housing
		is subsection shall not be construed to relieve the resident of the resident's
		ation to pay the housing management for any services covered by the contract
		lent and housing management.
		emptions from licensure.
		bollowing are excluded from this Article and are not required to be registered or
		under this Article:
	<u>(1)</u>	Facilities licensed under Chapter 122C or Chapter 131E of the General
	(1)	Statutes;
	<u>(2)</u>	Persons subject to rules of the Division of Vocational Rehabilitation
	<u>(2)</u>	Services;
	(3)	Facilities that care for no more than four persons, all of whom are under the
	<u>(J)</u>	supervision of the United States Veterans Administration;
	<u>(4)</u>	Facilities that make no charges for housing, amenities, or personal care
	<u>(+)</u>	service, either directly or indirectly; and
		service, ender directly of indirectly, and

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1	<u>(5)</u>	Institutions that are maintained or operated by a unit of go	vernment and that
2		were established, maintained, or operated by a unit of	government and
3		exempt from licensure by the Department on September 30) <u>, 1995.</u>
4	" <u>§ 131D-2.4. Li</u>	censure of adult care homes for aged and disabled indiv	<u>iduals; impact of</u>
5		violations on licensure; compliance history review; licens	
6		sure. – Except for those facilities exempt under G	
7	Department of H	lealth and Human Services shall inspect and license all adul	t care homes. The
8		l issue a license for a facility not currently licensed as an adu	
9	2	nths. If the licensee demonstrates substantial compliance wit	
10	-	and rules adopted thereunder, the Department shall issue	a license for the
11	balance of the ca		
12		bliance History Review Prior to issuing a new license	
13		the Department shall conduct a compliance history review	
14	· ·	nd affiliates. The Department may refuse to license a	
15		ory review shows a pattern of noncompliance with State law	· · · ·
16		affiliates, or otherwise demonstrates disregard for the h	
17		ents in current or past facilities. The Department shall re	
18		on and make its determination according to rules adopted by	the Medical Care
19	Commission.		
20		Violations No new license shall be issued for any adult	t care home to an
21	applicant for lice		
22	<u>(1)</u>	Was the owner, principal, or affiliate of a licensable f	
23		Chapter, Chapter 122C, or Article 7 of Chapter 110 of the	
24	(-)	that had its license revoked until one full year after the date	
25	<u>(2)</u>	Is the owner, principal, or affiliate of an adult care home th	
26		penalty for a Type A or Type B violation until the earlier	
27		the date the penalty was assessed or until the home	
28		complied with the correction plan established pursuant to	
29		substantial compliance has been certified by the Department	
30	<u>(3)</u>	Is the owner, principal, or affiliate of an adult care home t	
31		summarily suspended or downgraded to provisional star	
32		<u>Type A or Type B violations until six months from the dat</u>	
33		of the license, restoration from provisional to full licensure	, or termination of
34		the provisional license, as applicable; or	
35	<u>(4)</u>	Is the owner, principal, or affiliate of a licensable facility t	
36		summarily suspended or downgraded to provisional star	
37		violations under this Article or Chapter 122C of the Gener	
38		its license summarily suspended or denied under Article 7	-
39 40		the General Statutes until six months from the date of the	
40		the license, restoration from provisional to full licensure,	or termination of
41 42	An annliasa	the provisional license, as applicable.	on of substantial
		t for new licensure may appeal a denial of certification r subdivision (2) of this subsection by filing with the Depart	
43 44	-	r subdivision (2) of this subsection by filing with the Depart	-
44 45		cretary within 10 days of the date of denial of the certification	
45 46	•	<u>e request for review, the Secretary shall issue to the ap</u> at either denies certification of substantial compliance or ce	
40 47		decision of the Secretary is final.	erunes substantial
47		se Renewals. – License renewals shall be valid for one yea	r from the data of
40 49		evoked earlier by the Secretary for failure to comply with	
49 50		les adopted hereunder. Licenses shall be renewed annually u	• •
50		proval of the renewal application. The Department shall not	÷ •

General Assembly Of North Carolina Session 2009 outstanding fees, fines, and penalties imposed by the State against the home have not been paid. 1 2 Fines and penalties for which an appeal is pending are exempt from consideration. The renewal 3 application shall contain all necessary and reasonable information that the Department may 4 require. 5 (e) In order for an adult care home to maintain its license, it shall not hinder or interfere 6 with the proper performance of duty of a lawfully appointed community advisory committee, as 7 defined by G.S. 131D-31 and G.S. 131D-32. 8 The Department shall not issue a new license for a change of ownership of an adult (f) 9 care home if outstanding fees, fines, and penalties imposed by the State against the home have not been paid. Fines and penalties for which an appeal is pending are exempt from 10 consideration. 11 "§ 131D-2.5. License fees. 12 13 The Department shall charge each adult care home with six or fewer beds a nonrefundable 14 annual license fee in the amount of two hundred fifty dollars (\$250.00). The Department shall charge each adult care home with more than six beds a nonrefundable annual license fee in the 15 amount of three hundred fifty dollars (\$350.00) plus a nonrefundable annual per-bed fee of 16 17 twelve dollars and fifty cents (\$12.50). 18 '§ 131D-2.6. Legal action by Department. 19 Notwithstanding the existence or pursuit of any other remedy, the Department may, (a) 20 in the manner provided by law, maintain an action in the name of the State for injunction or 21 other process against any person to restrain or prevent the establishment, conduct, management, 22 or operation of an adult care home without a license. Such action shall be instituted in the 23 superior court of the county in which any unlicensed activity has occurred or is occurring. 24 (b) Any individual or corporation that establishes, conducts, manages, or operates a 25 facility subject to licensure under this section without a license is guilty of a Class 3 26 misdemeanor and, upon conviction, shall be punishable only by a fine of not more than fifty 27 dollars (\$50.00) for the first offense and not more than five hundred dollars (\$500.00) for each 28 subsequent offense. Each day of a continuing violation after conviction shall be considered a 29 separate offense. 30 If any person shall hinder the proper performance of duty of the Secretary or the (c) Secretary's representative in carrying out this section, the Secretary may institute an action in 31 32 the superior court of the county in which the hindrance has occurred for injunctive relief 33 against the continued hindrance, irrespective of all other remedies at law. 34 Actions under this section shall be in accordance with Article 37 of Chapter 1 of the (d) 35 General Statutes and Rule 65 of the Rules of Civil Procedure. 36 "§ 131D-2.7. Provisional license; license revocation; summary suspension of license; 37 suspension of admission. 38 Provisional License. - Except as otherwise provided in this section, the Department (a) 39 may amend a license by reducing it from a full license to a provisional license for a period of 40 not more than 90 days whenever the Department finds that: 41 The licensee has substantially failed to comply with the provisions of (1)42 Articles 1 and 3 of this Chapter and the rules adopted pursuant to these 43 Articles; 44 There is a reasonable probability that the licensee can remedy the licensure (2) 45 deficiencies within a reasonable length of time; and There is a reasonable probability that the licensee will be able thereafter to 46 (3) 47 remain in compliance with the licensure rules for the foreseeable future. 48 The Department may extend a provisional license for not more than one additional 90-day period upon finding that the licensee has made substantial progress toward remedying the 49 50 licensure deficiencies that caused the license to be reduced to provisional status.

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1	The Depa	rtment also	o may issue a provisional license to a facility, pu	ursuant to rules adopted
2	by the Medical Care Commission, for substantial failure to comply with the provisions of this			
3			pursuant to this section. Any facility wishing to	
4		-	shall be entitled to an administrative hearin	
5	•		re Act, Chapter 150B of the General Statutes. A	· ·
6			in 30 days after the Department mails written n	·
7	the provision		in so days after the Department mans whiten h	
8			ocation. – The Department may revoke a license	whenever.
9	(1		Department finds that:	whenever.
0	<u>(1</u>	<u> <u>a.</u></u>	The licensee has substantially failed to comply	v with the provisions of
1		<u>u.</u>	Articles 1 and 3 of this Chapter and the rul	±
2			these Articles; and	es adopted parsuant to
3		<u>b.</u>	It is not reasonably probable that the lice	ansee can remedy the
4		<u>U.</u>	licensure deficiencies within a reasonable leng	
5	(2)) Tha I	Department finds that:	<u>ui oi uine, oi</u>
, 5	<u>(2</u>			wwith the provisions of
		<u>a.</u>	The licensee has substantially failed to comply Articles 1 and 3 of this Chapter and the rul	
7 3				es adopted pursuant to
))		L	these Articles; and Although the licensee may be able to remade	the deficiencies within
		<u>b.</u>	Although the licensee may be able to remedy	
) l			a reasonable time, it is not reasonably probab	
			be able to remain in compliance with li	censure rules for the
2			foreseeable future; or	
-		<u>c.</u>	The licensee has failed to comply with the p	
			and 3 of this Chapter and the rules adopted pu	
			and the failure to comply endangered the heal	th, safety, or welfare of
	()	~	the patients in the facility.	
			spension The Department may summarily sus	
			ever it finds substantial evidence of abuse, negle	± •
		-	ts an imminent danger to the health and safety	•
			ning to contest summary suspension of a license	
		-	as provided in the Administrative Procedure Ac	
		÷	etition for a contested case shall be filed with	thin 20 days after the
	-		ce of summary suspension to the licensee.	
		-	of Admissions.	
	<u>(1</u>		ldition to the administrative penalties describe	
			tary may suspend the admission of any new re-	
			where the conditions of the adult care home	
			n or safety of the residents. This suspension s	*
		deter	mined by the Secretary and shall remain in effe	ct until the Secretary is
		<u>satisf</u>	ied that conditions or circumstances merit remov	ving the suspension.
	<u>(2</u>) <u>In im</u>	posing a suspension under this section, the Secr	etary shall consider the
		follo	wing factors:	
		<u>a.</u>	The degree of sanctions necessary to ensure	e compliance with this
			section and rules adopted hereunder; and	
		<u>b.</u>	The character and degree of impact of the con	nditions at the home on
			the health or safety of its residents.	
	<u>(3</u>) <u>The S</u>	Secretary of Health and Human Services shall ad	lopt rules to implement
		<u>this</u> s	ection.	- —
	<u>(4</u>) Any	facility wishing to contest a suspension of admi	issions shall be entitled
			administrative hearing as provided in the Ad	
		Act,	Chapter 150B of the General Statutes. A petition	on for a contested case
1		ACI,	Chapter 150b of the General Statutes. A petitio	on for a contested case

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1	shall be filed within 20 days after the Department mails a notice of
2	suspension of admissions to the licensee.
3	"§§ 131D-2.8 through 2.10: Reserved for future codification purposes.
4	"Part 2. Other Laws Pertaining to the Inspection
5	and Operation of Adult Care Homes.
6	"§ 131D-2.11. Inspections, monitoring, and review by State agency and county
7	departments of social services.
8	(a) State Inspection and Monitoring. – The Department shall ensure that adult care
9	homes required to be licensed by this Article are monitored for licensure compliance on a
10	regular basis. All facilities licensed under this Article and adult care units in nursing homes are
11	subject to inspections at all times by the Secretary. The Division of Health Service Regulation
12	shall inspect all adult care homes and adult care units in nursing homes on an annual basis. In
13	addition, the Department shall ensure that adult care homes are inspected every two years to
14	determine compliance with physical plant and life-safety requirements.
15	(b) Monitoring by County. – The Department shall work with county departments of
16	social services to do the routine monitoring in adult care homes to ensure compliance with
17	State and federal laws, rules, and regulations in accordance with policy and procedures
18	established by the Division of Health Service Regulation and to have the Division of Health
19	Service Regulation oversee this monitoring and perform any required follow-up inspection. The
20	county departments of social services shall document in a written report all on-site visits,
21	including monitoring visits, revisits, and complaint investigations. The county departments of
22	social services shall submit to the Division of Health Service Regulation written reports of each
23	facility visit within 20 working days of the visit.
24	(c) State Review of County Compliance. – The Division of Health Service Regulation
25	shall conduct and document annual reviews of the county departments of social services'
26	performance. When monitoring is not done timely or there is failure to identify or document
27	noncompliance, the Department may intervene in the particular service in question. Department
28	intervention shall include one or more of the following activities:
29	(1) Sending staff of the Department to the county departments of social services
30	to provide technical assistance and to monitor the services being provided by
31	the facility.
32	(2) Advising county personnel as to appropriate policies and procedures.
33	(3) Establishing a plan of action to correct county performance.
34	The Secretary may determine that the Department shall assume the county's regulatory
35	responsibility for the county's adult care homes.
36	" <u>§ 131D-2.12. Training requirements; county departments of social services.</u>
37	(a) The county departments of social services' adult home specialists and their
38 39	supervisors shall complete:
39 40	(1) Eight hours of prebasic training within 60 days of employment; (2) Thirty two hours of hosis training within six months of employment;
40 41	 (2) <u>Thirty-two hours of basic training within six months of employment;</u> (3) Twenty-four hours of postbasic training within six months of the basic
42	(3) <u>Twenty-four hours of postbasic training within six months of the basic</u> training program;
42 43	
43 44	(4) <u>A minimum of eight hours of complaint investigation training within six</u> months of employment; and
44 45	(5) <u>A minimum of 16 hours of statewide training annually by the Division of</u>
46	Health Service Regulation.
40 47	(b) The joint training requirements by the Department shall be as provided in
48	G.S. 143B-139.5B.
49	" <u>§ 131D-2.13. Departmental duties.</u>
50	(a) Enforcement of Room Ventilation and Temperature. – The Department shall
51	monitor regularly the enforcement of rules pertaining to air circulation, ventilation, and room
<i>.</i> 1	montor regulary the entercoment of fulles pertaining to an encalation, ventuation, and foom

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1	temperature in	resident living quarters. These rules shall include the requirement that air
2		at least one fan per resident bedroom and living and dining areas be provided
3		ature in the main center corridor exceeds 80 degrees Fahrenheit.
4		inistrator Directory. – The Department shall keep an up-to-date directory of all
5		administrators as defined in G.S. 131D-2.1.
6	×	rtmental Complaint Hotline Adult care homes shall post the Division of
7		Regulation's complaint hotline number conspicuously in a public place in the
8	facility.	
9	(d) Prov	der File The Department of Health and Human Services shall establish and
10	<u>maintain a pro</u>	vider file to record and monitor compliance histories of facilities, owners
11		filiates of nursing homes and adult care homes.
12		rt on Use of Restraint The Department shall report annually on October 1 to
13	the Joint Legisl	ative Oversight Committee on Mental Health, Developmental Disabilities, and
14	Substance Abus	e Services the following for the immediately preceding fiscal year:
15	<u>(1)</u>	The level of compliance of each adult care home with applicable State law
16		and rules governing the use of physical restraint and physical hold of
17		residents. The information shall indicate areas of highest and lowest levels of
18		compliance.
19	<u>(2)</u>	The total number of adult care homes that reported deaths under
20		G.S. 131D-34.1, the number of deaths reported by each facility, the number
21		of deaths investigated pursuant to G.S. 131D-34.1, and the number found by
22		the investigation to be related to the adult care home's use of physical
23		restraint or physical hold.
24	" <u>§ 131D-2.14.</u>	Confidentiality.
25		ding G.S. 8-53 or any other law relating to confidentiality of communications
26	between physic	an and patient, in the course of an inspection conducted under G.S. 131D-2.11:
27	<u>(1)</u>	Department representatives may review any writing or other record
28		concerning the admission, discharge, medication, care, medical condition, or
29		history of any person who is or has been a resident of the facility being
30		inspected.
31	<u>(2)</u>	Any person involved in giving care or treatment at or through the facility
32		may disclose information to Department representatives unless the resident
33		objects in writing to review of the resident's records or disclosure of such
34		information.
35	<u>(3)</u>	The facility, its employees, and any other person interviewed in the course of
36		an inspection shall be immune from liability for damages resulting from
37		disclosure of any information to the Department. The Department shall not
38		disclose:
39		a. Any confidential or privileged information obtained under this
40		section unless the resident or the resident's legal representative
41		authorizes disclosure in writing or unless a court of competent
42		jurisdiction orders disclosure, or
43		b. The name of anyone who has furnished information concerning a
44		facility without that person's consent.
45		The Department shall institute appropriate policies and procedures to
46		ensure that unauthorized disclosure does not occur. All confidential or
47		privileged information obtained under this section and the names of persons
48		providing such information shall be exempt from Chapter 132 of the General
49		Statutes.
50	<u>(4)</u>	Notwithstanding any law to the contrary, Chapter 132 of the General
51		Statutes, the Public Records Law, applies to all records of the State Division

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1	of Social Services of the Department of Health and Human Servi	ces and of
2	any county department of social services regarding inspections of	
3	facilities except for information in the records that is confi	dential or
4	privileged, including medical records, or that contains the names o	
5	or complainants.	
6	"§ 131D-2.15. Resident assessments.	
7	(a) The Department shall ensure that facilities conduct and complete an asse	essment of
8	each resident within 72 hours of admitting the resident and annually thereafter. In c	conducting
9	the assessment, the facility shall use an assessment instrument approved by the Secret	etary upon
10	the advice of the Director of the Division of Aging and Adult Services. The Depart	ment shall
11	provide ongoing training for facility personnel in the use of the approved a	assessment
12	instrument.	
13	The facility shall use the assessment to develop appropriate and comprehensi	ve service
14	plans and care plans and to determine the level and type of facility staff that is need	ed to meet
15	the needs of residents. The assessment shall determine a resident's level of functi	
16	shall include, but not be limited to, cognitive status and physical functioning in a	ctivities of
17	daily living. Activities of daily living are personal functions essential for the l	
18	well-being of the resident. The assessment shall not serve as the basis for medical	care. The
19	assessment shall indicate if the resident requires referral to the resident's physicia	<u>n or other</u>
20	appropriate licensed health care professional or community resource.	
21	(b) The Department, as part of its inspection and licensing of adult care ho	mes, shall
22	review assessments and related service plans and care plans for a selected number of	f residents.
23	In conducting this review, the Department shall determine:	
24	(1) Whether the appropriate assessment instrument was adminis	tered and
25	interpreted correctly;	
26	(2) Whether the facility is capable of providing the necessary services:	<u>2</u>
27	(3) Whether the service plan or care plan conforms to the resu	<u>alts of an</u>
28	appropriately administered and interpreted assessment; and	
29	(4) Whether the service plans or care plans are being implemented fu	
30	accordance with an appropriately administered and interpreted asse	
31	(c) If the Department finds that the facility is not carrying out its a	
32	responsibilities in accordance with this section, the Department shall notify the fa	
33	require the facility to implement a corrective action plan. The Department shall also	
34	resident of the results of its review of the assessment, service plans, and care plans	
35	for the resident. In addition to administrative penalties, the Secretary may su	
36	admission of any new residents to the facility. The suspension shall be for the facility of the suspension shall be for the suspension shall b	-
37	determined by the Secretary and shall remain in effect until the Secretary is sat	isfied that
38	conditions or circumstances merit removing the suspension.	
39	" <u>§ 131D-2.16. Rules.</u>	
40	Except as otherwise provided in this Article, the Medical Care Commission s	•
41	rules necessary to carry out this Article. The Commission has the authority, in adop	-
42	to specify the limitation of nursing services provided by assisted living resid	
43	developing rules, the Commission shall consider the need to ensure comparable	-
44 45	services provided to residents, whether these services are provided directly by	
45	assisted living provider, licensed home care agency, or hospice. In adult care hom	
46 47	arrangements where residents require supervision due to cognitive impairments, rule	
47 48	adopted to ensure that supervision is appropriate and adequate to meet the specia these residents. Rule-making authority under this section is in addition to that confe	
48 49	G.S. 131D-4.3 and G.S. 131D-4.5.	
49 50	<u>8 131D-2.17. Impact on other laws; severability.</u>	
50	$\frac{3}{1010}$ -2.17. Impact on other laws, sever admity.	

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1	(a) Nothing	in this section shall be construed to supersede an	y federal or State antitrust,
2	antikickback, or saf	e harbor laws or regulations.	-
3	(b) If any	provisions of this section or the application	of it to any person or
4	circumstance is hel	d invalid, the invalidity does not affect other pro-	ovisions or applications of
5	the section which c	can be given effect without the invalid provision	or application, and to this
6	end the provisions of	of this section are severable.	
7	" <u>§ 131D-2.18. App</u>	<u>plication of other laws.</u>	
8	(a) Certifica	ation of assisted living administrators shall be as p	provided under Article 20A
9	of Chapter 90 of the	e General Statutes.	
10	(b) <u>Complia</u>	nce with the Health Care Personnel Registry sl	hall be as provided under
11	<u>G.S. 131E-256.</u>		
12	(c) <u>Rules fo</u>	or the operation of the adult care portion of a com	bination home, as defined
13	in G.S. 131E-101, s	hall be as provided in G.S. 131E-104."	
14	SECTIO	DN 2. G.S. 131D-41 and G.S. 131D-42 are repeal	ed.
15	SECTIO	DN 3.(a) G.S. 131D-2.1(10), as enacted by Sect	tion 1 of this act, reads as
16	rewritten:		
17	"(10) "	'Multiunit assisted housing with services." – An a	assisted living residence in
18	V	which hands-on personal care services and nu	rsing services which are
19	а	rranged by housing management are provided by	y a licensed home care or
20	ł	nospice agency through an individualized writte	n care plan. The housing
21	r	nanagement has a financial interest or financial a	ffiliation or formal written
22		greement which makes personal care services	
23	t	hrough at least one licensed home care or hospice	e agency. The resident has
24		a choice of any provider, and the housing mana	
25		charges for housing and personal care service	
26		compensatory agents, must be capable, throug	
27		entering into a contract and must not be in nee	-
28		Assistance with self-administration of medication	
29		appropriately trained staff when delegated by a li	6
30		he home care agency's established plan of care.	
31		with services programs are required to register and	-
32		Health Service <u>Regulation.</u> Regulation and to prov	
33		Multiunit assisted housing with services programs	
34	—	lisclosure statement to the Division of Health	-
35		lisclosure statement is required to be a part of the	
36	1	ncludes a description of the following requiremen	ts:
37		. Emergency response system;	
38		b. Charges for services offered;	
39		Limitations of tenancy;	
40		Limitations of services;	
41		e. Resident responsibilities;	
42	f	8	ng management and home
43		care or hospice agencies;	
44	Ę	g. A listing of all home care or hospice agen	icies and other community
45		services in the area;	
46		n. An appeals process; and	1 1 / 1 / 1
47	i	1	al resident screening and
48		referrals for services.	, 1 ,• 1 .1
49 50		Continuing care retirement communities, subje	
50	I	Department of Insurance under Chapter 58 of	the General Statutes, are

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1	exempt from the regulatory requirements for multiunit assisted housing with
2	services programs."
3	SECTION 3.(b) G.S. 131D-2.5, as enacted by Section 1 of this act, reads as
4	rewritten:
5	"§ 131D-2.5. License and registration fees.
6	(a) The Department shall charge each adult care home with six or fewer beds a
7	nonrefundable annual license fee in the amount of two hundred fifty dollars (\$250.00). The
8	Department shall charge each adult care home with more than six beds a nonrefundable annual
9	license fee in the amount of three hundred fifty dollars (\$350.00) plus a nonrefundable annual
10	per-bed fee of twelve dollars and fifty cents (\$12.50).
11	(b) The Department shall charge each registered multiunit assisted housing with
12	services program a nonrefundable annual registration fee of three hundred fifty dollars
13	(\$350.00). Any individual or corporation that establishes, conducts, manages, or operates a
14	multiunit housing with services program, subject to registration under this section, that fails to
15	register is guilty of a Class 3 misdemeanor and, upon conviction shall be punishable only by a
16	fine of not more than fifty dollars (\$50.00) for the first offense and not more than five hundred
17	dollars (\$500.00) for each subsequent offense. Each day of a continuing violation after
18	conviction shall be considered a separate offense."
19	SECTION 3.(c) S.L. 2008-166 is repealed.
20	SECTION 4. Section 3 of this act becomes effective January 1, 2010, and the
21	remainder of this act becomes effective October 1, 2009. Licenses issued pursuant to
22	G.S. 131D-2 remain effective until the date of annual renewal at which time Part 1 of Article 1
23	of Chapter 131D of the General Statutes shall apply. In all other respects, beginning October 1,
24	2009, Part 1 of Article 1 of Chapter 131D shall apply to the operation of facilities currently
25	licensed under G.S. 131D-2.