

## COUNCIL OF THE DISTRICT OF COLUMBIA

## NOTICE

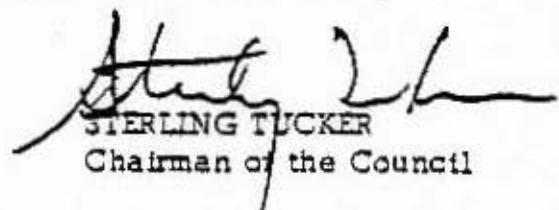
November 11, 1977

D.C. Law 2-35

**"Community Residence Facilities Licensure Act of 1977"**

Pursuant to Section 412 of the District of Columbia Self-Government and Governmental Reorganization Act, P. L. 93-198, "the Act", the Council of the District of Columbia adopted Bill No. 2-46 on first and second readings May 31, 1977 and June 14, 1977, respectively. Following the signature of the Mayor on August 5, 1977, this legislation was assigned Act No. 2-68, published in the August 19, 1977, edition of the D.C. Register, and transmitted to both Houses of Congress for a 30-day review, in accordance with Section 602 (c)(1) of the Act.

The Council of the District of Columbia hereby gives notice that the 30-day Congressional Review Period has expired and, therefore, cites the following legislation as D.C. Law 2-35, effective October 27, 1977.



STERLING TUCKER  
Chairman of the Council

(Vol. 24, D.C. Register, 1158, August 19, 1977)

D.C. LAW

2-35

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

OCTOBER 27, 1977

To amend the District of Columbia Health Care Facilities Regulation (Reg., No. 74-15) to provide for licensing community residence facilities, and for related purposes.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA,  
That this act may be cited as the "Community Residence  
Facilities Licensure Act of 1977".

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TITLE I

LICENSING COMMUNITY RESIDENCE FACILITIES

Sec.101. The Health Care Facilities Regulation, enacted June 14, 1974 (Reg. No. 74-15) is hereby amended as follows:

(a) Section 3 of Title I is amended by:

(1) inserting the following new definitions in proper alphabetical order and renumbering the definitions accordingly:

(A) "Community Residence Facility:

"A facility providing safe, hygienic, sheltered living arrangements for one (1) or more individuals aged eighteen (18) years or older, not related by blood or marriage to the Residence Director, who are ambulatory and able to perform the activities of daily living with minimal assistance. The definition includes facilities, including halfway houses, which provide a sheltered living arrangement to persons who desire or require supervision or assistance within a protective environment because of physical, mental, familial, social circumstances. The definition does not include facilities providing sheltered living arrangements to persons who are in the custody of

the District of Columbia Department of Corrections.";

(B) "Halfway Houses:

"A community residence facility which offers a sheltered living arrangement to residents who desire or require a protective environment while they prepare to move to an unsheltered, independent living arrangement.";

(C) "Sheltered Living Arrangement:

"A living arrangement in which a responsible adult oversees the activities of daily living of each resident so as to assist each resident in maintaining adequate personal hygiene, establishing social, community and family contacts, and obtaining adequate medical, nursing, health and social services. Such living arrangement may include the supervision of the taking of medications prescribed for self-administration.";

(D) "Protective Environment:

"An environment in which residents are provided with safe and sanitary sleeping arrangements, nutritious meals, laundry service and healthful and comfortable surroundings."; and

(E) "Ambulatory :

"The ability with or without mechanical assistance to get in and out of bed, walk or move by oneself from place to place without assistance from another person.;"

(2) striking the words "Supervised Personal Care Facilities" in paragraph (14)3 and inserting in lieu thereof the words "Community Residence Facilities";

(3) adding the following language at the end of paragraph (25):

"In Titles II through IV of this regulation, and where the provisions of Titles V and VI of this regulation apply to residents of community residence facilities pursuant to Title VII of this regulation, 'patient' also includes a resident of a community residence facility."; and

(4) striking paragraph (47) and renumbering the other definitions accordingly.

(b) Title II is amended by:

(1) striking the period at the end of the sentence in section 1(f) and inserting the following language in lieu thereof: ",except that a home with more than six (5) unrelated occupants shall not be required to post the license but shall have its license easily available to a city inspector upon his or her request.";

(2) inserting after the word "administrator" in section 4(a)(2) the words "or Residence Director";

(3) striking the period in section 4(c) and adding the following language in lieu thereof: "+except that a community residence facility shall be required to provide only such annual budget information, financial records and information concerning financial resources as shall be required on the printed form prepared for such purposes by the Mayor"; and

(4) amending section 7 by:

(A) striking "and Judicial Review" in the title of section 7; and

(B) amending subsection (b) to read as follows:

"(b) Upon the suspension of a license pursuant to section 6(d) of this title, the Mayor shall immediately notify the licensee that the licensee may, within twenty-four (24) hours following the suspension, request a hearing. The hearing shall be conducted by the Mayor within two (2) calendar days following the receipt of the request.".

(c) Title III is amended by:

- (1) inserting after "Administrator" in section 3(a)(4) the words "or Residence Director,";
- (2) striking the words "or the" in section (3)(c), inserting a comma after the words "the Administrator" and inserting the words ", the Residence Director," after the words "Acting Administrator"; and
- (3) striking the period in section 6(a)(3) and inserting in lieu thereof the words ", if the facility is otherwise required by this regulation to be in compliance with such codes.".

(d) Title IV is amended by adding the following new section 2:

"Section 2. Married Couples

"In a community residence facility, a married couple shall be permitted to share the same sleeping quarters.".

(e) A new Title VII is added to read as follows:

"TITLE VII. Community Residence Facilities

"Section 1. Administrative Management

"(a) Residence Director

"(1) A community residence facility shall have a Residence Director who may be the licensee of the community sidence facility and who shall fulfill the following ualifications:

"(A) He or she shall be at least twenty-one (21) years of age;

"(B) He or she shall be certified annually by his or her physician as being in good physical and mental condition, capable of doing physical household tasks or directing the work of household assistants, and free of communicable diseases as defined in Title VIII, chapter 5, Part 1 of the Health Regulations of the District of Columbia;

"(C) At the time of the initial application for a license for a community residence facility, he or she shall be examined orally by the Mayor as to his or her understanding of the requirements of this regulation and ability to provide adequate care to residents within his or her community residence facility; and

"(D) The Residence Director of a community residence facility with thirty (30) or more residents shall hold a bachelor's degree or have at least three (3) years full-time experience in a field directly related to the administration of the program or the services of the community residence facility.

"(2) The Residence Director shall have the following responsibilities, except in those areas in which the governing board of the community residence facility has retained the responsibility:

"(A) the supervision of the day-to-day operation of the community residence facility;

"(B) the implementation of policies, practices and procedures of the community residence facility, including the screening of prospective residents;

"(C) the preparation of all reports and documents required by the Mayor;

"(D) the preparation of the budget and the supervision of financial matters;

"(E) the supervision of the community residence facility's sanitation, safety, laundry and dietary standards and services and of its services relating to the health, education and welfare of its residents;

"(F) the maintenance of the community residence facility's records and reports relating to residents and finances; and

"(G) the supervision and direction of the other employees of the community residence facility.

"(3) The Residence Director shall not be employed outside the community residence facility and shall be present in the community residence facility and within call of the residents at all times or shall assign his or her duties, for a period not to exceed twelve (12) hours, to an individual who is at least twenty-one (21) years of age and who is capable of recognizing visible changes in the residents' physical and mental conditions and of taking responsible action in the case of an emergency. If the Residence Director is to be temporarily absent for periods to exceed twelve (12) hours, he or she shall designate an assistant Residence Director who shall be capable of assuming the responsibilities of the Residence Director. If all of the residents of a community residence facility are regularly occupied or employed away from the community residence facility during certain hours, upon application by the Residence Director, the Mayor may permit that community residence facility to be unattended.

during those hours and the Residence Director to be otherwise employed, if the Residence Director can assure the Mayor that the community residence facility will be properly supervised in the event of a resident's illness or an emergency.

**\*(b) Medical Coverage**

"(1) Each resident shall provide for his or her own medical care, at his or her own expense if able or under Titles XVIII and XIX of the Social Security Act, or at the expense of any other public or private plan or agency. Nothing in this section shall be deemed to require a resident to have a medical relationship with a licensed physician when the resident relies solely upon generally recognized treatment by prayer or by spiritual means, unless his or her failure to obtain medical care presents a threat to the health or safety of others.

"(2) All residents shall be seen by a physician not more than thirty (30) days prior to admission to a community residence facility and at least once a year thereafter. In the event the resident is unable to make arrangements for his or her annual re-examination, it shall be the

responsibility of the Residence Director to make the arrangements and assist the resident in complying with this requirement.

\*(3) A community residence facility with thirty (30) or more residents shall, by written agreement, retain the services of a licensed physician who shall advise on medical matters, shall review the community residence facility's program of residential health care and shall handle medical emergencies if the resident's personal physician is unavailable.

\*(c) Personnel

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\*(1) There shall be a sufficient number of qualified employees, staff or other adults in each community residence facility to provide for the welfare, comfort and safety of residents at all times of the day and night.

\*(2) In a community residence facility with more than six (6) unrelated occupants, personnel policies shall be written and available to all staff and to agents of the Mayor. These policies shall include, but not be limited to, the following:

"(A) wage scales, hours of work, vacations, sick leave, insurance and other benefits;

"(B) plans for the orientation of all employees and for regularly scheduled staff meetings;

"(C) an annual evaluation of employee performance by appropriate supervisors; and

"(D) position descriptions for each category of employee.

"(3) All persons employed in a community residence facility shall have a pre-employment medical examination by a licensed physician and shall be certified annually by the examining physician to be in good health and free of communicable diseases as defined in Title VIII, chapter 5, Part I of the Health Regulations of the District of Columbia.

"(4) Accurate personnel records shall be maintained by each community residence facility, which records shall include the employee's name; address; sex; social security number; current professional license and/or registration number, if any; a resume of education, training, experience

and places of previous employment; and a current health certification.

**"(d) Admission Policies**

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"(1)(A) A prospective resident shall be admitted to and retained by a community residence facility only if the prospective resident, the sponsor, if any, and the Residence Director agree and the resident's personal physician certifies in writing that the resident is not in need of professional nursing care and can be assisted safely and adequately within a community residence facility.

"(B) The Mayor shall prepare a form to be used by physicians in certifying residents for placement in community residence facilities which clearly states the limitations placed on community residence facilities with regard to the services they are licensed to provide and the condition of persons they are authorized to accept as residents.

"(2)(A) Residents shall be able to perform the activities of daily living with minimal assistance and shall generally be oriented as to person and place and capable of proper judgment in taking

action for self-preservation under emergency conditions.

"(B) Persons not generally oriented as to time and place or persons substantially ambulatory but needing limited personal assistance in case of an emergency may be admitted to a community residence facility by special permission of the Mayor. Such permission shall only be granted if the Mayor is satisfied the community residence facility has sufficient staff to assure the safety of such residents.

"(3) Admission requirements which are predicated upon religion, sex, organizational membership, and the like shall be in writing. Whenever a community residence facility denies an applicant admission to the community residence facility, the reason for the denial shall be given to the applicant in writing if so requested.

"(4) Each resident shall have a pre-admission medical examination by a physician, not more than thirty (30) days prior to his or her admission to a community residence facility. The examining physician shall certify that the resident is free of communicable disease as defined in Title VIII.

chapter 5, Part 1 of the Health Regulations of the District of Columbia and shall provide the community residence facility with a written report, including sufficient information concerning the resident's health, to assist the community residence facility in providing adequate care, including any treatment orders, drugs prescribed, special diets and a rehabilitation program.

"(5) Each resident who is on convalescent leave from a psychiatric hospital or who has been determined to be mentally incompetent or in need of treatment under the 1964 Hospitalization of the Mentally Ill Act, approved September 14, 1965 (79 Stat. 751; D.C. Code, sec. 21-501) shall have had a psychiatric examination not more than thirty (30) days prior to his or her admission. The examining physician shall provide the community residence facility with a written report providing sufficient information on the resident's condition to enable the community residence facility to assist the resident toward rehabilitation, together with a record of any prescriptions, treatment orders or special instructions for the management and protection of the resident.

"(e) Resident Status Policies

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"(1) In addition to the pre-admission medical examination required by section 1(d)(4) of this title, each resident shall have an annual examination by a physician. The physician's report and his or her recommendations shall be included in the resident's permanent file.

"(2) The Residence Director shall communicate orally or in writing with each resident's sponsor, if any, at least every six (6) months regarding the general condition of the resident, any unusual incidents which may have occurred, any changes in the resident's health status and any changes in the care or services to be provided to the resident.

"(3) In cases of serious illness or accident, medical care shall be secured immediately by the resident, if he or she is able, or by the Residence Director who shall first attempt to notify the resident's physician. If the Residence Director is unable to do so, he or she shall then secure assistance from the community residence facility's medical advisor, if any, or from any other licensed physician. The Residence Director shall immediately notify the next of kin or sponsor, if

any, of the incident and document it in the resident's permanent record.

"(4) Section 1(j) of Title V of this regulation shall apply to community residence facilities.

"(5) Death shall be determined and pronounced only by a physician. In the case of death, both the resident's attending physician and the next of kin or sponsor, if any, shall be notified promptly. The community residence facility shall provide for deaths to be investigated in accordance with section III of Title I of the Act of July 29, 1970 (84 Stat. 518; D.C. Code, sec. 11-2301)."

**"(f) Transfer and Discharge Policies**

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"(1) The Residence Director shall promptly notify a resident's sponsor, if any, or physician when a resident's physical and/or mental condition deteriorates so that he or she is in need of continuing professional nursing services and should be transferred to an appropriately licensed facility. Short-term nursing care (up to seventy-two (72) hours) may, however, be provided by a community residence facility when needed if the community residence facility can provide or arrange

for the provision of the physical environment and professional services appropriate to the resident's condition. If the Residence Director is not able to obtain appropriate medical care for the resident, the Residence Director shall notify the Mayor of the need for assistance.

"(2) No resident shall be involuntarily transferred to another community residence facility or asked to leave a community residence facility on a non-emergency basis without a written statement signed by the Residence Director or the supervising agency (if any), describing the reasons therefor, and providing timely (at least two (2) weeks) notice to the resident and sponsor, if any, and the opportunity for the resident to discuss the request with his or her personal physician, sponsor, if any, legal representative or other person as he or she desires and to plan for an appropriate new placement.

"(3) No resident shall be prevented from leaving the community residence facility or be subject to curfews. If the Residence Director has reason to believe that a resident appears to be irrational and may do harm to himself or herself or

to others, the Residence Director shall promptly notify the resident's personal physician and attempt to obtain appropriate medical assistance.

"(g) Resident's Rights

"A supportive and protective environment shall be provided to each resident to promote his or her comfort, self-esteem and personal dignity and to insure that the resident's property and civil rights are respected. A written copy of the following rights and privileges (which may be obtained from the Mayor) shall be given to each resident and his or her sponsor, if any, upon admissions:

"(1) Visitors -

Each resident shall be permitted to receive visitors at any reasonable hour in an area permitting private conversation.

"(2) Personal Property-

"(A) A community residence facility shall take appropriate measures to safeguard and account for personal articles of residents which are brought to the community residence facility, including providing each resident with a cabinet,

designated drawer or other place in which he or she can keep and lock small items and personal papers.

"(B) Safe storage of and assistance in managing modest cash resources of residents for use in meeting their personal incidental expenses is an appropriate service which shall be provided by a community residence facility if such service is requested in writing by the resident, if competent, or by the sponsor, if any, of the resident. The community residence facility shall provide the resident or his or her sponsor, if any, with a receipt for all personal property received by it for safekeeping.

"(C) A separate and accurate record shall be kept of all funds and personal property deposited for safekeeping with or received to be managed by the community residence facility for the benefit of the resident. Such record shall include:

"(i) the date and amount of any money received;

"(ii) the date and amount of each withdrawal by the resident or disbursement by the community residence facility for the resident's benefit;

"(iii) the items or purposes for which disbursements were made by the community residence facility; and

"(iv) the current balance.

"A copy of the record shall be made available to the resident or his or her sponsor, if any, at any time upon demand and shall be presented to the resident or his or her sponsor, if any, semi-annually and upon the resident's transfer or discharge from the community residence facility.

"(D) Provisions shall be made for residents who desire to bring personal possessions and furnishings to their living quarters in the community residence facility unless the community residence facility can demonstrate that it is not practical, feasible or safe. Residents shall be encouraged and allowed to wear their own clothing. If clothing is provided by the community residence facility, it shall be appropriate, clean and well-fitting.

"(E) No Residence Director shall require, in consideration for the admission of a resident or in consideration for continuing to care for a resident, that the resident give, transfer or

assign to the Residence Director an interest in or title to any property owned by such resident nor shall the Residence Director accept any such gift, transfer or assignment. Nothing herein contained shall be construed as prohibiting a Residence Director from requiring a resident to pay, at periodic intervals, the sum of money as has been agreed in writing shall be paid for the care given the resident nor shall anything herein be construed as prohibiting a resident from selling property to a Residence Director, if the price received is the reasonable market value of the property at the time of the sale.

"(3) Privacy -

"Residents shall have the right of privacy in their rooms and community residence facility personnel shall respect this right by knocking on the door before entering a resident's room. A resident's mail shall be delivered unopened unless medically contraindicated (as documented by a physician in the patient's medical record) or unless the mail relates to financial affairs for which responsibility has been delegated to the community residence facility in accordance with the

provisions of section 1(k) of Title V of this regulation. Residents shall have access to a telephone for outgoing and incoming calls located so that they can speak privately and shall have the right to install and use a private telephone at their own expense.

**\*\*(4) Freedom from Abuse.**

"Physical and mental harassment or abuse of residents is prohibited.

**\*\*(5) Spiritual Needs.**

"Provisions shall be made to meet the spiritual needs of the resident by advising the proper clergyman of the resident's admission to the community residence facility, if requested to do so by the resident or his or her sponsor, if any, or by allowing residents to attend religious services of their choice in the community. No religious beliefs or practices shall be imposed on any resident.

**\*\*(6) Right to Register Complaints.**

"Residents or those acting on their behalf shall be provided the right of registration and disposition of complaints without the resident's being intimidated by a threat of discharge or other

reprisal. All residents, next of kin and/or sponsors, if any, shall be provided with the address and telephone number of the District government office which licenses health care facilities.

"(7) Insurance .

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"The community residence facility shall carry sufficient insurance to cover hazards (fire and extended coverage) and legal risk or liability."

"Section 2. Administrative Records and

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Reports

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"(a) The Residence Director shall maintain current and accurate records and reports which shall be on file and available at all times for inspection and review by the Mayor. All administrative records and reports required to be kept by paragraphs (1)+(2)+ and (3) of this subsection shall be filed and retained for five (5) years by the community residence facility.

Required records and reports shall include but not be limited to the following information:

"(1) Reports

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"(A) Each community residence facility shall keep and the Residence Director shall report

annually within thirty (30) days after the end of each calendar year to the Mayor on appropriate forms to be provided by the Mayor the following information:

- "(i) total number of admissions;
- "(ii) total number of discharges;
- "(iii) authorized bed capacity; and
- "(iv) total number of resident days.

"(B) At least quarterly each Residence Director shall notify the Central Referral Bureau established under Title VIII of this regulation of any changes in his or her community residence facility's occupancy level since the last report.

**"(2) Community Residence Facility Records**

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"A community residence facility shall maintain for the Mayor's inspection at any time the following records and reports:

- "(A) a list of current charges and fees for services;
- "(B) payroll records and weekly staff schedules (if applicable);
- "(C) disaster plans and procedures;
- "(D) agreements with professional consultant(s);

"(E) a list of the telephone numbers of each resident's personal physician, the advisory physician, if any, or at least three (3) other licensed physicians who could be called in case of an emergency; the poison control center; the rescue squad; the fire department; the police department; and any other resources available to aid in an emergency;

"(F) a roster of residents;

"(G) a Day and Night Report Book in which emergencies and other unusual occurrences involving residents are recorded by the responsible person on duty at the time of the occurrence; and

"(H) records listing residents' personal property entrusted to the community residence facility for safekeeping.

**"(3) Resident Records**

"A community residence facility shall keep a permanent record concerning each resident to be retained by the community residence facility for at least two (2) years after the resident's discharge or death. All information contained therein shall be confidential and shall not be open to public inspection, except by officials of the District for

the enforcement of this regulation, without the written consent of the resident indicating to whom the records are to be released and for what purpose. Each record shall be kept current, dated and signed with the full name of the record keeper and shall include but not be limited to:

- "(A) the resident's name;
- "(B) the resident's age and sex;
- "(C) the resident's social security number;
- "(D) the resident's home address;
- "(E) the date the resident was admitted and the date the resident was discharged or the date of the resident's death;
- "(F) the name, address and telephone number of the resident's personal physician;
- "(G) the name, address and telephone number of the resident's next of kin or sponsor, if any;
- "(H) the source of referral;
- "(I) the resident's religious affiliation, if any, and the name and telephone number of the resident's minister, priest or rabbi;
- "(J) reports and recommendations from physicians, social workers, or other health care professionals regarding the resident's care; and

"(K) a current record of any funds managed by the community residence facility for the resident's benefit as required in section 1 (g)(2)(C) of this title.

"(4) Confidentiality of Records

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"Reports and records of a community residence facility specifically identifying residents of a community residence facility and permanent records of each resident shall be confidential and shall not be made available for public inspection to persons not involved in the resident's health care, except to officials of the District responsible for the enforcement of this regulation, unless the names of residents and other identifying characteristics of the residents are removed or the resident gives his or her written consent to such other use. No studies based on these records shall identify the community residence facility by name without its written consent or any resident by name without the resident's written consent or that of his or her sponsor, if any.

"Section 3. Community Residence Facility

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Program Statement

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"Each community residence facility shall develop in writing or supply on forms to be provided by the Mayor a statement of its program; facilities; staffing patterns; consultant services; activities offered; fees and charges; payment and refund policies; group or groups of persons to be served including any sex or age characteristics; admission and discharge policies including parameters of length of stay; limitation, if any, on sources of referral; and formal and informal relationships to community health services and social services.

**"Section 4. Physical Restraint and Behavioral Modification**

"(a) The community residence facility shall not use physical restraint or confinement except in an emergency to protect a resident from harm to himself or herself or to others. When action is required, the Residence Director shall immediately notify the resident's personal physician and sponsor, if any, and also take steps to obtain appropriate care for the resident.

"(b) Programs designed to control or change a resident's behavior shall be described in writing,

subject to the approval of the Mayor and, when approved by the Mayor, shall be conducted only under the direct supervision of a qualified person having a graduate degree in psychology, sociology, social work, special education, vocational education, or psychiatry and having direct supervised experience and training in the method employed. Such programs shall not utilize deprivation or deprive any resident of his or her basic rights.

"(c) Personnel of the community residence facility shall not employ physical or mental abuse.

"(d) A resident shall not be forcibly secluded in a locked room nor shall he or she be locked out of his or her room at any time.

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"Section 5. Medication Storage and Disposal

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"(a) Storage

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"The community residence facility shall provide each resident with the means of keeping his or her medications secure and separate from those of other persons. Pharmaceuticals requiring refrigeration shall be stored in a locked refrigerator or in a secured container within a refrigerator. Narcotics shall be kept in locked

containers or cabinets and the Residence Director shall keep a record of the kind and amount of narcotics in the possession of each resident. Medications of each resident shall be stored in their original containers and shall not be transferred to another container.

"(b) Disposal of Medications

"The Mayor shall prescribe procedures for community residence facilities to follow for the proper disposition and disposal of all medicines and narcotics on the discharge or death of the resident and when the medicines and narcotics are no longer in use.

"Section 6. Dietary Services

"(a) General

"(1) Community residence facilities shall recognize and provide for the reasonable nutritional, emotional, religious, cultural and therapeutic dietary requirements of its residents. All food and drink shall be clean, wholesome and free from spoilage. At least three (3) meals that are nutritious and suited to the special needs of residents shall be served daily, unless the residents are regularly provided meals at another

Location. Meals shall be attractively served at the proper temperature and in a home-like atmosphere where group dining is offered to all residents. The community residence facility shall conform to section 7(b) of Title V of this regulation.

"(2) The Mayor shall make a current diet manual available to all community residence facilities and offer the consultant services of a dietitian to community residence facilities so that they can meet the requirements of this section.

"(b) Preparation

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"All food shall be prepared so as to be safe for human consumption and served in accordance with Title VIII, chapter 6, Part 1 of the Health Regulations of the District of Columbia with the following exceptions:

"(i) Community residence facilities with fewer than twenty (20) residents need not meet the requirements of section 111(b)(1) but such facilities shall organize plumbing facilities in such a way as to insure that food processed therein is safe for human consumption.

"(ii) Community residence facilities with fewer than ten (10) employees on a shift need not comply with the provisions of section 111(b)(2) insofar as they require separate toilet facilities for male and female employees.

"(iii) Community residence facilities with five (5) or fewer unrelated residents plus the Residence Director and his or her family need not meet the requirements of sections 110 and 116.

"(c) Cleanliness of Food Utensils and

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Equipment

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"All multi-use utensils and equipment used in the preparation, cooking and serving of food or drink shall be thoroughly washed in hot water (at least 110 degrees Fahrenheit) and detergent after each use.

"(d) Personnel

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"Community residence facilities shall provide sufficient qualified dietary and food service personnel to meet the general and specific needs of all residents and shall comply with the requirements of sections 7(a)(5) and 7(a)(7) of Title V of this regulation.

"(e) Therapeutic Diets

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"(1) All community residence facilities that accept or retain residents in need of special or therapeutic diets shall provide for those diets to be planned, prepared and served as prescribed by the attending physician. Those community residence facilities shall consult regularly with a dietitian.

"(2) The dietitian shall have access to the resident's permanent record containing the physician's prescriptions for medications and special diet and shall document in that record all observations, consultations and instructions regarding the resident's acceptance and tolerance of prescribed diets.

"(3) The dietitian and the Residence Director or a qualified person designated by the Residence Director shall review the therapeutic diets of a community residence facility's residents at least every six (6) months.

"Section 7. Rehabilitation

"(a) A major goal of each community residence facility shall be to assist its residents in achieving an optimum level of function and self-care through education and retraining in the

activities of daily living. Toward this goal, community residence facilities shall maintain as culturally normal routines and procedures as possible, providing for sleeping periods, meal times, social and recreational activities, responsibilities and resident autonomy that approximate, as nearly as is consistent with the proper care of the resident, the living patterns of independent persons of their age in the community. Whenever possible, residents shall be encouraged to return to their homes or other residential living arrangements.

"(b) The Residence Director and such other personnel employed by the community residence facility as may be designated by the Mayor shall attend such training courses as the Mayor shall provide, at little or no cost, to increase their knowledge and skill concerning rehabilitation and rehabilitation techniques which can be employed in the community residence facility.

"(c) The Residence Director shall assist each resident in obtaining rehabilitation services from qualified therapists, including but not limited to physical, occupational, and speech and hearing

therapists as the resident may need, at the resident's own expense, if the resident is able to pay therefor, or under Titles XVIII and XIX of the Social Security Act, or at the expense of any other public or private plan or agency.

"(d) Each community residence facility shall grant access to and cooperate to the best of its ability with any licensed therapist who is hired to provide services to a resident of the community residence facility.

**"Section 8. Housekeeping and Laundry**

**Services**

**"(a) Housekeeping Services**

"The interior and exterior of each community residence facility shall be maintained in a safe, clean, orderly, attractive and sanitary manner free from accumulations of dirt, rubbish and objectionable odors.

**"(b) Laundry Services**

"(1) Each community residence facility shall provide appropriate procedures, personnel and equipment to assure sufficient clean linen supplies and the proper sanitary washing and handling of linen and personal clothing of residents.

"(2) An adequate supply of linens, including replacements, shall be maintained. All bed linens shall be changed and cleaned as often as necessary to maintain clean linen on the beds at all times, but in no case shall bed linens be changed less often than once a week.

"(3) Soiled linen shall be handled in a sanitary manner.

"(4) Personal laundry of residents and personnel shall be collected, transported, sorted, washed and dried in a sanitary manner, separate from bed linens. When feasible, arrangements shall be made so that residents who wish to do so have a safe and convenient place to wash out and dry small amounts of personal laundry.

**\*Section 9. Social Services**

"(a) Each community residence facility with fewer than thirty (30) residents shall assist residents in obtaining needed social services, as follows:

"(1) Prior to admission, if possible, or as soon as possible after admission the Residence Director shall assist each resident who so desires in obtaining, at the resident's expense if the

resident is able to pay therefor or from any available private or public social service resources, a professional evaluation of the resident's social needs and of a plan, developed in cooperation with the resident, for obtaining such services as may be necessary to meet the health-related emotional and social needs of the resident.

"(2) A written summary of each resident's social services plan, including personal and situation information important to the management of the resident's care and his or her probable length of stay, shall be included in the resident's permanent record.

"(3) The Residence Director or personnel designated by him or her shall assist the resident in carrying out his or her social services plan by aiding the resident in finding public and private social service resources, in arranging appropriate transportation to the source of such services, if necessary, and in making and keeping appointments to receive social services.

"(b) Each community residence facility with more than thirty (30) residents shall comply with section 8 of Title VI of this regulation and shall

provide the services of a social worker for a minimum of eight (8) hours per week. Each community residence facility with more than eighty (80) residents shall provide the services of a social worker twenty (20) hours per week. Each community residence facility with more than one hundred (100) residents shall provide the services of a social worker on a full-time basis.

"(c) The Mayor shall make available to all community residence facilities a list of all private and public social service resources in the community, together with a description of the services offered by each, their location and the persons to whom their services are available.

"Section 10. Resident Activities

"(a) Each community residence facility with fifty (50) or more residents shall employ a full time resident activities specialist who shall hold current registration in the National Therapeutic Recreation Society as a therapeutic recreation specialist, or possess the qualifications necessary for such registration, or have two (2) years paid experience in a program or service directly related to therapeutic recreation.

"(b) Each community residence facility shall provide, without additional charge, books, periodicals, newspapers, and audio and audio-visual entertainment within the community residence facility.

"(c) Community residence facility staff shall become aware of and familiar with appropriate local activities and events which the residents might enjoy and shall actively encourage the residents to participate in them. Such activities shall include but not be limited to those which stimulate interest and participation in reading, hobbies, music, religion, drama, arts and crafts, games, sports, and, where appropriate, senior citizens' clubs and meal programs.

"(d) Each community residence facility shall to the maximum extent possible utilize the services of public and voluntary resources in promoting resident participation in activities.

"Section II. Environmental Requirements

"(a) Location

"Each community residence facility shall be within easy walking distance of public transportation to stores, restaurants, movies,

parks, recreational facilities, libraries, post offices, churches and similar facilities. Location in a remote area is not acceptable except when it can be shown that there is a special need for services in such an area or when the community residence facility provides transportation for its residents.

"(b) Noise Level

"When possible, a community residence facility shall be located away from known sources of loud and irritating noises and in areas where interior sounds can be maintained at reasonable comfort levels.

"(c) Air Pollution

"Each community residence facility shall be located in an area reasonably free from noxious and hazardous smoke and fumes. The location of each community residence facility shall otherwise be in compliance with the Air Quality Control Regulations of the District of Columbia, enacted July 7, 1972 (Reg. No. 72-12).

"(d) Name of Facility

"A community residence facility shall not use a name which is misleading as to the type of care

provided by the community residence facility nor a name which is suggestive of chronic illness, dependence or death. A community residence facility need not be given any name, if the licensee so desires.

"Section 12. Structural Requirements

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(a) Alterations to Community Residence

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Facilities

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"Before the physical facilities of any community residence facility are constructed, added to, remodeled or otherwise altered, to the extent a building permit is required the owner of the community residence facility shall notify the Mayor of all such contemplated changes before a building permit is issued, for the purpose of the Mayor's review and approval of the changes which may relate to the requirements of this title.

"(b) Applicable General Codes

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"(1) In addition to the requirements of this section, the physical structure of a community residence facility shall conform to all applicable provisions of the Housing Regulations of the District of Columbia, the Building Code of the District of Columbia, the Health Regulations of the

District of Columbia, and all other applicable District rules and regulations except as provided in section 5(b) of this title.

"(2) Each community residence facility with five (5) or fewer residents plus the Residence Director and his or her family shall conform to chapters 1 and 2 of the Housing Regulations of the District of Columbia. Each community residence facility with more than six (6) occupants shall comply with chapters 1 and 2 of the Housing Regulations of the District of Columbia and all other provisions of those Housing Regulations relating to rooming and boarding houses, apartment houses, and hotels or motels, depending on the nature of the community residence facility and the number of residents, except that sections 3203, 4106, 7203 and section 7205 of those Housing Regulations shall not apply.

"(c) Occupancy Classification

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"A community residence facility may be classified as a residential occupancy and may be located in a single or multi-family dwelling.

"(d) Lighting

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"(1) Natural light

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"All habitable rooms shall have window areas and ventilation levels in accordance with the Building Code of the District of Columbia. Obscure glass, glass blocks or similar non-transparent or distortion-producing material for openings shall not satisfy window area requirements for habitable rooms under this regulation.

"(2) Artificial Illumination

"General lighting levels in non-sleeping rooms throughout each community residence facility shall be no less than ten (10) foot candles. Incandescent fixtures shall be equipped with at least sixty (60) watt light bulbs. Additional lighting levels shall be provided by each community residence facility in the kitchen and laundry areas and as may be needed for special tasks, or at the request of a resident. Night lights shall be provided in bathrooms, hallways and, if requested, in residents' bedrooms. Outside entrances shall be well lighted at times when they are likely to be in use.

"(e) Water

"The water supply and distribution systems shall conform to all applicable District codes, rules and regulations.

"(2) An adequate supply of hot water for residents' use shall be available at all times. The temperature of hot water at fixtures used by residents shall be automatically controlled and shall not exceed 110 degrees Fahrenheit. The water supply may also include a separate or boosted supply at higher temperatures for the kitchen and for dishwashing and laundry uses.

"(f) Heating

"(1) Each community residence facility shall have a heating system which conforms to all applicable District codes, rules and regulations and which is of sufficient size and capacity to maintain a temperature of at least sixty-five (65) degrees Fahrenheit in winter temperatures. The heating system shall be thermostatically controlled. No portable room heaters, space heaters or fireplaces shall be permitted unless specifically approved by the Mayor as not presenting a fire hazard, although fireplaces may

be utilized for decorative and social/recreational purposes.

"(2) Each room used by residents shall be maintained at a minimum temperature of sixty-five (65) degrees Fahrenheit between 7:00 a.m. and 10:00 p.m. and sixty (60) degrees Fanrenheit at all other times, whenever such room is occupied.

"(g) Ventilation and Exhaust Systems

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"Each community residence facility with more than thirty (30) residents shall meet the requirements of section 17(c)(7) of Title V, except subsections (D) and (F) thereof.

"(h) Acoustical-Insulation and Noise Reduction

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"Each community residence facility with more than thirty (30) residents shall meet the requirements of sections 17(c)(8)(A) and 17(c)(8)(C) of Title V of this regulation.

"Sec. 13. Architectural Requirements

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"(a) General

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"The provision of space in a community residence facility and the way in which the community residence facility is equipped, furnished and maintained shall provide a comfortable,

congenial, home-like setting for residents and staff. Residents shall be provided access to and encouraged to utilize fully, all space required by this section to be provided in the community residence facility. When it is necessary to restrict certain space from residents' use, such space shall be located in as remote portions of the community residence facility as possible.

"(b) Bedrooms

"(1) Bedrooms shall be occupied in conformance with the minimum square foot requirements for bedrooms as specified in section 2306 of the Housing Regulations of the District of Columbia, except that, regardless of the bedroom size, no bedroom shall have more than four (4) occupants.

"(2) Every resident's bedroom shall be equipped or provided with a bed, a bedside table or cabinet with an individual reading lamp with at least a seventy-five (75) watt bulb, a comfortable armchair and suitable, sufficient storage space for each resident's personal clothing and personal effects. At least one (1) desk and chair shall be provided in the community residence facility for every ten (10) residents' use. Residents who are

students shall be provided with a desk and chair, upon request, in a part of the community residence facility that is quiet and conducive to study.

Each community residence facility shall provide to each resident, at least weekly, clean linens consisting of two (2) sheets and pillow slips, a bath towel, a hand towel and a wash cloth.

"(3) Beds shall be located only in rooms designated solely as bedrooms.

"(4) In community residence facilities in which residents are given keys to their sleeping rooms, staff shall have access to duplicate keys for use in emergency situations and regularly scheduled routine housekeeping.

"(5) Each bed shall be placed at least three (3) feet from any other bed and at least three (3) feet from any radiator or window. A flame resistant, washable bedside curtain or portable screen that completely conceals the bed to ensure privacy shall be made available to any resident in a multi-resident bedroom who requests one.

"(c) Bathing and Toilet Facilities

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"(1) Bathing and toilet facilities shall be provided in accordance with the fixture ratios

established for each or both of them in Article 240 of the Housing Regulations of the District of Columbia.

"(2) In each community residence facility employing more than three (3) full-time employees (including the Residence Director), toilet and lavatory facilities separate from the rooms used by residents shall be provided.

"(3) In each community residence facility with more than thirty (30) residents, when residents have the use of common living or eating space on floors other than floors on which their bedrooms are located, additional toilets and lavatories shall be provided on such floors in the proportion of one (1) toilet and lavatory for each thirty (30) residents.

"(4) Each toilet room and lavatory shall be provided with toilet paper holders and toilet paper, towels, soap, mirrors and adequate lighting.

"(5) Adequate provision shall be made to insure each resident's privacy in toilet, lavatory and bathing facilities.

"(d) Community Space

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"Group living space shall be provided for social and recreational purposes: living room or recreation room, and dining room. Dining and living areas may be located within the same room provided that minimum area requirements for community space in community residence facilities can be met. The combined total of all community space provided by the community residence facility shall afford at least twenty-five (25) square feet of space above the basement per resident.

**"Section 14. Fire Prevention and Safety**

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**Requirements**

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**"(a) Instruction Manual**

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"There shall be a written manual of instructions and plans, approved by appropriate officials of the District Fire Department, to be followed in case of fire, explosion or other emergency. It shall specify persons to be notified, locations of alarm signals and fire extinguishers, evacuation routes, frequency of fire drills, and the assignment of specific tasks and responsibilities to the staff of each shift.

**"(b) Training of Staff**

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"All personnel shall be trained to perform specific tasks. Simulated drills testing the effectiveness of the plan shall be conducted for each shift at least four (4) times a year. The plan shall be posted throughout the community residence facility. The most recent fire inspection report with the date of the latest inspection of the alarm system shall be kept in the community residency facility's records.

"(c) Fire Extinguishers

(1) Fire extinguishers properly maintained, meeting the requirements of section 1202 of the Building Code of the District of Columbia and approved for their specific use by an official of the District Fire Department shall be located as required therein.

"(2) Within fifteen (15) feet of any stove, oven, cooking burners or other cooking devices there shall be located a fire extinguisher effective in extinguishing grease and oil fires.

"(3) Within five (5) feet of the main heating plant and hot water heater there shall be located a fire extinguisher or extinguishers of a type and

sufficient capacity to extinguish fires originating in that equipment.

"(4) Each community residence facility shall have at least one (1) fire extinguisher located on each floor, including the basement and first floors, in a central location where it is accessible to all residents and personnel.

"(d) Smoke Detection System

"Each community residence facility shall install a smoke or fire detection device which will sound an alarm to alert residents and staff in the event of a fire and which meets the approval of the official of the District Fire Department designated by the Mayor.

"(e) Fire Exits

"Fire exits shall be kept clear of obstructions, clearly designated on the community residence facility's disaster plan and clearly identified by signs.

"(f) Alarm System

"Each community residence facility with more than twenty (20) residents shall be equipped with a manual fire alarm system.

"(g) Safety

\*Sections 20(c)(1), 20(c)(2) and 20(c)(3) of Title V of this regulation shall apply to community residence facilities.

"Section 15. Halfway Houses

"(a) Section 1(a)(6) of this title shall not apply to halfway houses, but at all times the Residence Director of a halfway house or another responsible adult (other than a resident of the community residence facility) who is capable of taking action in case of emergencies shall be within call or within reach by telephone at a telephone number made known to all residents and shall be within a reasonable distance of the community residence facility so as to be available to assist within one-half (1/2) hour in an emergency.

"(b) Section 1(e)(1) of this title shall not apply to halfway houses. Instead, in addition to the pre-admission medical examination required by section 1(d)(4) of this title and the pre-admission psychiatric examination required by section 1(d)(5) of this title, each resident shall have an annual psychiatric examination a written report of which, together with a record of any prescriptions,

treatment orders or special instructions for the management and protection of the resident, shall be made a part of the resident's permanent record.

"(c) Section 1(g)(2)(A) of this title shall not apply to halfway houses.

"(d) Section 1(g)(5) of this title shall not apply to halfway houses. No religious beliefs or practices shall be imposed on any halfway house resident, except that religious observances organized by the community residence facility shall be permitted in a halfway house which predicates admissions on religious qualifications in compliance with the terms of section 1(d)(3) of this title.

"(e) Section 6(a) of this title shall apply to halfway houses, except that required meals need not be served to residents but may be otherwise made available to them at reasonable times.

"(f) The requirements of section 115 of Part I of chapter 6 of Title VIII of the Health Regulations of the District of Columbia shall not apply to halfway houses.

**Section 16. Payment of District of Columbia**

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Funds to Community Residence Facilities

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"No funds of the District shall be paid to any community residence facility or to any person residing in a community residence facility for his or her maintenance in that facility unless the community residence facility is licensed by the District under this regulation."

## TITLE II

### AMENDMENTS TO THE HOUSING REGULATIONS OF THE DISTRICT OF COLUMBIA

Sec. 201. The Housing Regulations of the District of Columbia are hereby amended as follows:

(a) In section 1102 (relating to definitions) the words "Personal care home", "Convalescent or nursing home" and "Convalescent" and their respective definitions are deleted.

(b) Chapter 8 (relating to special licensing regulations relating to convalescent or nursing homes and personal care homes) is repealed.

## TITLE III

### AMENDMENTS TO THE BUILDING CODE

### OF THE DISTRICT OF COLUMBIA

Sec. 301. The Building Code of the District of Columbia (DCRR, Title 5A-1) is hereby amended as follows:

(a) Section 201.1 is amended by:

(1) including a definition of "Community residence facility", as defined in section 3 of Title I of the Health Care Facilities Regulation, enacted June 14, 1974 (Reg. No. 74-15), as amended by this act; and

(2) deleting the words "Personal care home" and the definition thereof.

(b) Section 202.9 is amended by:

(1) amending paragraph (1) by inserting at the end thereof a new paragraph to read as follows:  
"Community residence facilities housing more than fifteen (15) residents."

(2) amending paragraph (2) by adding after the words "religious communities" the words "and community residence facilities".

(3) deleting paragraph (5).

(c) Section 616.1 is amended by deleting the words "one and two-family-dwellings, Personal Care Homes, religious community houses for not over fifteen persons" and inserting in lieu thereof the words "buildings in Group L-2, as defined in section 202.9(2) of Article 2 of this code".

(d) Sections 616.2(1) and 616.2(2) are amended by adding after the words "2500 square feet" in each the words:

"except that all sleeping rooms above the street level in a community residence facility which has sleeping rooms above the second floor or which has more than six (6) occupants in sleeping rooms above the street level floor shall have access to two (2) separate means of exit, at least one (1) of which shall consist of an enclosed interior stair, or a fire escape, or a horizontal exit, all so arranged as to provide a safe path of travel to the outside of the building without traversing any corridor or space exposed to an unprotected vertical opening."

(e) Section 616.4 is amended by deleting the words "Personal Care Homes" and inserting in lieu thereof the words "Community Residence Facilities".

#### TITLE IV

#### ESTABLISHMENT OF A CENTRAL REFERRAL BUREAU

Sec. 401. The Health Care Facilities Regulation, enacted June 14, 1974 (Reg. No. 74-15) is hereby further amended by adding a new Title VIII to read as follows:

"TITLE VIII. CENTRAL REFERRAL BUREAU:

"(a) The Mayor shall establish a Central Referral Bureau which shall have the following functions:

"(1) The Central Referral Bureau shall keep and make available to the public an accurate and current listing of all licensed skilled care, intermediate care and community residence facilities in the District, indexed according to their classification, location, size, admission restrictions, the ratings assigned them by the Central Referral Bureau and their most recent occupancy reports.

"(2) The Central Referral Bureau shall develop, in cooperation with District medical associations, nurses' associations, pharmaceutical associations, associations of nursing home directors and community residence facility Residence Directors, mental health associations, associations for retarded persons, senior citizens' associations and any other interested community associations, criteria and a monitoring system for rating licensed facilities based on the excellence with which they perform their recognized functions.

The Central Referral Bureau shall not be responsible for any assessments which are normally the responsibility of District licensing authorities.

"(3) The Central Referral Bureau shall keep on file for public inspection the following records concerning each licensed facility:

"(A) for community residence facilities only, the community residence facility's program statement required under section 3 of title VII;

"(B) the facility's current charges;

"(C) the facility's admission policies;

"(D) the facility's current occupancy level reports;

"(E) the Central Referral Bureau's rating of the facility according to that Bureau's criteria and the basis upon which the rating is made;

"(F) a written summary of any complaints made about the facility to the Central Referral Bureau together with the results of any investigations of the complaints and any responses from a facility concerning the complaints.

"(4)(A) The Central Referral Bureau shall recommend placements in community residence

facilities for all persons seeking such living arrangements who are receiving a supplement to their Supplementary Security Income from the District; who are receiving general public assistance from the District ; who are on convalescent leave from Saint Elizabeth's Hospital, if their hospitalization was paid for in part by the District; and for any other persons to whom the District is responsible for the cost of their care and maintenance. Such recommended placements shall be based on an evaluation of the applicant's physical, mental and social needs made by a team of physicians, nurses, social workers and other professional and paraprofessional personnel made available to the Central Referral Bureau for this purpose.

"(5) The Central Referral Bureau shall be responsible for certifying that a person is eligible for the supplementation of his or her Supplementary Security Income by the government of the District.

"(6) The Central Referral Bureau shall recommend placements in specific skilled care, intermediate care or community residence facilities

for any other person seeking such living arrangements, at the request of the prospective resident, his or her next of kin, doctor, or sponsor. Such recommendations shall be based on evaluations of the prospective resident's physical, mental and social needs as determined by the prospective resident's own physician or the professionals made available to the Central Referral Bureau by the government of the District. For persons having no access to private or institutional social service assistance in actual placement in the facility, the Central Referral Bureau shall arrange such assistance. The Central Referral Bureau shall charge a fee for its service which takes into account the income and resources of the prospective resident.

"(7) The Central Referral Bureau shall advise the public, through the mass media and other reasonable means, of its functions.

"(8) The Central Referral Bureau shall receive complaints from residents, prospective residents, next of kin, sponsors, if any, of residents and other interested persons about skilled, intermediate or community residence facilities and,

after an initial screening of the complaint, shall refer such complaints to the proper District official. The Central Referral Bureau's conclusion as to the validity of any complaints shall be made known in writing to the Residence Director of the facility involved, the resident or sponsor involved, if any, and the appropriate District licensing authority.

"(9) The Central Referral Bureau shall reassess the placement of each resident of a community residence facility who is described in subsection (4) of this section periodically as it deems necessary, but in no case less often than once every two (2) years, for the purpose of determining whether the community residence facility in which the resident resides is able to meet his or her physical, mental and social needs within the limits of its license. The reassessment shall be based on the records required to be kept by the facility under section 2, and section 15(b) when applicable, of Title VII of this regulation, any additional information solicited or received by the Central Referral Bureau from the resident; his or her sponsor, if any; personal physician; and the

Residence Director, and any reevaluation of the resident's physical, social and mental needs made by professionals available to the Central Referral Bureau which that Bureau may request to be made.

"(10) The Central Referral Bureau shall be responsible for the development of training programs as deemed necessary for the administrators, Residence Directors, and other community residence facility staff in order to provide pertinent information concerning the following:

- "(A) nutrition;
- "(B) aspects of mental health and aging;
- "(C) record keeping;
- "(D) social and recreational programming; and
- "(E) administration and financial management.

"(b) Nothing this section shall preclude an institution or a social service agency from maintaining its own placement and monitoring arrangements with community residence facilities.

#### TITLE V

#### MISCELLANEOUS AMENDMENTS TO THE HEALTH CARE FACILITIES REGULATION

Sec. 501. The Health Care Facilities Regulation, enacted June 14, 1974 (Reg.74-15) is hereby further amended as follows:

(a) Title I is amended as follows:

(1) In section 3(23) amend the definition of "Occupational Therapist" to read as follows:

"A person who is a graduate of an occupational therapy curriculum accredited jointly by the Council on Medical Education of the American Medical Association and the American Occupational Therapy Association, or is eligible for the National Registration Examination of the American Occupational Therapy Association, or has two (2) years of appropriate experience as an occupational therapist under the direct supervision of a certified occupational therapist."

(2) In section 3(39) amend the definition of "Resident" to read as follows:

"An individual who, because of physical, mental, familial or social circumstances is residing in an intermediate nursing care facility or a community residence facility."

(b) Section 1(e) of Title II is amended by adding the following sentence at the end of the section:

"The owner of the facility shall be named as the licensee."

(c) Title III is amended as follows:

(1) In section 3(b) delete the period after the word "daily" and add the following language in lieu thereof:

"~~PROVIDED, HOWEVER,~~ That facilities may require proper identification and may impose conditions reasonably necessary to protect the security of the patients and the facilities or to prevent commercial solicitation."

(2) In section 6 add a new subsection (b) to read as follows:

"(b) Notwithstanding any other provision contained in this regulation, where practical difficulties prevent strict compliance with specific provisions of Titles V, VI, and VII of this regulation the Mayor may, in appropriate cases, grant a variance upon a finding that the variance is justified and is consistent with the general intent of this regulation and the welfare

of the residents or patients affected. The variance, and any extension thereof, shall be in writing, shall state the reasons therefor and shall specify the period for which the variance is granted. The procedure to be followed shall conform with those established under sections 19(b), 19(c) and 19(d) of Title V of this regulation, except that the Mayor, if requested, shall hold a hearing before granting the variance. The hearing may be requested by the owner of the facility, a patient or resident of the facility or his or her family, or a community advocacy group such as those for the elderly or the handicapped."

(d) Title V is amended as follows:

(1) Section 1 is amended by:

(A) adding the words "orally or in writing" after the words "patient sponsor" in subsection (e)(3); and

(B) amending subsection (k) as follows:

(i) amending the second sentence in paragraph

(4) to read as follows:

"If clothing is provided by the facility, it shall be appropriate, clean and well-fitting."

(ii) deleting the period after the word "unopened" in paragraph (5) and adding in lieu thereof the following words:

"unless medically contraindicated (as documented by a physician in the patient's medical record) or unless the mail relates to financial affairs for which responsibility has been delegated to the facility in accordance with the facility's patient's rights policy adopted in compliance with 20 C.F.R. sec. 405.1120 (k)."

(iii) adding at the end of paragraph (3) the following language:

"IF married, a patient should be assured privacy for visits by his or her spouse and, if both are in-patients in the facility, they should be permitted to share a room, unless medically contraindicated as documented by the attending physician in the patient's medical records."

(iv) inserting, at the beginning of the last sentence of paragraph (13), the following words:

"Upon admission and thereafter upon request".

(2) Section 2(c) is amended by:

(A) deleting the words "Within 30 days after the end of each calendar year,"; and

(3) inserting after the words "the Administrator" the following language: "shall maintain and make available to the Mayor upon request administrative records concerning the following":.

(3) Section 5 is amended by:

(A) amending paragraph (4) to read as follows:

"(4) Telephone orders shall be given only to a professional nurse, immediately reduced to writing in the patient's clinical record, signed by the nurse and countersigned by the physician in a manner consistent with good medical practice.;" and

(B) amending paragraph (7) by deleting the words "six (6) months" and inserting in lieu thereof the words "twelve (12) months".

(4) Section 6 is amended by:

(A) deleting the staffing table and the last sentence which refers to that table in subsection (e);

(B) amending subsection (f) by:

(i) in the first paragraph inserting a period after the word "restraint", deleting the remainder of that sentence, and inserting the following language in lieu thereof:

"The terms 'restraint' and 'physical restraint' as used in this subsection shall include all physical devices, such as restrictive vests, intended to confine or substantially restrict the movement of a patient to prevent harmful or destructive activities, but these terms shall not be construed to include protective or safety devices, such as siderails, seatbelts, padded mitts, geriatric chairs and other similar devices intended primarily to protect a patient against injuries which might otherwise result because of the patient's physical or mental infirmity. The procedure for monitoring the use of restraints shall be consistent with the following requirements:";

(ii) amending paragraph (3) to read as follows:

"In entering a written order for restraint in a patient's clinical record in accordance with this subsection, a physician shall specify the period for which the restraint may be used and the restraint may not be used after the expiration of that period unless the order has been renewed or a new order is entered by a physician."; and

(iii) deleting the second sentence in paragraph (4).

(C) subsection (j)(1) is amended to read as follows:

"Nursing personnel shall ensure that patients receive the diets prescribed and shall note any dietary problem in the patient's clinical record."

(5) Section 7 is amended by:

(A) amending subsection (a)(2) to read as follows:

"(2) Staffing - The facility shall employ  
sufficient food personnel competent to carry out  
the functions of the dietetic service.";

- (B) deleting subsection (b)(3) and renumbering the two subsequent provisions accordingly; and

(C) adding the following sentence at the end of subsection (c)(3):

"This provision shall not be construed to require review and recordation with respect to normal diets unless a dietary problem occurs."

(6) Section 9 is amended by:

(A) amending the first sentence of subsection (c) to read as follows:

"(C) Facilities providing in-house restorative services may employ restorative services assistants to assist the therapists in performing functions not requiring therapy expertise.;" and

(B) deleting subsection (f) and relettering the subsequent provisions.

(7) Section 9 is amended by:

(A) amending subsection (c)(1)(A) to read as follows:

"(A) Telephone orders shall be given only to a professional nurse, immediately reduced to writing in the patient's clinical records, signed by the nurse and countersigned by the physician in a manner consistent with good medical practice.;"

(B) deleting the language following the word "reported" in subsection (d)(4) and substituting in lieu thereof the following language:

"to the patient's attending physician in a manner consistent with sound nursing procedure and good medical practice.;" and

(C) amending the third sentence in subsection (e) to read as follows:

"Proper storage temperature shall be maintained for the medications.>".

(8) Section 12 is amended by:

(A) deleting the words "in the facility" after the words "social worker" in subsection (b); and

(B) deleting the period after the word "record" in subsection (d) and inserting the following words in lieu thereof:

"at least quarterly in connection with an overall review of the patient care plan.".

(9) Section 13 is amended by:

(A) amending subsection (b) to read as follows:

"(b) Director of Patient Activities - In facilities with fifty (50) or more beds, a Director of Patient Activities shall be employed to plan, organize and direct a daily patient activity program. He or she shall evaluate all patients on admission to determine their therapeutic and diversional needs and shall review such evaluation at least quarterly, noting such review and changes in each patient's clinical record. In facilities with fewer than fifty (50) beds, these functions shall be performed by a designated member of the staff, who shall function with frequent, regularly scheduled consultation with a person who meets the

qualifications for a Director of Patient Activities.";

(B) amending subsection (c) to read as follows:

"(c) Qualifications of Director of Patient Activities - A Director of Patient Activities shall be an occupational therapist, or a therapeutic recreation specialist, or have two (2) years of experience in a social or recreational program, at least one (1) year of which was full-time in a patient activities program in a health facility;" and

(C) deleting subsections (d), (e), (f), and (g);

(10) Section 14 is amended by:

(A) deleting the words "shall be subject to approval by the Commissioner" and inserting in lieu thereof the words "shall be prepared in accordance with the following requirements:" in subsection (d);

(B) deleting subsection (d)(1)(L); and

(C) amending subsection (d)(2) to read as follows:

"(2) Patient Care Plan - In coordination with  
the other patient care services to be provided, a  
written patient care plan shall be developed and  
maintained by the nursing service consonant with  
the attending physician's plan of medical care.  
The plan shall indicate the care to be given, the  
goals to be accomplished, and which professional  
service is responsible for each element of care.  
The plan shall be reviewed, evaluated, and updated  
as necessary by all professional personnel involved  
in the care of the patient.".

(ii) Section 16(b) is amended by:

(A) deleting the period at the end of the  
second sentence in paragraph (1)(A) and inserting  
in lieu thereof:

"unless the facility regularly provides  
transportation for patients and their visitors to  
and from public transportation."; and

(B) amending paragraph (1)(C) to read as  
follows:

"Where possible, facilities shall be located  
away from known sources of loud and irritating  
noises and in areas where interior sounds can be  
maintained at reasonable comfort levels.".

- (12) Section 17 is amended by:
- (A) amending subsection (b) by:
- (i) deleting the words "and to the American National Standards Institute, Inc. Document No. 117.1-1961, "American Standard Specifications for Making Buildings and Facilities Accessible to, Usable by, the Physically Handicapped.\*\*\* in paragraph (1);
- (ii) adding a new paragraph (4) to read as follows:
- "(4) All new construction of skilled care facilities and all additions to and remodelling of existing buildings used for these facilities shall conform to the following minimum requirements for the use of handicapped patients and visitors:
- "(A) A primary entrance is accessible to and usable by the handicapped and walks are graded to the entrance level;
- "(B) A properly designed parking area is reserved close to the building to allow room for a handicapped person to get in and out of an automobile on a surface usable by persons in wheelchairs;

"(C) Floors are of a nonslip finish and, where used by the handicapped, are on a common level or connected by a negotiable ramp;

"(D) Doors used by the handicapped can be opened with a single effort by a person in a wheelchair; and

"(E) Water fountains, public telephones, and bath and toilet rooms are easily accessible to, and usable by, the handicapped."

(3) Amending subsection (c) by:

(i) deleting paragraph (1)(C)(iii);

(ii) deleting the second sentence of paragraph (3)(D);

(iii) amending paragraph (7) as follows:

(a) amending subsection (C) to read as follows:

"(C) Mechanical ventilation shall be provided in accordance with the federal Hill-Burton standards concerning 'Pressure Relationships and Ventilation of Certain Areas of Long-term Care Facilities Other Than Chronic Disease Hospitals', as set forth in the United States Department of Health, Education and Welfare Publication No. (HRA) 76-4000. In areas in which food or drink is

served, a minimum of 7 l/l CFM of outside air per person shall be provided.";

(b) amending the second sentence of subsection (F) to read as follows:

"In all duct and fan installations, noise generation shall not exceed by more than ten (10) decibels the permissible noise level attributable to external sources in the area served.";

(iv) in paragraph (B)(A) inserting in the first sentence, after the words "general noise level", the words "from external sources";

(v) in the last sentence of paragraph (9) deleting the words "in the following minimum ratio" and the table which follows those words and inserting in lieu thereof the words "in accordance with the federal Hill-Burton standards applicable to projects, as set forth in the Department of Health, Education and Welfare Publication No. (HRA) 76-4000."

(13) Section 18 is amended by:

(A) amending subsection (c) by:

(i) amending paragraph (1) by:

(a) adding the following sentence after the first sentence in paragraph (1):

"No patient's bedroom may be located more than one hundred and twenty (120) feet from the nursing station.";

(b) deleting in subsection (A) the words "A separate, fully enclosed room shall be provided for major record-keeping duties.";

(c) deleting subsection (B) and relettering the subsequent subsections accordingly;

(d) amending the new subsection (3) to read as follows:

"(3) At least one (1) toilet room with a lavatory shall be provided for the nursing staff.";

(e) amending the first sentence of the new subsection (C) to read as follows:

"(C) Where unit-dose or a similar medication system is not used, a medication preparation and storage room adjacent to the nursing station shall be provided."; and

(f) deleting the words "and from each patient social recreation space." in the new subsection (E),

(ii) amending paragraph (4) by :

(a) deleting both existing subsections labelled (C);

(b) relettering the second subsection (B) as a new subsection (C);

(c) amending subsection (D) to read as follows:

"(D) Each bedroom shall be equipped for each patient with the following minimum items: a bed appropriate to the patient's physical condition, a bedside table/cabinet with some lockable storage space, a wardrobe with a full length hanging space a minimum of 1'-10" deep and 2" wide, and one (1) chair.;"

(d) deleting in subsection (E) the words "Single bedrooms shall be provided" and inserting in lieu thereof the words "One (1) or more bedrooms shall be designated, when needed.;" and

(e) deleting subsection (F) and relettering the subsequent subsections.

. (iii) amending paragraph (5) by:

(a) amending subsection (A) to read as follows:

"(A) A toilet room shall be directly accessible from each patient's room and from each central bathing area without going through the general corridor. One (1) toilet room may serve

two (2) patient rooms but not more than four (4) beds. The lavatory may be omitted from the toilet room if a lavatory is provided in the patient's room. The minimum dimensions of any room containing only a water closet shall be 3'0" by 6'0.>"; and

(b) deleting in subsection (H) the words "eight (8) patients" and inserting in lieu thereof the words "twenty-five (25) patients".

(iv) amending paragraph (6) by deleting the words "by staff and patients" in the first sentence and inserting in lieu thereof the words "by staff for patients";

(v) deleting paragraph (7) and renumbering the subsequent paragraphs;

(vi) amending paragraph (8) by:

(a) deleting the word "space" wherever it appears in subsection (A) and inserting in lieu thereof the word "spaces";

(b) amending the third sentence in subsection (E) to read as follows:

"The rooms may contain plants and pets of suitable temperament."; and

(c) amending subsection (F) to read as follows:

"(F) At least one (1) social space on each nursing unit shall contain a television set and current periodicals and newspapers."; and

(vii) amending paragraph (9) by:

(a) amending the second sentence in paragraph (9) (relating to public telephones, and presently lettered as subsection (g)) to read as follows:

"At least one (1) telephone shall be installed for this purpose in each unit.";

(b) amending subsection (g)(1) to read as follows:

**(l) Concession Services - Facilities shall**  
provide concession services a minimum of five (5) days a week, which services afford patients an opportunity to purchase various items such as magazines, candies, small gifts, postage stamps, stationery and other supplies. Vending machines shall not be sufficient to comply with the requirements of this provision."; and

(c) deleting subsection (h) and relettering the subsequent subsections.

(e) Title VI is amended as follows:

(1) Section 3(b) is amended to read as follows:

"(b) Staffing - A sufficient number of nursing personnel shall be employed and on duty fully clothed and awake at all times to meet the total needs of the patients. The facility shall provide at least one (1) hour of bedside nursing care per patient on a twenty-four (24)-hour basis, seven (7) days per week, and one (1) additional hour of supervised professional care, including therapeutic, restorative, social work and recreational services per patient per day. Supervised volunteer services may be counted toward the non-nursing requirement. If the facility provides more than one (1) level of health care, the patient/staff ratio shall be determined by the licensed bed capacity in each level of care within the facility. The licensed bed capacity shall be determined by the annual rate of utilization of beds in each level of care which shall be subject to review and change, not to exceed semi-annually, upon the written request of the licensee to the Mayor."; and

(2) Throughout Title VI the word "patient" is deleted and the word "resident" is inserted in lieu thereof; and

(f) Throughout Regulation No. 74-15 the word "Commissioner" is deleted and the word "Mayor" is inserted in lieu thereof.

TITLE VI  
REGULATIONS

Sec. 601. Regulations.

The Mayor is hereby authorized to adopt rules and forms to implement the provisions of the Health Care Facilities Regulation, enacted June 14, 1974 (Reg. No. 74-15), as amended by this act.

TITLE VII  
EFFECTIVE DATE

Sec. 701. Effective Date.

This act shall take effect pursuant to the provisions of section 602(c) of the District of Columbia Self-Government and Governmental Reorganization Act, except that Titles I through IV of this act shall be effective after October 1, 1977.

**RECORD OF OFFICIAL COUNCIL ACTION**

Doeker No: 2-46

First Reading Action: May 31, 1977

VOICE VOTE: Adopted Unanimously (3 abs.) Dixon, Hardy, Wilson

*Robert A. Williams*  
Secretary to the Council

ROLL CALL VOTE:

| COUNCIL MEMBER | ATE | MAY | JUN. | AUG. | COUNCIL MEMBER | ATE | MAY | JUN. | AUG. | COUNCIL MEMBER | ATE | MAY | JUN. | AUG. |
|----------------|-----|-----|------|------|----------------|-----|-----|------|------|----------------|-----|-----|------|------|
| TUCKER         |     |     |      |      | MASON          |     |     |      |      | SPAUULDING     |     |     |      |      |
| HARDY          |     |     |      |      | MOORE, D.      |     |     |      |      | WILSON         |     |     |      |      |
| BARRY          |     |     |      |      | MOORE, J.      |     |     |      |      | WINTER         |     |     |      |      |
| CLARKE         |     |     |      |      | ROLARK         |     |     |      |      |                |     |     |      |      |
| DIXON          |     |     |      |      | SHACKLETON     |     |     |      |      |                |     |     |      |      |

X=Indicates Vote   A=Abstained   N=Not Voting

Secretary to the Council

Amended First Reading Action: \_\_\_\_\_

VOICE VOTE: \_\_\_\_\_

Secretary to the Council

ROLL CALL VOTE:

| COUNCIL MEMBER | ATE | MAY | JUN. | AUG. | COUNCIL MEMBER | ATE | MAY | JUN. | AUG. | COUNCIL MEMBER | ATE | MAY | JUN. | AUG. |
|----------------|-----|-----|------|------|----------------|-----|-----|------|------|----------------|-----|-----|------|------|
| TUCKER         |     |     |      |      | MASON          |     |     |      |      | SPAUULDING     |     |     |      |      |
| HARDY          |     |     |      |      | MOORE, D.      |     |     |      |      | WILSON         |     |     |      |      |
| BARRY          |     |     |      |      | MOORE, J.      |     |     |      |      | WINTER         |     |     |      |      |
| CLARKE         |     |     |      |      | ROLARK         |     |     |      |      |                |     |     |      |      |
| DIXON          |     |     |      |      | SHACKLETON     |     |     |      |      |                |     |     |      |      |

X=Indicates Vote   A=Abstained   N=Not Voting

Secretary to the Council

Final Reading or Emergency Action: June 14, 1977

VOICE VOTE: Adopted Unanimously (3 abs.) Spaulding, DMoore, JMoore

*Robert A. Williams*  
Secretary to the Council

ROLL CALL VOTE:

| COUNCIL MEMBER | ATE | MAY | JUN. | AUG. | COUNCIL MEMBER | ATE | MAY | JUN. | AUG. | COUNCIL MEMBER | ATE | MAY | JUN. | AUG. |
|----------------|-----|-----|------|------|----------------|-----|-----|------|------|----------------|-----|-----|------|------|
| TUCKER         |     |     |      |      | MASON          |     |     |      |      | SPAUULDING     |     |     |      |      |
| HARDY          |     |     |      |      | MOORE, D.      |     |     |      |      | WILSON         |     |     |      |      |
| BARRY          |     |     |      |      | MOORE, J.      |     |     |      |      | WINTER         |     |     |      |      |
| CLARKE         |     |     |      |      | ROLARK         |     |     |      |      |                |     |     |      |      |
| DIXON          |     |     |      |      | SHACKLETON     |     |     |      |      |                |     |     |      |      |

X=Indicates Vote   A=Abstained   N=Not Voting

Secretary to the Council

Docket No:

2-46

Received in the Library JUL 22 1977

JUL 22 1977

Robert Williams

Society of the Comedians

Action of the Mayor: 3 AUG 1977

3 AUG '97

Approved:  Disapproved:  
 Disapproved in part -- Reference  
Document: \_\_\_\_\_  
Budget Accts. \_\_\_\_\_

Recurred Without Action

Enacted without Mayor's Signature \_\_\_\_\_ Secretary to the Council \_\_\_\_\_

#### **General References**

VOICE VOTE:

中華書局影印

17 3011 CALL VOTE

Presented to the President

SUMMARY to the Council

## Action of the Presidents

Society to the Council

### Action of the Presidents

17 ~~Specimen~~ Approved

 Walter's Tuna Seafood

Submitted to the Committee SEC 7 877

SEP 7 1977

President of the U. S.

Senate Action: \_\_\_\_\_  
Resolution Number: \_\_\_\_\_

## Secretary of the Session

House Action: \_\_\_\_\_  
Resolution Number: \_\_\_\_\_