10A NCAC 13B .1910 NURSING/HEALTH CARE ADMINISTRATION AND SUPERVISION

(a) A licensed facility shall have a director of nursing service who shall be responsible for the overall organization and management of all nursing services and shall be currently licensed to practice as a registered nurse by the North Carolina Board of Nursing in accordance with G.S. 90, Article 9A.

(b) The Director of Nursing shall not serve as administrator or assistant administrator.

(c) A licensed facility with nursing facilities shall provide a full-time director of nursing on duty at least eight hours per day, five days a week. A registered nurse shall relieve the Director of Nursing (be in charge of nursing) during the Director's absence.

(d) A licensed facility shall employ and assign registered nurses, licensed practical nurses, nurse aides and nurse aide trainees for duties in accordance with G.S. 90, Article 9A.

(e) The Director of Nursing shall cause the following to be accomplished:

- (1) establishment and implementation of nursing policies and procedures which shall include, but shall not be limited to the following:
 - (A) assessment of and planning for patients' nursing care or health care needs, and implementation of nursing or health care plans;
 - (B) daily charting of any unusual occurrences or acute episodes related to patient care, and progress notes written monthly reporting each patient's performance in accordance with identified goals and objectives and each patient's progress toward rehabilitative nursing goals;
 - (C) assurance of the delivery of nursing services in accordance with physicians' orders, nursing care plans and the facility's policies and procedures;
 - (D) notification of emergency physicians or on-call physicians;
 - (E) infection control to prevent cross-infection among patients and staff;
 - (F) reporting of deaths;
 - (G) emergency reporting of fire, patient and staff accidents or incidents, or other emergency situations;
 - (H) use of protective devices or restraints to assure that each patient or resident is restrained in accordance with physician orders and the facility's policies, and that the restrained patient or resident is appropriately evaluated and released at a minimum of every two hours;
 - (I) special skin care and decubiti care;
 - (J) bowel and bladder training;
 - (K) maintenance of proper body alignment and restorative nursing care;
 - (L) supervision of and assisting patients with feeding;
 - (M) intake and output observation and reporting for those patients whose condition warrants monitoring of their fluid balance. This will include those patients on intravenous fluids or tube feedings, and patients with kidney failure and temperatures elevated to 102 degrees Fahrenheit or above;
 - (N) catheter care; and
 - (O) procedures used in caring for patients in the facility;
- (2) development of written job descriptions for nursing personnel;
- (3) periodic assessment of the nursing department with identification of personnel requirements as they relate to patient care needs and reporting same to the administrator;
- a planned orientation and continuing inservice education program for nursing employees and documentation of staff attendance and subject matter covered during inservice education programs;
- (5) provision of appropriate reference materials for the nursing department, which includes a Physician's Desk Reference or comparable drug reference, policy and procedure manual, and medical dictionary for each nursing station; and
- (6) establishment of operational procedures to assure that appropriate supplies and equipment are available to nursing staff as determined by individual patient care needs.

History Note: Authority G.S. 131E-79; 42 U.S.C. 1396 r (a); Eff. February 1, 1986; Amended Eff. March 1, 1990; Temporary Amendment Eff. October 1, 1990 For a Period of 142 Days to Expire on February 28, 1991; Amended Eff. March 1, 1991;

Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 22, 2017.