

SUBCHAPTER 13E – LICENSING OF OVERNIGHT RESPITE SERVICES

SECTION .0100 DEFINITIONS

10A NCAC 13E .0101 DEFINITIONS

The following definitions apply throughout this Subchapter:

- (1) "Accident" means an unexpected, unintentional, or irregular event that results in injury or illness to a participant or suspected injury or illness to a participant.
- (2) "Overnight respite services" is defined in G.S. 131D-6.1 and shall not exceed 14 consecutive days or more than 60 total calendar days per individual participant in a 365-day period.
- (3) "Participant" means the recipient of the overnight respite services.
- (4) "Personal care" means tasks such as assistance with bathing, dressing, grooming, toileting, eating, ambulation, and transferring.
- (5) "Program" means a facility certified by the Department of Health and Human Services, Division of Aging and Adult Services, to provide adult day care services pursuant to G.S. 131D-6 and 10A NCAC 06R, adult day health services pursuant to 10A NCAC 06S, or both.
- (6) "Responsible party" means the caretaker with primary day-to-day responsibility for a participant.
- (7) "Supervision" means to oversee, manage, and direct for the determination and provision of assistance to a participant.

History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.

SECTION .0200 – LICENSING

10A NCAC 13E .0201 APPLYING FOR A LICENSE TO PROVIDE OVERNIGHT RESPITE SERVICES

(a) Except as otherwise provided in Rule .0202 of this Section, the Division of Health Service Regulation (DHSR) shall issue an overnight respite services license to any program that meets the following requirements:

- (1) submission of an initial license application, available at <https://info.ncdhhs.gov/dhsr/acls/acforms.html> at no cost that includes the following:
 - (A) applicant information;
 - (B) ownership information; and
 - (C) the program's capacity and scope of services;
- (2) payment of the non-refundable license fee required by G.S. 131D-6.1; and
- (3) compliance with the provisions of G.S. 131D-6.1 and the rules of this Subchapter.

(b) An application for a license to provide overnight respite services shall not be reviewed or approved unless the applicant is certified by the Division of Aging and Adult Services as a program as defined in Rule .0101 of this Subchapter.

(c) Following review of the initial license application, program policies in accordance with Rule .0501 of this Subchapter, and the Construction Section's recommendation for use, a pre-approval visit shall be made by the DHSR Adult Care Licensure Section or its consultant. The Adult Care Licensure Section shall notify, in writing, the Division of Aging and Adult Services and the applicant of the decision to approve or deny a license to provide overnight respite services as a part of the adult day care program.

History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017;
Amended September 1, 2019.

10A NCAC 13E .0202 PERSONS NOT ELIGIBLE FOR OVERNIGHT RESPITE SERVICES LICENSES

A license for an overnight respite services program shall not be issued to an applicant:

- (1) whose license for any overnight respite services program was revoked until one year after the date of revocation; or
- (2) whose admissions for any overnight respite services program were suspended until six months after the suspension is lifted.

History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.

10A NCAC 13E .0203 THE LICENSE

- (a) The license shall be posted in a prominent location, accessible to public view, within the overnight respite portion of the facility.
- (b) The license shall be in effect for 12 months from the date of issuance unless revoked for cause or voluntarily or involuntarily terminated.
- (c) The license is not transferable or assignable.
- (d) The license shall be terminated when the program is terminated.

History Note: Authority G.S. 131D-2.4; 131D-6.1;
Eff. April 1, 2017.

10A NCAC 13E .0204 RENEWAL OF LICENSE

- (a) The license shall be renewed annually, except as otherwise provided in Rule .0205 of this Section, if the licensee submits an application for renewal and the Department determines that the licensee complies with the provisions of G.S. 131D-6.1 and the rules of this Subchapter. When violations of the rules of this Subchapter are documented and have not been corrected prior to expiration of the license, the Department may approve an extension of a plan of correction or may revoke the license for cause.
- (b) In determining whether to renew a license under G.S. 131D-6.1 or extend a plan of correction, the Department shall take into consideration the following factors:
 - (1) the compliance history of the adult day care program;
 - (2) the compliance history of overnight respite services;
 - (3) the extent to which the conduct of a related licensed program for overnight respite services is likely to affect the quality of care at the applicant service; and
 - (4) the hardship on residents of the applicant service if the license is not renewed.
- (c) The license renewal application shall be sent to the applicant by the Department at least 60 days prior to expiration of the license.
- (d) The license renewal application shall include the following:
 - (1) applicant information;
 - (2) ownership information;
 - (3) the program's capacity and scope of services; and
 - (4) invoice for the annual nonrefundable renewal licensure fee in accordance with G.S. 131D-6.1(i).

History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.

10A NCAC 13E .0205 CLOSING OF OVERNIGHT RESPITE SERVICES

If a licensee plans to close its overnight respite services, the licensee shall provide written notification of the planned closing to the Division of Health Service Regulation, Adult Care Licensure Section at 2708 Mail Service Center, Raleigh, NC 27699-2708; the Division of Aging and Adult Services at 2101 Mail Service Center, Raleigh, NC 27699-2101; and the participants and their responsible parties at least 30 days prior to the planned closing. Written notification shall include the date of closing.

History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.

10A NCAC 13E .0206 DENIAL AND REVOCATION OF LICENSE

- (a) The Division of Health Service Regulation shall deny any licensure application if the applicant fails to comply with G.S. 131D-6.1 and the rules of this Subchapter.
- (b) A license may be revoked by the Division in accordance with G.S. 131D-2.7 and G.S. 131D-6.1.
- (c) The Division shall notify the applicant of a denial of its application or revocation of its license by certified mail stating the reasons for the denial or revocation.
- (d) When an overnight respite service provider receives a notice of revocation, the administrator shall inform each participant and the participant's responsible party of the notice and the reasons for the revocation.

History Note: Authority G.S. 131D-2.7; 131D-6.1;
Eff. April 1, 2017.

10A NCAC 13E .0207 SUSPENSION OF ADMISSIONS

- (a) The Division of Health Service Regulation may suspend the admission of participants to overnight respite services when warranted under the provisions of G.S. 131D-6.1 and G.S. 131D-2.7.
- (b) The Division shall notify the overnight respite service licensee by certified mail of the decision to suspend admissions. Such notice shall include:
- (1) the period of the suspension;
 - (2) factual allegations;
 - (3) citation of statutes and rules alleged to be violated; and
 - (4) notice of the licensee's right to a contested case hearing regarding the suspension.
- (c) The suspension shall be effective on the date specified in the notice of suspension. The suspension shall remain effective for the period specified in the notice or until the overnight respite service demonstrates to the Division that conditions are no longer detrimental to the health and safety of the participants based on the factors set forth in G.S. 131D-2.7(d)(2).
- (d) The overnight respite service shall not admit any participants during the effective period of the suspension.
- (e) Any action taken by the Division to revoke a license for overnight respite services shall be accompanied by a suspension of admissions.

History Note: Authority G.S. 131D-2.7; 131D-6.1;
Eff. April 1, 2017.

10A NCAC 13E .0208 APPEAL OF LICENSURE ACTION

The licensee may appeal any decision of the Division to deny or revoke a license or any decision to suspend admissions of participants by making such an appeal in accordance with G.S. 150B.

History Note: G.S. 131D-6.1;
Eff. April 1, 2017.

SECTION .0300 - PHYSICAL PLANT RULES

10A NCAC 13E .0301 SUBMISSION OF INFORMATION TO THE DIVISION OF HEALTH SERVICE REGULATION CONSTRUCTION SECTION

- (a) Prior to operation, an applicant for a license to provide overnight respite services shall submit the following documents to the Division of Health Service Regulation (DHSR) Construction Section:
- (1) an approval letter from the local zoning jurisdiction for the proposed location;
 - (2) if an existing structure, a photograph of each side of the existing structure and at least one of each of the interior spaces; and
 - (3) a set of building plans of each floor level indicating:
 - (A) the layout of all rooms;
 - (B) room dimensions (including closets);
 - (C) door widths (exterior, bedroom, bathroom, and kitchen doors);
 - (D) window sizes and window sill heights;
 - (E) type of construction; and
 - (F) the proposed participant bedroom locations including the number of occupants in each bedroom.
- (b) The Construction Section shall review the documents and notify the applicant by letter of changes that shall be made to the building to meet the standards established in this Section. The letter shall also contain a list of final documentation required from the local fire marshal, local building code official, and county health department that shall be submitted upon completion of any required changes to the building or completion of construction.
- (c) In order to maintain compliance with the standards established in this Section, any changes made during construction that were not proposed during the document review required by Paragraph (b) of this Rule shall require the approval of the Construction Section.

(d) Upon receipt of the final documentation required by Paragraph (b) of this Rule, the Construction Section shall review the information and may either approve the overnight respite services program for construction based on documentation or make an on-site visit. If an on-site visit is made, the Construction Section shall inspect the construction and shall notify the applicant by letter of any changes that shall be made to the construction. When the Construction Section determines that the completed construction is in compliance with the standards established in this Section, it shall notify the Division of Health Service Regulation Adult Care Licensure Section of its recommendation for use.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0302 CAPACITY

(a) Pursuant to G.S. 131D-6.1(c)(8), the Division of Health Service Regulation shall not approve a capacity of greater than six participants for an overnight respite services program. For the purposes of this Rule, "capacity" means the maximum number of participants that the overnight respite services program is licensed to house at any given time.

(b) An overnight respite services program shall not exceed the capacity shown on its license.

(c) Prior to an increase in capacity by adding rooms, altering rooms, or changing use of space, the overnight respite services program shall submit a request for capacity increase and two building plans of each floor to the Construction Section. One plan shall indicate the current use of rooms in the existing building. The other plan shall indicate the proposed use of rooms in the existing building and its addition, alteration, or change in use of space. For an addition to an existing building, the building plans shall also indicate how the addition will be tied into the existing building and any proposed changes to the building structure.

(d) When the overnight respite services program increases its capacity by the addition to or alteration of an existing building, the entire overnight respite services program shall comply with the North Carolina Fire Prevention Code, which is incorporated herein by reference including subsequent amendments and editions. Copies of this code may be purchased from the International Code Council online at <http://www.iccsafe.org/Store/Pages/default.aspx> at a cost of eighty-five dollars (\$85.00) or accessed electronically free of charge at http://codes.iccsafe.org/app/book/toc/2012/North_Carolina/Fire/index.html.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0303 DESIGN AND CONSTRUCTION

(a) For the purposes of this Rule the following definitions apply:

- (1) "facility" means a building or portion of a building housing an overnight respite services program as defined in G.S. 131D-6.1(a);
- (2) "proposed facility" means the new construction of a building for a facility, an addition or alteration to an existing building for a facility, or the change in use of a building for a facility;
- (3) "existing facility" means a currently licensed facility and a proposed facility that will be built according to building plans approved by the Construction Section for compliance with the standards established in this Section, prior to the effective date of this Rule; and
- (4) "new facility" means a proposed facility that will be built according to building plans approved by the Construction Section for compliance with the standards established in this Section, on or after the effective date of this Rule.

(b) The physical plant requirements for each facility shall be applied as follows:

- (1) A new facility shall meet the standards established in this Section.
- (2) An existing facility shall meet the standards established in this Section that were in existence at the time of change in use of space, construction, addition, alteration, or repair.
- (3) An existing building converted from another use that a program intends to use for an overnight respite services program shall meet all the requirements of a new facility as indicated in Subparagraph (1) of this Paragraph.

(c) All new construction, additions, or alterations for a new facility shall meet the requirements of the North Carolina State Building Codes, which are incorporated herein by reference including subsequent amendments and editions. Copies of these codes may be purchased from the International Code Council online at <http://www.iccsafe.org/Store/Pages/default.aspx> at a cost of five hundred twenty-seven dollars (\$527.00) or accessed

electronically free of charge at <http://codes.iccsafe.org/North%20Carolina.html>. All new construction, additions, or repairs of an existing facility shall meet the requirements of the North Carolina State Building Codes in effect at the time of construction, addition, alteration, or repair.

(d) A facility shall be constructed, equipped, and maintained to comply with the standards established in this Section for the capacity indicated on its license.

(e) The Construction Section may grant an equivalency to allow an alternate design or functional variation from the requirements of the rules contained in this Section. For the purposes of this Rule, an "equivalency" is a Construction Section-approved alternate design and functional variation to a requirement contained in the rules of this Section that meets the intent of the rule requirement but does not reduce the safety and operational effectiveness of the facility design and layout. If granted, the equivalency shall apply to a specific facility. A program shall be granted an equivalency if:

- (1) the overnight respite services program submits a written equivalency request to the Construction Section indicating:
 - (A) the rule requirement that will not be met;
 - (B) the justification for the equivalency; and
 - (C) how the proposed equivalency meets the intent of the corresponding rule requirement; and

- (2) the program receives a written approval of the equivalency from the Construction Section.

(f) If any of the rules, codes, or standards contained in this Section conflict, the most restrictive requirement shall apply.

(g) For an existing facility whose license is revoked or suspended by the Division of Health Service Regulation pursuant to G.S. 131D-6.1(g)(2) for at least 60 days, the facility shall meet the requirements of a new facility as required by Subparagraph (b)(1) of this Rule prior to being relicensed.

(h) Prior to commencement of construction or change in use of space, any program intending to offer overnight respite care services that is planning new construction, an addition or alteration to an existing building, or a change in use of space shall submit building plans and other documents to the Construction Section as specified in Rule .0301 of this Section.

(i) If the building to be used for a facility is two or more stories in height, it shall meet the following additional requirements:

- (1) construction shall not exceed the allowable area for occupancy in the North Carolina State Building Code;
- (2) participants shall be housed on the level of the principal exterior door as defined in Rule .0312(c) of this Section; and
- (3) participant-use areas shall be located on the level of the principal exterior door.

(j) The basement and the attic shall not to be used for storage or sleeping.

(k) The ceiling shall be at least seven and one-half feet from the floor.

(l) Elevation changes in the floor are not permitted in participant-use areas.

(m) The door width shall be a minimum of two feet and six inches in the kitchen, dining room, living room, bedrooms, and bathrooms.

(n) Windows shall be operable and shall be maintained operable. For the purposes of this Rule, "operable" means a window that may be opened and shut to allow outdoor-air ventilation. To inhibit participant elopement from any window, the window opening may be restricted to a six-inch opening.

(o) Before starting any construction or alterations, the overnight respite services program shall consult with the local building code official for information about required permits and construction requirements.

(p) The facility shall comply with the sanitation rules of the North Carolina Division of Public Health, Environmental Health Services Section, which are incorporated herein by reference including subsequent amendments and editions. The "Rules Governing the Sanitation of Residential Care Facilities," 15A NCAC 18A .1600 are available for inspection at the North Carolina Department of Health and Human Services, Division of Public Health, Environmental Health Services Section, 5605 Six Forks Road, Raleigh, North Carolina 27609. Copies may be obtained from the Environmental Health Services Section, 1632 Mail Service Center, Raleigh, NC 27699-1632 at no cost or can be accessed electronically free of charge at <http://ehs.ncpublichealth.com/docs/rules/294306-4-1600.pdf>.

(q) The facility shall have the following inspection reports available for review upon request by the Construction Section:

- (1) a current sanitation inspection report from the county health department; and
- (2) a current fire safety inspection report from the local fire marshal.

(r) The building housing a facility shall be equipped with a fire alarm system with pull stations on each floor and sounding devices that are audible throughout the building. The fire alarm system shall be equipped to transmit an automatic signal to the local emergency fire department dispatch center, either directly or through a central station monitoring company connection. The fire alarm system shall be installed in accordance with National Fire Protection Association (NFPA) 72, which is incorporated herein by reference including subsequent amendments and editions and may be obtained from the National Fire Protection Association, 1 Batterymarch Park, Quincy, MA 02269 at the cost of ninety six dollars and 50 cents (\$96.50). Underwriters Laboratory (U.L.) listed heat detectors are required in attics and basements and shall be connected to the fire alarm system. These heat detectors shall be interconnected and provided with battery backup. Corridors shall be equipped with smoke detectors that are connected to the fire alarm system.

(s) A building housing an overnight respite services program or an adult day care or adult health care program shall be equipped with a wet pipe sprinkler system in accordance with NFPA 13, which is incorporated herein by reference including subsequent amendments and editions and may be obtained from the National Fire Protection Association, 1 Batterymarch Park, Quincy, MA 02269 at the cost of one hundred and three dollars (\$103.00).

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0304 LOCATION

(a) A program offering overnight respite care services shall be in a location approved by local zoning boards.

(b) The site of a proposed facility where overnight respite care services are to be provided shall:

- (1) be accessible by public roads that shall be maintained for motor vehicles access;
- (2) be accessible to fire fighting and other emergency services;
- (3) have a water supply, sewage disposal system, garbage disposal system, and trash disposal system approved by the local health department having jurisdiction;
- (4) comply with local ordinances; and
- (5) be free from exposure to waste material that contaminates the air, soil, or water.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0305 LIVING ROOM

(a) Each overnight respite care program shall have a living area with not less than 40 square feet of floor area per participant.

(b) The living area for the overnight respite care program required by Paragraph (a) of this Rule may be combined with the adult day care program or adult day health program activities and craft areas only after the Division of Aging and Adult Services of the Department of Health and Human Services determines, in writing, that the requirements of 10A NCAC 06R .0401(d) for an adult day care program and 10A NCAC 06S .0301 for an adult day health program are met.

(c) The living room shall have windows with views to the outdoors. The gross window area shall not be less than eight percent of the floor area required by Paragraph (a) of this Rule.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0306 DINING ROOM

(a) Each overnight respite services program shall have a dining area with not less than 20 square feet of floor area per participant. The dining area may be used for other activities during the day.

(b) The dining area for the overnight respite care program required by Paragraph (a) of this Rule may be combined with the adult day care program or adult day health program activities and craft areas only after the Division of Aging and Adult Services of the Department of Health and Human Services determines, in writing, that the requirements of 10A NCAC 06R .0401(d) for an adult day care program and 10A NCAC 06S .0301 for an adult day health program are met.

(c) When the dining area is used in combination with a kitchen, an area five feet wide shall be allowed as work space between the kitchen and dining areas. The work space shall not be used as the dining area.

(d) The dining room shall have windows with views to the outdoors. The gross window area shall not be less than eight percent of the floor area required by Paragraph (a) of this Rule.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0307 KITCHEN

- (a) The kitchen shall have a floor area of not less than 120 square feet. The kitchen may be shared with the adult day care or adult day health program.
- (b) The cooking unit shall be mechanically ventilated to the exterior or be equipped with an unvented recirculation fan provided with a filter as required by the manufacturer's instructions for vent-less use.
- (c) The kitchen floor shall have a non-slippery and water-resistant covering.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0308 BEDROOMS

- (a) There shall be bedrooms sufficient in number and size to meet the individual needs of the participant according to their age and gender.
- (b) A room used as a bedroom shall meet the requirements of this Rule and be approved by the Construction Section.
- (c) A room accessed only through a bathroom, kitchen, or another bedroom shall not be approved for a participant's bedroom.
- (d) Bedrooms occupied by one participant shall be provided with not less than 100 square feet of floor area, including vestibule, closet, or wardrobe space. Bedrooms occupied by two participants shall be provided with not less than 160 square feet of floor area, including vestibule, closet, or wardrobe space.
- (e) The total number of participants assigned to a bedroom shall be based on the square footage requirements of Paragraph (d) of this Rule as approved by the Construction Section for that bedroom.
- (f) A bedroom shall not be occupied by more than two participants.
- (g) Each participant bedroom shall have one or more windows with views to the outdoors. The gross window area shall be equal to at least eight percent of the floor space required by Paragraph (d) of this Rule. The windows shall have a maximum sill height of 44 inches.
- (h) Bedroom closets or wardrobes shall be large enough to provide each participant with a minimum of 22 cubic feet of clothing storage, one-half of which shall be for hanging clothes with an adjustable-height hanging bar.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0309 BATHROOM

- (a) An overnight respite services program shall have one bathroom for each six or fewer respite participants. A bathroom shall contain a toilet, a lavatory, and one of the following:
 - (1) a roll-in shower designed and equipped for unobstructed shower chair entry and use;
 - (2) a bathtub accessible on three sides; or
 - (3) a manufactured walk-in bathtub or a similar manufactured bathtub designed for transfer of participants into the bathtub that is accessible on one short side and one long side of the bathtub.
- (b) The bathroom required by Paragraph (a) of this Rule may be shared with the adult day care program or adult day health program only after the Division of Aging and Adult Services of the Department of Health and Human Services determines, in writing, that the requirements of 10A NCAC 06R .0401(g) for an adult day care facility and 10A NCAC 06S .0301 for an adult day health facility are met.
- (c) A bathroom shall be designed to provide privacy. A bathroom with two or more toilets shall have privacy partitions or curtains for each toilet. Each bathtub or shower shall have privacy partitions or curtains.
- (d) The entrance to the bathroom shall not be through a kitchen, another participant's bedroom, or another bathroom.
- (e) The bathroom shall be located so that there is no more than 40 feet between any participant's bedroom door and a participant-use bathroom door.
- (f) Hand grips shall be installed at all toilets, bathtubs, and showers used by participants.

- (g) Nonskid surfacing or strips shall be installed to the floor or bottom of showers and bathtubs.
- (h) A bathroom shall have mechanical ventilation at the rate of two cubic feet per minute for each square foot of floor area. The mechanical ducted vent shall be vented directly to the outdoors.
- (i) The bathroom floor shall have a non-slippery water-resistant covering.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0310 STORAGE AREAS

- (a) Storage areas shall be provided for the separate storage of clean linens, soiled linens, food and food service supplies, and household supplies and equipment.
- (b) Cleaning agents, bleaches, pesticides, and other substances that may be hazardous if ingested, inhaled, or handled shall be stored in locked areas separate from other materials.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0311 CORRIDOR

- (a) Corridors shall be lighted as required by Rule .0317(e)(3) of this Section.
- (b) Corridors shall be free of equipment and other obstructions.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0312 OUTSIDE ENTRANCE AND EXITS

- (a) Each overnight respite services program shall have at least two exit doors on all floor levels. If there are only two exit doors, the exit doors shall be located and constructed to minimize the possibility that both may be blocked by a fire or other emergency condition.
- (b) One exterior door shall have a minimum width of three feet. Another exterior door shall have a minimum width of two feet and eight inches. For the purposes of this Rule, an "exterior door" means a door used by a participant to enter and exit the building to and from the outdoors.
- (c) At least one principal exterior door for the participants' use shall be at grade level or accessible by a ramp with a one inch rise for each 12 inches of ramp length. For the purposes of this Rule, a "principal exterior door" means a door that is used by participants to access the vehicular pick-up and drop-off area. If the overnight respite services program serves any participant who must have physical assistance with evacuation, the building shall have two exterior doors at grade level or accessible by a ramp.
- (d) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys. Deadbolts or turn buttons on the inside of exit doors shall be disabled.
- (e) Exit doors shall be free of all obstructions or impediments to allow for full instant use in case of fire or other emergency.
- (f) Steps, porches, stoops, and ramps shall be provided with handrails or guardrails.
- (g) In each overnight respite services program with at least one participant who is determined by a physician or appropriate licensed health professional or is otherwise known to be disoriented or who wanders, each exit door for participant-use shall be equipped with a sounding device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. If a central system of remote sounding devices is provided, the control panel for the system shall be located in the office area or in a location accessible only to staff authorized by the administrator to operate the control panel.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0313 LAUNDRY ROOM

If the facility uses laundry equipment, the equipment shall not be located in the living, dining, or bedroom areas.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0314 FLOORS

- (a) All floors shall be of smooth, non-skid material and shall be cleanable.
- (b) Scatter or throw rugs shall not be used.
- (c) All floors shall be kept free of damage.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0315 HOUSEKEEPING AND FURNISHINGS

- (a) Each overnight respite services program shall:
 - (1) have walls, ceilings, and floors or floor coverings kept clean, well maintained, and free of damage;
 - (2) have no lingering odors;
 - (3) have furniture clean and free of damage;
 - (4) have a North Carolina Environmental Health Services Section approved sanitation classification at all times;
 - (5) be maintained in an uncluttered, clean, and orderly condition, free of all obstructions and hazards;
 - (6) have a supply of bath soap, clean towels, washcloths, sheets, pillow cases, blankets, and additional coverings adequate for participant use on hand at all times;
 - (7) make available the following items as needed but shall not charge the participant's personal funds for the cost of these items:
 - (A) protective sheets and clean, absorbent, soft, and smooth pads;
 - (B) bedpans, urinals, hot water bottles, and ice bags; and
 - (C) bedside commodes, walkers, and wheelchairs;
 - (8) have a television and radio, each in good working order;
 - (9) have curtains, draperies, shades, or blinds at all windows in participant-use areas to provide for participant privacy;
 - (10) have recreational equipment, supplies for games, books, magazines, and a current newspaper available for participants;
 - (11) have a clock that has numbers at least 1½ inches tall in an area commonly used by the participants; and
 - (12) have at least one working telephone that does not depend on electricity or cellular service to operate.
- (b) Each bedroom shall have the following furnishings for each participant:
 - (1) beds equipped with box springs and mattress, solid link springs and no-sag innerspring, or a foam mattress. A hospital bed shall be provided as needed. A water bed may be allowed if requested by a participant and permitted by the overnight respite services program. Each bed shall have the following:
 - (A) at least one pillow with clean pillow case;
 - (B) clean top and bottom sheets on the bed, changed at least once a week; and
 - (C) clean bedspread and other clean coverings as needed;
 - (2) a bedside-type table;
 - (3) a chest of drawers or bureau for a single participant or a double chest of drawers or double dresser for two participants when not provided as built-ins;
 - (4) a wall or dresser mirror;
 - (5) a minimum of one comfortable chair per participant, high enough from the floor for easy rising;
 - (6) additional chairs available, as needed, for use by visitors;
 - (7) a clean towel, wash cloth, and towel bar within the bedroom or adjoining bathroom; and
 - (8) a wall-mounted light overhead of the bed or a lamp with a switch within reach of a person lying on the bed. The light shall provide a minimum of 30 foot-candle power of illumination for reading.
- (c) The living room shall have living room furnishings for the comfort of participants with coverings that are cleanable.
- (d) The dining room shall have the following furnishings:
 - (1) tables and chairs to seat all participants eating in the dining room; and
 - (2) chairs that are sturdy, non-folding, without rollers unless retractable or on front legs only, and designed to minimize tilting.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0316 FIRE SAFETY AND DISASTER PLAN

- (a) Fire extinguishers shall be provided that meet these requirements:
- (1) one five-pound or larger (net charge) "A-B-C" type centrally located;
 - (2) one five-pound or larger "A-B-C" or CO/2 type located in the kitchen; and
 - (3) at any other location as required by the North Carolina Fire Prevention Code, which is incorporated herein by reference including subsequent amendments and editions. The availability and cost of the Code is set forth in Rule .0302 of this Section.
- (b) All fire safety requirements required by city or county ordinances shall be met.
- (c) A written fire evacuation plan that includes a diagram and that has the approval of the local fire marshal shall be prepared and posted in a central location on each floor. The plan shall be reviewed with each participant on enrollment and shall be a part of the orientation for new staff.
- (d) There shall be at least four rehearsals of the fire evacuation plan each year on each shift. Records of rehearsals shall be maintained for three years. The records shall include the date and time of the rehearsals, staff members present, and a description of what the rehearsal involved.
- (e) A written disaster plan that has the written approval of, or has been documented as submitted to, the local emergency management agency and the local agency designated to coordinate special needs sheltering during disasters shall be prepared and updated annually and shall be maintained in the program offering overnight respite care services.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0317 BUILDING SERVICE EQUIPMENT

- (a) The building and all fire safety, electrical, mechanical, and plumbing equipment shall be maintained in a safe and operating condition.
- (b) There shall be a central heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. Built-in electric heaters, if used, shall be installed or protected so as to avoid hazards to participants and room furnishings. Unvented fuel burning room heaters and portable electric heaters shall be prohibited.
- (c) Air conditioning shall provide conditions not to exceed 81 degrees F (27 degrees C) under summer design conditions.
- (d) The hot water tank shall be of such size to provide as much hot water as is needed by the kitchen, bathrooms, and laundry. The hot water temperature at all fixtures used by participants shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C).
- (e) All participant-use areas shall be lighted for the safety and comfort of the participants. The minimum lighting required is:
- (1) 30 foot-candle of light at floor level in living rooms, dining rooms, bedrooms, and bathrooms;
 - (2) 10 foot-candle of light for general lighting; and
 - (3) one foot-candle of light at the floor for corridors at night.
- (f) Fireplaces, fireplace inserts, and wood stoves shall be designed or installed so as to avoid a burn hazard to participants. Fireplace inserts and wood stoves must be Underwriters Laboratories (U.L.) listed.
- (g) Gas logs may be installed if they are of the vented type, installed according to the manufacturers' installation instructions, approved by the local building code official, and protected by a guard or screen to prevent participants and furnishings from burns.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0318 OUTSIDE PREMISES

- (a) The outside grounds of the program shall be maintained in a clean and safe condition.
- (b) If the facility has a fence around the premises, the fence shall not prevent participants from exiting or entering freely and shall not be hazardous.
- (c) Outdoor stairways and ramps shall be illuminated by no less than five foot candles of light at grade level.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

SECTION .0400 – STAFF QUALIFICATIONS AND STAFFING

10A NCAC 13E .0401 ADMINISTRATOR

- (a) An administrator shall be responsible for the operations of the program offering overnight respite care services.
- (b) At all times there shall be one administrator or supervisor-in-charge who is responsible for assuring that all required duties are carried out and for assuring that a staff member is present on-site and available to the program participants.
- (c) The administrator shall:
 - (1) be at least 21 years old;
 - (2) be a high school graduate or certified under the General Educational Development (GED) Program;
 - (3) cooperate with inspectors and DHSR employees in assuring compliance with G.S. 131D-6.1 and the rules of this Subchapter;
 - (4) have a tuberculin skin test within 12 months prior to hire date and annually thereafter;
 - (5) have no substantiated findings listed on the North Carolina Health Care Personnel Registry pursuant to G.S. 131E-256;
 - (6) have documented evidence of managing or supervising personal care to others for at least six months from a current or previous employer; and
 - (7) be able to implement all accident, fire safety, and emergency procedures for the protection of the participants of the overnight respite services program.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0402 SUPERVISOR-IN-CHARGE

- (a) The supervisor-in-charge is responsible to the administrator for the operation of the overnight respite services program in the absence of the administrator.
- (b) The supervisor-in-charge shall meet the same requirements as the administrator as set forth in Rule .0401(c) of this Section.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0403 STAFF AND STAFFING

- (a) Each staff person shall:
 - (1) have a job description that reflects actual duties and responsibilities determined by the program and shall be signed by the administrator and the employee;
 - (2) have a tuberculin skin test within 12 months prior to hire and annually thereafter;
 - (3) be able to implement all of the program's policies and procedures as defined in Rule .0501 of this Subchapter and accident, fire safety, and emergency procedures for the protection of the participants;
 - (4) be informed of the confidential nature of participant information and protect and preserve the information from unauthorized use and disclosure;
 - (5) not hinder or interfere with the exercise of the rights as defined by program policy;
 - (6) have no substantiated findings listed on the North Carolina Health Care Personnel Registry pursuant to G.S. 131E-256;
 - (7) have a statewide criminal background check, upon hire, of the past five years in accordance with G.S. 143B-932; and
 - (8) cooperate with inspectors and the monitoring and licensing agencies in complying with the rules of this Subchapter.
- (b) Any staff member left in charge of the care of participants shall be 18 years or older.

(c) The staffing pattern shall be adequate to meet the needs of each participant, with at least one staff present at all times qualified to administer medications as defined by Rule .0702 of this Subchapter and trained to provide personal care and supervision to current participants.

(d) Services required beyond personal care and supervision shall not be provided unless staff satisfies the license requirements applicable to such services.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0404 TRAINING ON CARDIO-PULMONARY RESUSCITATION

At least one staff person shall be on the premises at all times, when participants are present, who has completed within the last 24 months a course on cardio-pulmonary resuscitation and choking management, including the Heimlich maneuver, provided by the American Heart Association, American Red Cross, National Safety Council, American Safety and Health Institute, Medic First Aid, or a trainer with documented certification as a trainer on these procedures from one of these organizations.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

SECTION .0500 – PROGRAM POLICIES

10A NCAC 13E .0501 PROGRAM POLICIES

(a) Each program shall have enrollment policies. Enrollment policies shall be in writing as a part of the program policies and shall define the population served. These policies shall serve as the basis for determining who will be accepted into the program and for planning activities appropriate for the participants. The policies shall prevent enrolling people whose needs cannot be met by the planned activities and services offered and shall provide for discharge of participants whose needs can no longer be met or who can no longer be cared for safely. If the program serves semi-ambulatory or non-ambulatory persons as defined by 10A NCAC 06R .0201, it shall be stated in the enrollment criteria.

(b) The program policies shall also contain:

- (1) a discharge policy outlining:
 - (A) the criteria for discharge;
 - (B) notification procedures for discharge;
 - (C) the timeframe and procedures for notifying the applicant, family member, or other caregiver of discharge; and
 - (D) referral or follow-up procedures;
- (2) medication policies and procedures as specified in Section .0700 of this Subchapter;
- (3) a description of participant's rights;
- (4) grievance policies and procedures for families;
- (5) the advance directives policy;
- (6) non-discrimination policies;
- (7) a procedure to maintain confidentiality;
- (8) a policy on reporting suspected abuse or neglect;
- (9) a policy on reporting of participant accidents or incidents to family members or medical providers;
- (10) a policy on infection control and universal precautions;
- (11) a policy on missing participants;
- (12) a policy on identification and supervision of participants who wander; and
- (13) inclement weather policies.

(c) At enrollment or in the initial interview, the program policies shall be discussed with the applicant, responsible party or other caregiver and a copy of the program policies shall be provided.

(d) Documentation of, receipt of, and agreement to abide by the program policies by the applicant, responsible party, or other caregiver shall be obtained by the program and kept in the participant's file.

(e) All program policies shall be maintained on site and available for inspection by Division of Health Service Regulation employees.

(f) The program shall implement all program policies.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

SECTION .0600 - ENROLLMENT AND SERVICE PLANNING

10A NCAC 13E .0601 ENROLLMENT OF PARTICIPANTS

(a) Prior to enrollment the applicant, responsible party, or other caregiver shall have a personal interview with a program staff member. During the interview, the staff shall complete initial documentation identifying the following:

- (1) social and medical care needs;
- (2) spiritual, religious, or cultural needs; and
- (3) whether the program can meet the applicant's expressed needs.

The staff person doing the interviewing shall sign the assessment of needs and the applicant, responsible party, or other caregiver shall sign the application for enrollment. These signed documents shall be obtained before the individual's first day of attendance as a participant in the program and shall be maintained in the participant's record.

(b) Any adult (18 years of age or over) who, because of a physical condition or mental disability, needs a substitute home for purpose of respite for the caregiver may be enrolled for overnight respite services when, in the opinion of the caregiver, family, participant, physician, appropriate licensed health professional, or social worker and the administrator, the services and accommodations of the facility will meet the respite needs of the participant.

(c) Individuals shall not be admitted:

- (1) for treatment of mental illness or alcohol or drug abuse;
- (2) for maternity care;
- (3) for professional nursing care under continuous medical supervision;
- (4) for lodging, when the personal assistance and supervision offered for the participant are not needed; or
- (5) who pose a threat to the health or safety of others.

(d) A medical examination report signed by a physician or appropriate licensed health professional completed within the prior three months, shall be obtained by the program at the time of enrollment. The report must be updated annually no later than the anniversary date of the initial report.

(e) The program shall assure that the participant's physician or appropriate licensed health professional is contacted for orders for medications, treatments, and special diets if current physician orders are not part of the medical examination report required in Paragraph (d) of this Rule for inclusion in the participant's record. Prior to or the day of admission, the participant's physician or appropriate licensed health professional shall be contacted for clarification of orders, if orders are not clear or complete.

(f) The program shall assure that the participant has been tested for tuberculosis disease within the past 12 months of each admission for overnight respite services in accordance with the NC Division of Public Health's Tuberculosis Policy Manual, incorporated herein by reference including any subsequent amendments and editions, and shall be free of active tuberculosis. This manual may be accessed free of charge at <http://epi.publichealth.nc.gov/cd/lhds/manuals/tb/toc.html>.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0602 PLANNING SERVICES FOR INDIVIDUAL PARTICIPANTS

(a) At enrollment of a new participant, the program shall perform an assessment and written service plan for the individual. The assessment shall address the individual's ability to perform activities of daily living and need for supervision while in the program. The mental and physical health status of the individual shall also be assessed. The service plan shall be signed and dated by the administrator or designee. The health component of the service plan shall be written and signed by a registered nurse.

(b) In developing the written service plan, the program shall include input from the participant, responsible party, other caregiver and other agency professionals with knowledge of the individual's needs. The service plan shall be based on strengths, needs, and abilities identified in the assessment. The assessment and service plan shall be reviewed to assure continued accuracy at each admission for overnight respite services. The service plan shall include:

- (1) the needs and strengths of the participant;
- (2) the interests of the participant;

- (3) the service goals and objectives of care for the participant while in the overnight respite program;
 - (4) the type of interventions to be provided by the program in order to reach desired outcomes;
 - (5) the services to be provided by the program to achieve the goals and objectives;
 - (6) the roles of the participant, responsible party, other caregiver, volunteers and program staff; and
 - (7) the time limit for the plan, with provision for review and renewal.
- (c) The participant, responsible party, other caregiver and other service providers may contribute to the development, implementation, and evaluation of the service plan.
- (d) The participant's record shall include:
- (1) a copy of the medical examination report;
 - (2) the written service plan;
 - (3) documentation of a tuberculosis test according to Rule .0601(f) of this Section;
 - (4) documentation of any contacts (office, home or telephone) with the participant's physician or other licensed health professionals from outside the facility;
 - (5) physician orders;
 - (6) medication administration records;
 - (7) a written description of any acute changes including any unusual behavior, change in condition, need for help or services, or any incidents or accidents resulting in injury to the participant, and any action taken by the facility in response to the changes, incidents or accidents; and
 - (8) how the responsible party or his or her designated representative can be contacted in case of an emergency.
- (e) The program shall refer a participant to the participant's physician or other appropriate licensed health professional immediately if the participant's behavior, change in condition, any incidents or accidents resulting in injury to the participant, or need for help or services poses an immediate risk to the health and safety of the participant, other participants, or staff in the program.
- (f) Any unusual behavior, change in condition, incident or accident resulting in injury to the participant, or need for help or services shall be reported by the program staff to the responsible party.
- (g) Progress notes in the participant's record shall be updated every 24 hours while in the program.
- (h) The participant or the responsible party may choose the days and number of days the participant will participate in the program with the administrator's approval and documented in the participant's record.
- (i) The reason for any unscheduled participant absence shall be documented by the program staff on the day it occurs. Program staff shall contact or attempt to contact the absent participant or the responsible party and shall document this contact in the participant's record.
- (j) The program is responsible for the participant while the participant is enrolled. A participant leaving the program for part of a day shall sign out, relieving the staff of further responsibility. If a participant has an emotional or mental impairment that requires supervision or is adjudicated incompetent, and that person needs or wants to leave the program during the day, the responsible party or individuals designated by the responsible party shall sign the participant out.
- (k) The participant's responsible party or his or her designated representative shall be contacted and informed of the need to remove the participant from the program if one or more of the following conditions exists:
- (1) the participant's condition is such that he or she is a danger to himself or herself, or poses a direct threat to the health of others, as documented by a physician or appropriate licensed health professional; or
 - (2) the safety of individuals in the facility is threatened by the behavior of the participant, as documented by the facility.

Documentation of the emergency discharge shall be retained on file in the facility.

(l) After the participant has left the program or died, the program shall maintain the participant's record in the facility for one year, and then stored for two more years.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

SECTION .0700 - MEDICATION ADMINISTRATION

10A NCAC 13E .0701 MEDICATION ADMINISTRATION POLICIES AND PROCEDURES

There shall be written policies and procedures developed and implemented regarding:

- (1) medication administration;

- (2) documentation of medication administration;
- (3) maintenance of documentation;
- (4) documentation and reporting of medication errors; and
- (5) medication storage and disposition.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0702 MEDICATION ADMINISTRATION COMPETENCY EVALUATION

(a) Validation of each staff person's competency to administer medications shall be completed prior to administering medications and shall include:

- (1) documentation by a registered nurse pursuant to G.S. 90 Article 9A or a licensed pharmacist pursuant to G.S. 90 Article 4A of a clinical skills validation on the Medication Administration Skills Validation Form. Copies of this form may be accessed electronically free of charge at <https://info.ncdhhs.gov/dhsr/acls/acforms.html#medtest>;
- (2) successful completion of a standardized written exam established by the Division of Health Service Regulation; or
- (3) being listed as a medication aide on the NC Medication Aide Registry pursuant to G.S. 131E-270 and 10A NCAC 13O .0201.

(b) The program shall ensure that a licensed health professional who is authorized to dispense, prescribe, or administer medications is available for consultation with staff. All such consultations shall be documented in the participant's record.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017;
Amended September 1, 2019.*

10A NCAC 13E .0703 MEDICATION ADMINISTRATION

(a) Medications shall be administered according to current physician's or appropriate licensed health professional's orders and the participant's medication schedule. The medication schedule shall list all medications with dosages and times that medications are to be administered.

(b) A record of all medication given to each participant shall be accurate and include the following:

- (1) the participant's name;
- (2) the name, dosage, quantity, and route of the medication;
- (3) instructions for giving medication;
- (4) the date and time medication is administered; and
- (5) the name or initials of person giving the medication. If initials are used, a signature for those initials shall be documented and maintained in this record.

(c) Medications shall be kept in the original pharmacy containers in which they were dispensed. The containers shall be labeled with the participant's full name, the name and strength of the medicine, and dosage and instructions for administration. Medicines shall be kept in a locked location.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

SECTION .0800 - NUTRITION AND FOOD SERVICE

10A NCAC 13E .0801 FOOD PROCUREMENT AND SAFETY

(a) The kitchen, dining, and food storage areas shall be clean and maintained in a sanitary condition in accordance with Rules Governing the Sanitation of Residential Care Facilities (15A NCAC 18A .1600) as promulgated by the North Carolina Division of Public Health, Environmental Health Services Section, which are incorporated herein by reference including subsequent amendments and editions.

(b) All food and beverages shall be procured, stored, prepared, or served by the facility under sanitary conditions in accordance with Rules Governing the Sanitation of Residential Care Facilities (15A NCAC 18A .1600).

(c) All meat served to participants shall have been processed at a plant approved by the United States Department of Agriculture (USDA).

(d) There shall be at least a three-day supply of perishable food and a five-day supply of non-perishable food on site, as indicated on the menus prepared as set forth in Rule .0802 of this Section, for both regular and therapeutic diets.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0802 FOOD PREPARATION AND SERVICE

- (a) Staff, space, and equipment shall be provided for safe and sanitary food storage, preparation, and service.
- (b) Table service shall include a napkin and non-disposable place setting consisting of at least a knife, fork, spoon, plate, and beverage containers. Exceptions may be made on an individual basis and shall be based on documented needs or preferences of the participant.
- (c) If participants require assistance with eating, food shall be maintained at serving temperature until assistance is provided.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0803 MENUS

- (a) Menus shall be prepared according to the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA) Dietary Guidelines for Americans, which is incorporated by reference with all subsequent amendments and editions and is available at no cost at <http://www.health.gov/dietaryguidelines>.
- (b) Menus shall be maintained in the kitchen and identified as to the current menu day, and cycle for any given day for guidance of food service staff.
- (c) Any substitutions made in the menu shall be of equal nutritional value, appropriate for therapeutic diets, and documented to indicate the foods actually served to participants.
- (d) Menus shall be planned to take into account the food preferences and customs of the participants.
- (e) A licensed dietitian or nutritionist, pursuant to G.S. 90, Article 25, shall plan or review all menus, including all therapeutic diets. The facility shall maintain verification of the licensed dietitian or nutritionist's approval of the therapeutic diets, including an original signature by the licensed dietitian or nutritionist and the licensure number of the licensed dietitian or nutritionist.
- (f) The facility shall have a matching therapeutic diet menu for all physician or appropriate licensed health professional ordered therapeutic diets, for guidance of food service staff.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0804 FOOD REQUIREMENTS

- (a) A minimum of three meals a day shall be served.
- (b) Foods and beverages that are appropriate to overnight respite participants' diets shall be offered or made available to overnight respite participants as snacks between each meal for a total of three snacks per day and shall be shown on the menu as snacks.

*History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.*

10A NCAC 13E .0805 THERAPEUTIC DIETS

- (a) All therapeutic diet orders, including thickened liquids, shall be in writing from the participant's physician or appropriate licensed health professional.
- (b) Where applicable, the therapeutic diet order shall be specific to calorie, gram, or consistency, such as for calorie-controlled American Diabetic Association diets, low sodium diets, or thickened liquids, unless there are written orders that include the definition of any therapeutic diet identified in the facility's therapeutic menu approved by a licensed dietitian or nutritionist.
- (c) The facility shall maintain an accurate and current listing of overnight respite participants with physician or appropriate licensed health professional ordered therapeutic diets for guidance of food service staff.

History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.

10A NCAC 13E .0806 ASSISTANCE WITH EATING

- (a) Staff shall provide assistance with eating as needed.
- (b) Food shall be maintained at serving temperature until assistance with eating is provided.
- (c) Participants needing assistance with eating shall be assisted upon receipt of the meal and the assistance shall be unhurried and in a manner that maintains or enhances each participant's dignity.

History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.

10A NCAC 13E .0807 ACCOMMODATION OF PARTICIPANT NEEDS AND PREFERENCES

Variations from the required three meals to meet individualized needs or preferences of participants shall be documented in the participant's record.

History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.

SECTION .0900 - PROGRAM ACTIVITIES

10A NCAC 13E .0901 ACTIVITIES PROGRAM

- (a) There shall be a program of activities designed to promote the participants' active involvement with each other, their families, and the community.
- (b) If there is a question about a participant's ability to participate in an activity, the participant, the participant's physician or appropriate licensed health professional, family, or responsible party shall be consulted to obtain a statement regarding the participant's capabilities.

History Note: Authority G.S. 131D-6.1;
Eff. April 1, 2017.