## Rules of Department of Health and Senior Services

Division 30—Division of Health Standards and Licensure Chapter 83—Definition of Terms

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## Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES Division 30—Division of Health Standards and Licensure Chapter 83—Definition of Terms

## 19 CSR 30-83.010 Definition of Terms

PURPOSE: This rule defines terms used in the rules for long-term care facilities as set forth in chapters 13 CSR 15-14, 13 CSR 15-15, 13 CSR 15-17 and 13 CSR 15-18.

PUBLISHER'S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. Therefore, the material which is so incorporated is on file with the agency who filed this rule, and with the Office of the Secretary of State. Any interested person may view this material at either agency's headquarters or the same will be made available at the Office of the Secretary of State at a cost not to exceed actual cost of copy reproduction. The entire text of the rule is printed here. This note refers only to the incorporated by reference material.

- Administrator—An individual person who is in general administrative charge of a facility.
- (2) Certified-medication technician—Shall mean a nursing assistant who has completed a course in medication administration approved by the Division of Aging.
- (3) Chemical restraint—Shall mean any drug, utilized in such a strength or in such a manner as to suppress normal physical or mental activity.
- (4) Communicable disease—Any illness, disease or condition reportable to the Missouri Department of Health as required by 19 CSR 20-20.010 and 19 CSR 20-20.020 is considered, for the context of these rules, a communicable disease.
- (5) Control of medication—Shall mean assuming responsibility for the storage and distribution or administration of medication.
- (6) Designee—Shall mean an individual who has been designated in writing by a resident to handle matters and receive reports related to his/her personal possessions and property.
- (7) Emergency medical procedure—Shall mean those written policies and procedures

which describe the types and degrees of accidents and injuries, how they will be treated, by whom, in which instances the resident's physician will be notified and how quickly.

- (8) Existing or existing licensed facility—Shall mean a long-term care facility which was licensed and in operation or one whose plans were approved prior to June 10, 1981 for a skilled or intermediate care facility or prior to November 13, 1980 for residential care facilities I and II.
- (9) Exit—Shall mean a door leading to the outside or through a horizontal exit in a fire wall to a fire-safe area in the building.
- (10) Fire-resistant construction—For intermediate care facilities and skilled nursing facilities, fire-resistant construction shall mean that a facility meets the specifications for two (2)-hour fire-resistive construction or protected noncombustible construction as given in the *National Fire Protection Association Code 220*. The definition of fire-resistant construction for residential care facilities I and II is given in 13 CSR 15-15.022(42).
- (11) Hazardous area—Shall mean furnace rooms other than electric forced air furnaces, laundries, kitchens, maintenance shops and storage rooms of over one hundred (100) square feet and any areas which contain combustible materials which will be either easily ignited, burn with an intense flame or result in the production of dense smoke and fumes.
- (12) Level I medication technician—Shall mean an individual who has completed a course approved by the Division of Aging in medication administration in a residential care type facility.
- (13) Long-term care facility—Shall mean a facility that is licensed either solely or in combination as a skilled nursing facility, an intermediate care facility, a residential care facility II or a residential care facility I.
- (14) Major fraction thereof—Shall mean anything over fifty percent (50%) of the number of occupied beds.
- (15) Major remodeling—Shall mean any remodeling of a long-term care facility which involves the addition of resident-use rooms, which affects fire safety or the structure of the building.
- (16) Multistory building—Shall mean any building with more than one (1) floor entirely above the grade. A floor that is partially

below grade will be counted as the first story to determine sprinkler requirements only if it contains resident sleeping rooms.

- (17) New or newly licensed facility—Shall mean a long-term care facility whose plans are approved or which is licensed after June 10, 1981 for a skilled nursing or intermediate care facility or after November 13, 1980 for residential care facility I or II.
- (18) Nursing personnel—Shall include any employee, including a nurse's aid or an orderly, who provides or assists in the provision of direct resident health care services.
- (19) Operator—shall mean any person licensed or required to be licensed under the provisions of sections 198.003–198.096, RSMo, in order to establish, conduct or maintain a facility. The term person required to be licensed shall mean any person having the following, as determined by the division:
- (A) Ultimate responsibility for making and implementing decisions regarding the operation of the facility;
- (B) Ultimate financial control of the operation of a facility; and
- (C) Legal right to possession of the premises on which a facility is located.
- (20) Person—Shall mean any individual, or any entity, including, but not limited to, a corporation, partnership, association, non-profit organization, fraternal organization, church or political subdivision of the state of Missouri.
- (21) Physical restraint—Shall mean anything which serves to inhibit physical mobility including, but not limited to, any type of strap or harness or any locked door which is not customarily locked as a matter of security.
- (22) Physician—Shall mean an individual licensed to practice medicine in the state of Missouri under chapter 334, RSMo.
- (23) Premises—Shall mean any structure(s) that are in close proximity one to the other and which are located on a single piece of property.
- (24) Protective oversight—Shall mean having continuous awareness of a resident's whereabouts, the ability to intervene if a crisis arises for the resident, supervision of nutrition or medication or actual provision of care and a twenty-four (24)-hour responsibility for the welfare of the resident.

- (25) Qualified dietitian—Shall mean an individual who is registered by the American Dietetic Association or who is eligible for registration.
- (26) Qualified therapist—Shall mean an individual who is either registered or is eligible for registration by the national accrediting association for that therapy or, if applicable, is licensed by the state of Missouri for the practice of the profession in which s/he is engaged.
- (27) Qualified therapy assistant—Shall mean an individual who would be qualified as an occupational therapy or physical therapy assistant as outlined in CFR 405.1101.
- (28) Responsible party—Shall mean an individual who has been designated in writing by the resident to handle matters and receive reports related to his/her general condition.
- (29) Self-administration of medication—Shall mean the act of actually taking or applying medication to oneself.
- (30) Self-control of medication—Shall mean assuming responsibility for the storage and administration of medication for oneself.
- (31) Skilled nursing care—Shall mean services furnished pursuant to physicians' orders which require the skills of licensed nurses and which are provided directly by or under the on-site supervision of these personnel. Examples of skilled nursing care may include, but are not limited to: administration of levine tube or gastrostomy tube feedings; nasopharyngeal and tracheotomy aspiration; insertion of medicated or sterile irrigation solutions and replacement of catheters; administration of parenteral fluids; inhalation therapy treatments; administration of other treatments requiring aseptic technique; and administration of injectable medication other than insulin.

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\*Original authority: 198.009, RSMO 1979, amended 1993, 1995.