

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

BUREAU OF COMMUNITY AND HEALTH SYSTEMS

HOMES FOR THE AGED

Filed with the secretary of state on

These rules become effective immediately after filing with the secretary of state unless adopted under section 33, 44, or 45a(9) of the administrative procedures act of 1969, 1969 PA 306, MCL 24.233, 24.244, or 24.245a. Rules adopted under these sections become effective 7 days after filing with the secretary of state.

(By authority conferred on the department of licensing and regulatory affairs by section 427 of the Executive organization act of 1965, 1965 PA 380, MCL 16.527, section 2233 of the public health code, 1978 PA 368, MCL 333.2233, and Executive Reorganization Order Nos. 1996-1, 1996-2, 2003-1, and 2015-1, MCL 330.3101, 445.2001, 445.2011, and 400.227)

R 325.1901, R 325.1922, R 325.1923, R 325.1932, R 325.1964, R 325.1967, and R 325.1977 of the Michigan Administrative Code are amended, R 325.1911a and R 325.1918 are added, and R 325.1969 is rescinded, as follows:

R 325.1901 Definitions.

Rule 1. As used in these rules:

(a) "Act" means the public health code, 1978 PA 368, MCL 333.1101 to 333.25211.

(b) "Activities of daily living" means activities associated with eating, toileting, bathing, grooming, dressing, transferring, mobility, and medication management.

(c) "Admission policy" means a home's program statement of its purpose, eligibility requirements, and application procedures for admission.

(d) "Apartment-style resident room" means a resident unit with a living space and 1 or more multiple distinct bedrooms.

~~(de)~~ "Assistance" means help provided by a home or an agent or employee of a home to a resident who requires help with activities of daily living.

~~(ef)~~ "Authorized representative" means that person or agency that has been granted written legal authority by a resident to act on behalf of the resident or is the legal guardian of a resident.

(g) "Bedroom" means a single room containing a bed and is intended for a resident or residents sleeping with a wall that separates the sleeping space from the living space.

(h) "Co-sleeping" means 2 residents sharing a bed intended for 2 individuals located in a bedroom utilizing 2 licensed beds.

(fi) "Department" means the department of licensing and regulatory affairs.

(gj) "Director" means the director of the department.

(~~hk~~) "Discharge policy" means a home's written statement of the criteria and procedures by which a resident is discharged from the home.

(~~hl~~) "Elopement" means a resident who has a service plan that requires notice or arranged supervision to leave the facility and is absent without notice or supervision.

(~~jm~~) "Home" means a home for the aged as **that term is** defined in section 20106(~~3~~) of the act, MCL 333.20106.

(~~kn~~) "Incident" means an intentional or unintentional event including, but not limited to, elopements and medication errors, ~~where~~ **if** a resident suffers physical or emotional harm.

(~~lo~~) "Licensed ~~health care~~ **healthcare** professional" means an individual who is licensed under article 15 of the act, MCL 333.16101 to 333.18838, and who is operating within the scope of ~~his or her~~ **the individual's** license.

(~~mp~~) "Major building modification" means an alteration of walls that creates a new architectural configuration or revision to the mechanical or electrical systems that significantly revise the design of the system or systems. Normal building maintenance, repair, or replacement with equivalent components are not considered major building modifications. A change in room function ~~shall~~ **does** not cause a conflict with these rules.

(~~nq~~) "Medication management" means assistance with the acquisition and administration of a resident's prescribed medication.

(~~or~~) "Program statement" means a written description of the home's overall philosophy and mission reflecting the needs of residents and services provided to residents. A home that represents to the public that it provides residential care or services, or both, to individuals with Alzheimer's disease or a related condition shall include in its program statement the information required by section 20178 of the act, MCL 333.20178.

(~~ps~~) "Protection" means the continual responsibility of the home to take reasonable action to ensure the health, safety, and well-being of a resident as indicated in the resident's service plan, including protection from physical harm, humiliation, intimidation, and social, moral, financial, and personal exploitation while on the premises, while under the supervision of the home or an agent or employee of the home, or when the resident's service plan states that the resident needs continuous supervision.

(~~qt~~) "Resident" means an individual who is 55 years of age or older, or an individual under the age of 55 who has been admitted through a waiver of the director pursuant to section 21311(3) of the act, MCL 333.21311.

(~~ru~~) "Resident admission contract" means a written agreement between the home and the resident or the resident's authorized representative that specifies the services to be provided, the fees to be charged, including all fees related to admission such as deposits, admission fees, advance care payments, application fees and all other additional fees, and the home's policies related to the admission and retention of a resident.

(~~sv~~) "Room and board" means the provision of housing and meals to meet the needs of the resident.

(~~tw~~) "Service plan" means a written statement prepared by the home in cooperation with a resident, the resident's authorized representative, or the agency responsible for a resident's placement, if any, that identifies the specific care and maintenance, services, and resident activities appropriate for the individual resident's physical, social, and behavioral needs and well-being, and the methods of providing the care and services while taking into account the preferences and competency of the resident.

(x) "Studio-style resident room" means a resident room that does not have a distinct resident bedroom and the living and sleeping spaces are combined.

(y) "Supervision" means guidance of a resident in the activities of daily living, and includes all of the following:

(i) Reminding a resident to maintain ~~his or her~~ the resident's medication schedule in accordance with the instructions of the resident's licensed ~~health care~~ healthcare professional as authorized by section 17708(2) of the act, MCL 333.17708.

(ii) Reminding a resident of important activities to be carried out.

(iii) Assisting a resident in keeping appointments.

(iv) Being aware of a resident's general whereabouts as indicated in the resident's service plan, even though the resident may travel independently about the community.

(v) Supporting a resident's personal and social skills.

R 325.1911a Survey and evaluation process.

Rule 11a. (1) A precicensure survey must be scheduled and announced. All other licensure surveys and complaint investigations must be unannounced.

(2) A licensure survey or complaint investigation may be conducted by the department during any hours of operation of the home.

(3) An applicant or licensee shall provide access to the home and relevant documents that are required to be maintained for the department to evaluate compliance with the act and these rules.

(4) If a violation is identified by the department, either through a licensure survey or a complaint investigation, the home has 15 days to submit a corrective action plan, when requested by the department. The submitted corrective action plan must contain all of the following components:

(a) The actions that will be taken to correct the violation and achieve compliance.

(b) The staff responsible for implementing the actions.

(c) The timeline for the implementation and completion of the actions.

(d) The actions that will be taken to ensure continued compliance with the law or rules.

(5) The submitted corrective action plan must be approved by the department. Based on the submitted corrective action plan, the department shall determine if a revisit is necessary to determine compliance.

(6) Failure to submit a corrective action plan may result in additional action by the department under sections 20165, 20166, and 20168 of the act, MCL 333.20165, 333.20166, and 333.20168.

(7) A department employee shall obtain the verbal consent of the patient or the patient's representative before observing direct care and treatment of a patient.

R 325.1918 Complaint filed with department; procedure.

Rule 18. (1) When a complainant files a complaint with the department pursuant to section 20176 of the act, MCL 333.20176, it must be filed within 12 months after the alleged violation. If the complaint is not filed within 12 months after the alleged violation, the department may investigate the complaint if the complainant shows good cause for the delay in filing the complaint.

(2) A complaint must be submitted using the department's hotline or in writing using the United States Postal Service, email, online form, fax, or other method provided for on the department's website, www.michigan.gov/lara.

(3) The complaint must be limited to matters involving an alleged violation of an applicable law or rule affecting the complainant or, in the case of a public interest group, affecting the public or a portion of the public.

(4) A complaint may be filed anonymously.

(5) The department shall review and, if warranted, investigate a filed complaint.

(6) An investigation of an allegation or allegations is not required if any of the following are true:

(a) The allegation or allegations do not violate a law or rule regulated by the department.

(b) The allegation or allegations do not provide specific information to allow the department to investigate the allegation or allegations. Specific information may include, but is not limited to, identification of the home, the resident or residents involved, the staff involved, and the dates, times, or location within the home.

(c) The allegation or allegations have been previously reviewed or investigated within the last 6 months.

(d) The allegation or allegations of abuse, neglect, or exploitation have been investigated by adult protective services of the department of health and human services with no substantiated findings and the allegation or allegations do not have other alleged law or rule violation.

(7) Utilization of subrule (6) of this rule is at the sole discretion of the department and not subject to appeal.

(8) The department shall notify each complainant on review if the complaint is being closed without investigation or if additional information is needed to investigate the complaint, except when a complaint is submitted anonymously. Notification may be made by letter, phone, or email.

(9) The department shall notify the home of the nature of the complaint no earlier than the initiation of an investigation through a desk review or a visit to the home.

(10) The department shall provide the complainant with the findings of the investigation, or instructions for how to obtain the written findings, no later than 30 days after the conclusion of the complaint process. This subrule does not apply when a complaint is filed anonymously.

R 325.1922 Admission and retention of residents.

Rule 22. (1) A home shall have a written resident admission contract, program statement, admission and discharge policy, and a resident's service plan for each resident.

(2) The admission policy shall ~~shall~~ **must** specify all of the following:

(a) That at the time of admission, the home shall document the needs of each individual seeking admission. The documented needs shall ~~shall~~ **must** be used to develop the resident's service plan.

(b) That a home shall not accept an individual seeking admission unless the individual's needs can be adequately and appropriately met within the scope of the home's program statement.

(c) That the individual seeking admission and ~~his or her~~ **the individual's** authorized representative, if any, shall participate in the development of the individual's service plan.

(d) That the home has developed and implemented a communicable disease policy governing the assessment and baseline screening of residents.

(3) At the time of an individual's admission, a home or the home's designee shall complete a written resident admission contract between the resident, the resident's authorized representative, or both, and the home. The resident admission contract ~~shall~~ **must**, at a minimum, specify all of the following:

(a) That the home shall provide room, board, protection, supervision, assistance, and supervised personal care consistent with the resident's service plan.

(b) The services to be provided and the fees for the services.

(c) The notice to be provided by the home to the resident, the resident's authorized representative, or both, ~~upon~~ any change in fees.

(d) The transportation services that are provided, if any, and the fees for those services.

(e) The home's admission and discharge policy.

(f) The home's refund policy.

(g) The resident's rights and responsibilities, which ~~shall~~ **must** include those rights and responsibilities specified in section 20201(2) and (3) **of the act**, MCL 333.20201, ~~(2) and (3) of the public health code~~ and section 20202 **of the act**, MCL 333.20202, ~~of the code~~.

(4) If there is a change in a term or condition in the written resident admission contract, ~~then~~ the home or home's designee shall review the change with the resident and the resident's authorized representative, if any.

(5) A home shall update each resident's service plan ~~at least~~ **not less than** annually or if there is a significant change in the resident's care needs. Changes ~~shall~~ **must** be communicated to the resident and ~~his or her~~ **the resident's** authorized representative, if any.

(6) A home shall require an individual who, at the time of admission, is under the care of a licensed ~~health-care~~ **healthcare** professional for ongoing treatments or prescription medications that require the home's intervention or oversight, to provide a written statement from that licensed ~~health-care~~ **healthcare** professional completed within the 90-day period before the individual's admission to the home. The statement ~~shall~~ **must** list those treatments or medications for the purpose of developing and implementing the resident's service plan. If this statement is not available at the time of an emergency admission, ~~then~~ the home shall require that the statement be obtained not later than 30 days after admission.

(7) An individual admitted to residence in the home shall have evidence of initial tuberculosis (**TB**) screening on record in the home that was performed within 12 months before admission. Initial screening may consist of an intradermal skin test, a blood test, a chest x-ray, or other methods recommended by the public health authority. The screening type and frequency of routine tuberculosis (~~TB~~) testing ~~shall~~ **must** be determined by a risk assessment as described in the 2005 Morbidity and Mortality Weekly Report (MMWR) "Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005" (<http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf>), Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. ~~and the 2019 update to these recommendations as described in~~

the 2019 MMWR “Tuberculosis Screening, Testing, and Treatment of U.S. Health Care Personnel: Recommendations from the National Tuberculosis Controllers Association and CDC, 2019”

(<http://dx.doi.org/10.15585/mmwr.mm6819a3>.) These guidelines are adopted by reference and available free of charge at the links specified in this subrule. A copy of these guidelines is available for inspection and distribution from the Bureau of Community and Health Services, Department of Licensing and Regulatory Affairs, at 611 West Ottawa Street, P.O. Box 30664, Lansing, Michigan 48909 at a cost of 15 cents per page as of the time of the adoption by reference of these guidelines. A home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not have to conduct annual TB testing for residents.

(8) A home shall not retain a resident if the resident has harmed ~~himself or herself~~ **the resident** or others, or has demonstrated behaviors that pose a risk of serious harm to ~~himself or herself~~ **the resident** or others, unless the home has the capacity to manage the resident's behavior.

(9) A home shall not admit a resident who requires continuous nursing care services of the kind normally provided in a nursing home as specified in sections 21711(3) **and 21715(2)** of the ~~code act~~, MCL 333.21711(3), and ~~section 21715(2), MCL 333.21715.(2), of the code.~~

(10) A home shall not retain a resident who requires continuous nursing care services of any kind normally provided in a nursing home as specified in sections 21711(3) **and 21715(2) of the act**, MCL 333.21711(3), and ~~section 21715(2), MCL 333.21715.(2), of the code~~ unless the home meets the provisions of section 21325 **of the act**, MCL 333.21325, ~~of the code~~ or the individual is enrolled in and receiving services from a licensed hospice program or a home health agency.

(11) In accordance with section 20201(3)(e) of the ~~code act~~, MCL 333.20201(3) ~~(e)~~, a home's discharge policy ~~shall~~ **must** specify that a home for the aged resident may be transferred or discharged for any of the following reasons:

- (a) Medical reasons.
- (b) ~~His or her~~ **The resident's** welfare or that of other residents.
- (c) For nonpayment of ~~his or her~~ **the resident's** stay.
- (d) Transfer or discharge sought by **the** resident or authorized representative.

(12) The reason for transfer or discharge ~~shall~~ **must** be documented in the resident record.

(13) A home shall provide ~~a~~ **the** resident and ~~his or her~~ **the resident's** authorized representative, if any, and the agency responsible for the resident's placement, if any, with a 30-day written notice before discharge from the home. The written notice ~~shall~~ **must** consist of all of the following:

- (a) The reasons for discharge.
- (b) The effective date of the discharge.
- (c) A statement notifying the resident of the right to file a complaint with the department. The provisions of this subrule do not preclude a home from providing other legal notice as required by law.

(14) If the department finds that the resident was discharged in violation of these rules or the home's discharge policy, ~~then~~ the resident may return to the first available bed in the home that can meet the resident's needs as identified in the resident's service plan.

(15) A home may discharge a resident before the 30-day notice if the home has determined and documented that either, or both, of the following exist:

(a) Substantial risk to the resident due to the inability of the home to meet the resident's needs or due to the inability of the home to ~~assure~~ **ensure** the safety and well-being of the resident, other residents, visitors, or staff of the home.

(b) A substantial risk or an occurrence of the destruction of property.

(16) A home that proposes to discharge a resident for any of the reasons listed in subrule (15) of this rule shall take all of the following steps before discharging the resident:

(a) The home shall notify the resident, the resident's authorized representative, if any, and the agency responsible for the resident's placement, if any, not less than 24 hours before discharge. The notice ~~shall~~ **must** be verbal and issued in writing. The notice of discharge ~~shall~~ **must** include all of the following information:

(i) The reason for the proposed discharge, including the specific nature of the substantial risk.

(ii) The alternatives to discharge that have been attempted by the home, if any.

(iii) The location ~~to which~~ **where** the resident ~~will~~ **is to** be discharged.

(iv) The right of the resident to file a complaint with the department.

(b) The department and adult protective services shall be notified not less than 24 hours before discharge ~~in the event of~~ **if** either of the following ~~occur~~:

(i) A resident does not have an authorized representative or an agency responsible for the resident's placement.

(ii) The resident does not have a subsequent placement.

(c) The notice to the department and adult protective services ~~shall~~ **must** include all of the following information:

(i) The reason for the proposed discharge, including the specific nature of the substantial risk.

(ii) The alternatives to discharge that have been attempted by the home, if any.

(iii) The location ~~to which~~ **where** the resident ~~will~~ **is to** be discharged, if known.

(d) If the department finds that the resident was improperly discharged, ~~then~~ the resident may return to the first available bed in the home that can meet the resident's needs as identified in the resident's service plan.

(e) The resident shall not be discharged until a subsequent setting that meets the resident's immediate needs is located.

R 325.1923 Employee's health.

Rule 23. (1) ~~An person~~ **individual** on duty in the home shall be in good health. The home shall develop and implement a communicable disease policy governing the assessment and baseline screening of employees. A record ~~shall~~ **must** be maintained for each employee; ~~which shall~~ **and** include results of baseline screening for communicable diseases. Records of accidents or illnesses occurring while on duty that place others at risk ~~shall~~ **must** be maintained in the employee's file.

(2) A home shall provide initial tuberculosis TB screening at no cost for its employees. New employees shall be screened within 10 days of ~~after~~ hire and before occupational exposure. The screening type and frequency of routine tuberculosis (TB) testing shall **must** be determined by a risk assessment as described in the 2005 MMWR “Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005” (<http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf>), Appendices B and C, ~~and any subsequent guidelines as published by the centers for disease control and prevention.~~ **and the 2019 update to these recommendations as described in the 2019 MMWR “Tuberculosis Screening, Testing, and Treatment of U.S. Health Care Personnel: Recommendations from the National Tuberculosis Controllers Association and CDC, 2019”** (<http://dx.doi.org/10.15585/mmwr.mm6819a3>.) **These guidelines are adopted by reference and available free of charge at the links specified in this subrule. A copy of these guidelines is available for inspection and distribution from the Bureau of Community and Health Services, Department of Licensing and Regulatory Affairs, at 611 West Ottawa Street, P.O. Box 30664, Lansing, Michigan 48909 at a cost of 15 cents per page as of the time of the adoption by reference of these guidelines.** ~~Each~~ A home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not need to conduct annual TB testing for employees.

(3) Employees with past documented positive TB skin test results or who have received treatment for tuberculosis TB infection in the past are exempt from the TB skin test. Employees with a past documented positive TB skin result, who have never been treated for TB infection, shall be screened for active symptoms of TB disease and the need for evaluation by a qualified ~~health-care~~ **healthcare** professional to determine if treatment for TB infection is indicated.

(4) TB skin tests, ~~as well as~~ **and** post-exposure follow-up and treatment evaluations, shall **must** be offered at no cost to the employees at times and locations convenient to the employees. A qualified ~~health-care~~ **healthcare** professional shall perform the reading and interpretation of the TB testing.

R 325.1932 Resident’s medications.

Rule 32. (1) A service plan must identify prescribed medication to be self-administered or managed by the home.

(2) Prescribed medication managed by the home shall **must** be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed **healthcare** ~~health care~~ professional.

(3) Staff who supervise the administration of medication for residents who do not self-administer shall comply with all of the following:

- (a) Be trained in the proper handling and administration of the prescribed medication.
- (b) Complete an individual medication log that contains all of the following information:
 - (i) The name of the prescribed medication.
 - (ii) The prescribed required dosage and the dosage that was administered.
 - (iii) Label instructions for use of the prescribed medication or any intervening order.

(iv) The time when the prescribed medication is to be administered and when the medication was administered.

(v) The initials of the individual who administered the prescribed medication.

(vi) A record if the resident refuses to accept prescribed medication and notification as required in subdivision (c) of this subrule.

(vii) A record of the reason for administration of a prescribed medication that is on an as-needed basis.

(c) Contact the appropriate licensed ~~health-care~~ **healthcare** professional when the prescribed medication has not been administered in accordance with the label instruction, an order from a ~~health-care~~ **healthcare** professional, medication log, or a service plan.

The frequency of contact with the appropriate licensed healthcare professional, as required by this subdivision, can be modified for resident refusal based on written instructions from the licensed healthcare professional.

(4) If a resident requires prescription or over-the-counter medication or medications while out of the home, and **the** medication or medications are not identified as self-administered, **the** staff responsible for the medication management shall ensure that the resident, or the person that assumes responsibility for the resident, has all appropriate information, medication, and instructions.

(5) Prescribed medication that is no longer required by a resident must be properly disposed of consistent with the policy established by the home and manufacturer guidelines.

(6) For a resident who is identified as self-administered in ~~his or her~~ **the resident's** service plan, the home ~~must~~ **shall** have a policy to offer a secured method of storage for medications if desired by the resident and to notify the applicable ~~health-care~~ **healthcare** professional or legal representative if there is a change in ~~a-the~~ resident's capacity to self-medicate.

R 325.1964 Interiors.

Rule 64. (1) A building ~~shall~~ **must** be of safe construction and ~~shall~~ be free from hazards to residents, personnel, and visitors.

(2) A part of a building in use as a home ~~shall~~ **must** not be used for any purpose **that** ~~which~~ interferes with the care, well-being, and safety of residents, personnel, and visitors.

(3) An occupied room ~~shall~~ **must** have a minimum ceiling height of 7 feet, 6 inches, except as otherwise provided in ~~R-325.1964~~ **subrules (4) and (5) of this rule.**

(4) **The floor** ~~Floor~~ area under a part of a drop or slant ceiling ~~which~~ **that** is less than 6 1/2 feet from the floor ~~shall~~ **must** not be used in computing the usable floor space or maximum number of beds allowed in any sleeping room.

(5) A bed and the working space around a bed ~~shall~~ **must** not be directly under a part of a drop or slant ceiling that is less than 6 1/2 feet from the floor.

(6) Each area of the home ~~shall~~ **must** be provided with lighting commensurate with the use made of each area and in accordance with generally recognized standards.

(7) A stairway or ramp ~~shall~~ **must** have a handrail on both sides.

(8) A room used for living or sleeping purposes ~~shall~~ **must** have a minimum total window glass area on outside walls equal to 10% of the required floor area of the room.

Forty-five percent of the window glass area ~~shall~~ **must** be openable unless the room is artificially ventilated.

(9) Ventilation ~~shall~~ **must** be provided throughout the facility in the following manner:

(a) A room ~~shall~~ **must** be provided with a type and amount of ventilation that ~~will~~ controls odors and contributes to the comfort of occupants.

(b) ~~Bathing rooms, beauty shops, toilet rooms,~~ **Soiled** linen rooms, janitor closets, and trash holding rooms ~~shall~~ **must** be provided with a minimum of 10 air changes per hour of continuously operated exhaust ventilation that provide discernable air flow into each of these rooms.

(c) Resident bathrooms, public bathrooms, and beauty shops must be provided with an exhaust fan operated by switch, timer, or other mechanism allowing occupant control over the use of the exhaust fan. For semiprivate resident bathrooms and public bathrooms, the exhaust fan, if it is operated by a switch, must include a timer set for a minimum of 1 hour of operation.

(10) A resident room ~~shall~~ **must** open to a corridor, lobby, or day room. Traffic to and from any room ~~shall~~ **must** not be through a sleeping room, kitchen, bathroom, toilet room, or storage room, except ~~where~~ **if** a toilet room, bathroom, or storage room opens directly off the room or rooms which it serves.

(11) A doorway, passageway, corridor, hallway, or stairwell ~~shall~~ **must** be ~~kept~~ **maintained** free from obstructions at all times.

(12) A floor, wall, or ceiling ~~shall~~ **must** be covered and finished in a manner that ~~will~~ ~~permit~~ **allows** maintenance of a sanitary environment.

(13) A basement ~~shall~~ **must** be ~~of such construction~~ **constructed so** that it can be maintained in a dry and sanitary condition.

(14) A minimum of 15 square feet of floor space per licensed bed ~~shall~~ **must** be provided for day room, dining, recreation, and activity purposes.

(15) A basement or cellar ~~shall~~ **must** not be used for sleeping or living quarters, except that recreation and activity space may be provided in a basement in addition to the 15 square feet per licensed bed required in subrule (14) of this rule.

(16) A room or compartment housing a water closet ~~shall~~ **must** have a minimum width of 3 feet.

(17) Emergency electrical service ~~shall~~ **must** provide, at a minimum, battery-operated lighting units sufficient to light corridors and exits.

(18) A home shall provide functionally separate living, sleeping, dining, handwashing, toilet, and bathing facilities for employees and members of their families who live on the premises.

R 325.1967 Resident rooms.

Rule 67. (1) ~~A resident bedroom shall have the floor surface at or above grade level along exterior walls with windows.~~ **A resident room must have all of the following:**

(a) A floor surface at or above grade level along exterior walls with a window or windows.

(b) A combined minimum total window glass area on outside walls equal to 10% of the required floor area of the room for space used for living or sleeping purposes.

(c) Not less than 2 duplex electrical receptacles.

(d) A licensed capacity not exceeding 6 residents for an apartment-style resident room.

(e) A licensed capacity not exceeding 4 residents for a studio-style resident room.

(f) A minimum of 5 square feet of floor space per resident for wardrobe and closet in addition to other requirements for usable floor space per resident.

(g) Be open to a corridor, lobby, or day room.

(h) Traffic flow to and from any room that is not through a sleeping room, kitchen, bathroom, toilet room, or storage room, except if a toilet room, bathroom, or storage room opens directly off the room or rooms which it serves.

(2) A bathing or toilet room or vestibule must not be included in usable floor space.

~~(2-3) A single resident room shall have at least 80 square feet of usable floor space. A studio-style resident room must meet either of the following:~~

(a) A single resident room must have a minimum of 120 square feet of usable floor space.

(b) For multiple residents, a room must have a minimum of 80 square feet of usable floor space per resident.

~~(4) A multi-bed resident room shall have at least 70 square feet of usable floor space per licensed bed. An apartment-style resident room must contain not less than 120 total square feet for a single resident or not less than 80 total square feet of space per resident when there is more than 1 resident and must meet either of the following:~~

(a) An apartment-style resident room bedroom for 1 resident must have a bedroom with not less than 75 square feet of usable space, including a 3-foot clearance on 1 side of the bed and at the foot of the bed.

(b) An apartment-style resident room bedroom for co-sleeping residents must have a bedroom not less than least 110 square feet of usable space, including a 3-foot clearance on both sides of the bed and at the foot of the bed.

~~(4-5) A toilet room or closet shall not be included in usable floor space. Residents may have their own rooms arranged in a manner that is comfortable and reflects their preferences if the arrangement does not create a fire safety risk or unsanitary conditions.~~

~~(5-6) A multi-bed resident room shall be designed to allow for a 3-foot clearance between beds. The number of licensed beds assigned to a studio-style resident room and apartment-style resident room licensed before the effective date of these rules, must not be held to the square footage requirements specified in this rule unless major building modifications involve that resident room.~~

~~(6-7) Residents may have their own rooms arranged in a manner that is comfortable and reflects their preferences, provided that the arrangement does not create an unreasonable fire safety risk or unsanitary conditions. Facilities in existence as of the effective date of this rule shall be held to the space requirement of 100 square feet of usable floor space for an existing single resident room and 80 square feet of usable floor space per licensed bed in an existing multiple bed resident room.~~

~~(7) A resident room shall have at least 2 duplex electrical receptacles.~~

~~(8) Each resident occupied floor shall have a janitor's closet.~~

~~Rule 69. (1) A new construction, addition, major building change, or conversion after November 14, 1969 shall provide all of the following:~~

~~(a) A resident room with not more than 4 beds.~~

~~(b) A minimum of 100 square feet of usable floor space in single resident rooms.~~

~~(c) A minimum of 80 square feet of usable floor space per licensed bed in multi-bed resident rooms.~~

~~(d) A resident room with a minimum of 5 square feet of floor space per licensed bed for wardrobe and closet in addition to other requirements for usable floor space per licensed bed. A bathing or toilet room or vestibule shall not be included in usable floor space.~~

R 325.1977 New construction, addition, major building modification, or conversion after effective date of these rules.

Rule 77. (1) Exhaust ventilation ~~shall~~ **must** be designed as central systems with the fan at the building exterior and ~~at least~~ **not less than** 10 feet from all doors, operable windows, and domestic outside air intakes. **Central exhaust is not required for the resident bathrooms, public bathrooms, and beauty shops.**

(2) Facilities for dispensing of medications ~~shall~~ **must** be designed to be under the control of responsible residents or designated staff. Central dispensing locations ~~shall~~ **must** keep medications locked and **be** equipped with a handwashing **sink**, work counter, and storage facilities.

(3) Bathing facilities ~~shall~~ **must** have access to **a** handwashing **sink**, toilet, and bathing supply storage facilities without entering a common corridor.