74-10 Regulation No. \_



May 17, 1974 Enactment Date

# Regulation

of the

#### District of Columbia

TITLE

AMENDMENT TO THE MOTOR VEHICLE CODE TO PERMIT THE TRANSFER OF MOTOR VEHICLE IDENTIFICATION TAGS BETWEEN MOTOR VEHICLES OWNED BY THE SAME INDIVIDUAL

Councilman Jerry A. Moore, Jr. Presents the following regulation:

WHEREAS, the District of Columbia Council is authorized pursuant to paragraphs (286) and (288) of section 402 of Reorganization Plan No. 3 of 1967 to prescribe rules and regulations for the registration of motor vehicles under D. C. Code, sec. 40-102; and

4 5 6

1

3

WHEREAS, the District of Columbia Council finds that it is necessary to amend certain regulations in Title 32, District of Columbia Rules and Regulations, relating to the transfer of identification tags.

8 9 10

7

NOW, THEREFORE, BE IT ENACTED by the District of Columbia Council that:

11 12

Section 1. Title 32 of the District of Columbia Rules and Regulations (Motor Vehicle Regulations for the District of Columbia), is hereby amended:

13 14

(1) by amending subsection (a) of section 3.309 to read as follows:

15 16 17

18

19

20 21

"(a) A registrant who acquires a vehicle and desires the transfer of identification tags from a vehicle currently registered in his name to the newly-acquired vehicle shall, within five (5) business days after such acquirement, request the Director to prepare an application to transfer the valid registration and owner's identification tags to the newly-acquired vehicle."; and

22 23 24

(2) by striking out in subsections (b) and (c) of section 3.309 the word

		RE	CC	ORD OF C	0	UN	CI	L	V	OTE					
COUNCILMAN	AYE NAY	N.V. A.B.	R.A.	COUNCILMAN	AYE	NAY	N.V.	A.B.	R.A.	COUNCILMAN	AYE	NAY	N.V.	A.B.	D A
NEVIUS	X			FOSTER	X					PARKER	X				к.д.
TUCKER	X			MEYERS	X					ROBINSON	X		_	-	
FORD	X			MOORE	X					SELDEN	X				
	ж—	Indicate	s Voi	e A. B.—Absent	N. V	. No	t Vo	ting	R.	A.—Readopted					

NEVIUS X	TOOTED					
	FOSTER		PARKER			
TUCKER	MEYERS	X	ROBINS	SON		
FORD X	M OORE	X	SELDEN			
Х-	-Indicates Vote A. B.—Ab	sent N. V. Not Vo		-		
Submitted on first reading	at a meeting of the Dist	rict of Columbia	City Council on _A	pril 2, 197	4	
Adopted on second and fina	l readingMay 7, 1	974			4-4-1	
Presented to the Mayor-Co	mmissioner May 7, 1	974	Edwa	1 6 m.		7
Approved Talk	Wask Tim		Secretary of	the City Counc	cil	1
ripproved	Mayor-Commissioner			Da		
Enacted W/O signature of	f the Mayor according t	o ten day limita	tion rule:			
				De	ate	
Disapproved and returned t	to the City Council	Mayor-Commission	ner	Da	te	. may sen one one one
Readopted						
	Date					
I hereby certify that this reg	ulation is true and adopte	ed (or readopted)	as stated therein	11		1 1

 $2_{\text{of}}2$ 

"disposed" wherever it appears therein and inserting in lieu thereof "earlier-acquired" in each such place.

Section 2. This regulation shall take effect immediately upon enactment.

. . . .

Regulation No. \_\_\_\_74-11



May 31, 1974 Enactment Date

# Regulation

#### of the

#### District of Columbia

HOUSING REGULATIONS OF THE DISTRICT OF COLUMBIA REGARDING THE TITLE BOARD OF APPEALS AND REVIEW

Vice Chairman Sterling Tucker Presents the following regulation:

WHEREAS, Paragraph (5), Section 402, Reorganization Plan No. 3 of 1967 transferred to the District of Columbia Council the authority to adopt regulations concerning the issuance of building regulations, of which the Housing Regulations of the District of Columbia are a part thereof NOW, THEREFORE, BE IT ENACTED by the District of Columbia Council that: Section 1. The second sentence of Section 1302.1 of the Housing Regulations of the District of Columbia is hereby amended to read as follows: "Such appeal shall be filed within ten (10) days after the date of

service of the notice of violation unless, in the public interest, such notice of violation specifies a period of less than ten (10) days, but not less than twenty-four (24) hours, within which to file such appeal: Except, where a request for a variance has been submitted to the Director of the Department of Economic Development in accordance with the provisions of Section 2702 of these regulations, such appeal shall be filed within 10 days after the date of service of the notice of the final determination on such request for a variance."

21 22 23

24

2

3

4 5

6 7

8

9

10 11

12

13

14

15

16

17 18

19

20

Section 2. Section 1302.2 of the Housing Regulations of the District of Columbia is hereby amended to read as follows:

		REC	ORD OF C	COUI	V C	L	VOTE			
COUNCILMAN	AYE NAY	N.V. A.B. R.A.	COUNCILMAN	AYE NA	YN.V.	A.B. R.	A. COUNCILMAN	AYE NAY	N.V. A.E	r. R.A.
NEVIUS	X		FOSTER	X			PARKER	X		
TUCKER	X		MEYERS	X			ROBINSON	X		
FORD	X		MOORE	X			SELDEN	X		
,	X—1	Indicates Vo	te A. B.—Absent	N. V. 1	Vot Vo	ting	R. A.—Readopted			
0 1 1 1 C	1.		( 1 5: :				May	7 1974		

COUNCILMAN	AYENA	YN.V.A.E	R.A.	COUNCILMAN	AYE	NAY N.V.	A.B.	R.A.	COUNCILMAN	AYE	NAY	N.V.	A.B.	_
NEVIUS	X			FOSTER	X				PARKER	X				_
TUCKER	X			MEYERS	X				ROBINSON	X				_
FORD	X			MOORE	X				SELDEN	X				
· ·	Ж.	Indicai	es Vo	te A. B.—Absent	N. V	7. Not Vo	oting	R.	A.—Readopted					-
Submitted on first	reading	g at a n	eetin	g of the District o	f Co	lumbia	City	Cou	ıncil on <u>May</u>	7, 1	974			-
Adopted on second	and fir	al readi	ng	May 21, 197	4			-	t	1-1	-4-			
Presented to the	Mayor-C	Commiss	ioher	May 21, 197	4		کے	2	huast S.	MALA	1.			
Tresented to	*	/		Date	_			S	ecretary of the Cit	y Cou	m			
Approved	600	12 (N	Ms	1 STAN					Mag	y 31	-, -	197	4	
ApprovedA-		May	or-Cor	nmissioner							Date			•
Enacted W/O sig		of the	Maria	r according to ter	da	v limita	tion	-11	۵.					
Enacted W/O sig	nature	of the	wayo	r according to ter	ı ua	y minita	11011	Ture			Date			
<b>.</b>		1	0'.	0 1										
Disapproved and r	eturned	to the	City	Council	or-Co	mmissio	ner	~			Date			
Readopted				and sard and dies and any and the one dies and the										
		Date										, 1		
I hereby certify tha	t this ro	egulation	ı is tr	ue and adopted (or	r rea	dopted)	as s	tate	diporein.	. W	leh !			
P-251								S	secretary of the Cit	y Cou	incil	-11-	* 100 100 100 un	•
				Certified copie	s are	availab	le.					J		

Certified copies are available.

#### \_\_2\_of\_\_2\_

"The Board of Appeals and Review shall in accordance with Organization Order No. 112, as the same may be amended from time to time, and its rules of practice and procedure, provide the appellant with an opportunity for a hearing. The decision of the Board of Appeals and Review sustaining, modifying, or vacating notices issued under the authority of these regulations shall be the final administrative remedy."

Section 3. The second sentence of the first paragraph of Section 2703 of the Housing Regulations of the District of Columbia is hereby amended to read as follows:

"Such appeal shall be filed within ten (10) days after the date of service of the notice of violation unless, in the public interest, such notice of violation specifies a period of less than ten (10) days, but not less than twenty-four (24) hours, within which to file such appeal: Except, where a request for a variance has been submitted to the Director of the Department of Economic Development in accordance with the provisions of Section 2702 of this Code, such appeal shall be filed within 10 days after the date of service of the notice of the final determination on such request for a variance."

Section 4. The second paragraph of Section 2703 of the Housing Regulations of the District of Columbia is hereby amended to read as follows:

"The Board of Appeals and Review shall in accordance with Organization Order No. 112, as the same may be amended from time to time, and its rules of practice and procedure, provide the appellant with an opportunity for a hearing. The decision of the Board of Appeals and Review sustaining, modifying, or vacating actions from which the appeal is taken from these regulations shall be the final administrative remedy."

Section 5. This Regulation shall take effect immediately upon enactment.

Regulation No. 74-12

1 2

3

4 5

6 7 8

9

10

11

12

13

14 15

16

17

18

19 20

21

222324

P-251



May 31, 1974 Enactment Date

# Regulation

#### of the

#### District of Columbia

TITLE REGULATION CONCERNING OFFERING OF ALCOHOLIC BEVERAGES FOR SALE IN ORIGINAL CONTAINERS (WINE SAMPLING)

Councilman Tedson J. Meyers Presents the following regulation:

WHEREAS, under Section 25-107 of the D. C. Code (1973 edition) the District of Columbia Council has the authority to enact regulations governing the offering of alcoholic beverages for sale, and

WHEREAS, retailers have indicated a desire to be permitted to invite prospective purchasers to sample a wine prior to purchase.

NOW, THEREFORE, BE IT ENACTED by the District of Columbia Council that:

Section 1. No licensee holding a retailer's Class A license shall sell or deliver from the place described in said license, any alcoholic beverage other than in the original container, except that a portion of said premises specifically approved by the A.B.C. Board for that purpose, may be used for the sampling of wines. No sales shall be permitted in the said area so approved.

<u>Section 2</u>. This regulation, as hereby adopted, shall be so compiled and published as is deemed appropriate by the Commissioner for their orderly arrangement within the District of Columbia Rules and Regulations maintained by him.

 $\underline{\text{Section 3}}$ . This regulation shall take effect immediately upon enactment.

RECORD OF COUNCIL VOTE

COUNCILMAN AYE NAY N.V. A.B. R.A. PARKER

TUCKER MEYERS ROBINSON ROBINSON SELDEN

X—Indicates Vote A. B.—Absent N. V. Not Voting R. A.—Readopted

X—Indicates Vote A. B.—Absent N. V. Not Voting R. A.—Reado	pted
Submitted on first reading at a meeting of the District of Columbia City Council on	May 7, 1974
Adopted on second and final readingMay 21, 1974	-,,
Presented to the Mayor-Commissioner May 21, 1974  Date Secretary of	the City Council
ApprovedMayor-Commissioner	3 1 MAY 1974 Date
Enacted W/O signature of the Mayor according to ten day limitation rule:	Date
Disapproved and returned to the City Council	Date
Readopted Date	
I hereby certify that this regulation is true and adopted (or readopted) as stated therein.	11

Certified copies are available.

-Regulation No. 74-13

P-251



May 31, 1974
Enactment Date

# Regulation

of the

### District of Columbia

TITLE REGULATION CONCERNING TEMPORARY RENT INCREASE MORATORIUM

2 PL. 93-157 to control rents in the District of Columbia; and

Vice Chairman Sterling Tucker Presents the following regulation:

WHEREAS, the District of Columbia Council is authorized, pursuant to

3		
4	WHEREAS, the District of Columbia Council finds that a rent control regulation	on
5		
6		,
7		31
8		
9		
10		
11		
12 13		•
	necessary to put into effect before May 1, 1974, immediate legislation to preserve	
14	the public peace, health, safety, welfare and morals, and to preserve the status que	<b>^</b>
16		<u> </u>
17	(Regulation Concerning Temporary Rent Increase Moratorium); and	
18	(Regulation Concerning Temporary Rent Mereuse Mereuse), and	
19	WHEREAS, a legal question has arisen regarding the procedures followed in	
20		
21		
22	WHEREAS, the City Council finds that a regulation for temporary rent increase	е
23	moratorium to be effective before May 1, 1974 is necessary for the immediate	
24		re
	the status quo in the housing industry within the District of Columbia; and	
Γ	DECORD OF COUNCIL VOTE	
-	RECORD OF COUNCIL VOTE  COUNCILMAN AYENAYN.V. A.B. R.A. COUNCI	
-	COUNCILMAN AYE NAY N.V. A.B. R.A. COUNCILMAN AYE NAY N.V. A.B. R.A. COUNCILMAN AYE NAY N.V. A.  NEVIUS FOSTER PARKER	B. R.A.
-	TUCKER MEYERS ROBINSON	-
	FORD MOORE SELDEN	<
	X-Indicates Vote A. BAbsent N. V. Not Voting R. AReadopted	
S	Submitted on best reading at a meeting of the District of Columbia City Council on _May_31, 1974	
F	Adopted on second and final reading	
	Presented to the Mayor-Gommissioner May 31, 1974 Elwad B. Welly	
Ţ	Secretary of the City Council	
Λ	Approved 3 1 MAY 1974	
Γ	Mayor-Commissipher Date	
_	/	
1	Enacted W/O signature of the Mayor according to ten day limitation rule:  Date	
r		
1	Disapproved and returned to the City Council	
17		
K	Readopted Date	
		N
1	hereby certify that this regulation is true and adopted (or readopted) as stated therein.	V

Certified copies are available.

Secretary of the City Council

Regulation 74-13

## 2\_of\_2

		uncil finds e 1, 1974;		e same	is ne	ecessary	y for a	morate	orium
VHEREAS, ation No.	_	visions of	this re	gulation	n, be	low are	identi	cal to	those

NOW, THEREFORE, BE IT ENACTED, by the District of Columbia Council that:

 $\underline{\text{Section 1}}$ . No landlord or his agent may charge a greater rent for June 1974 and July 1974 on each residential unit rented by him than he received or charged for that same unit on May 1, 1974.

 $\underline{\text{Section 2.}}$  All federally-owned or federally-subsidized housing shall be exempt from this regulation.

 $\underline{\text{Section 3}}$ . Corporation Counsel may institute proceedings to enjoin the charging or collection of any rent in violation of this regulation.

 $\underline{\text{Section 4}}.$  Any person who willfully violates any provision of this regulation shall be fined not more than \$5,000 for each such violation.

Section 5. This regulation shall expire on July 31, 1974.

 $\underline{\text{Section } 6}$  . This regulation shall take effect immediately upon enactment.

#### PROOF OF PUBLICATION

\_IN--

The Washington Post

# District of Columbia, ss.

Personally appeared before me, a

Notary Public in and for the said District,

Frank E. Malosky

known to me to be Asst. Credit Mgr. of

The Washington Post

a daily newspaper printed and published in the City of Washington, District of Columbia, and made oath in due form of law that the annexed advertisement was published in said newspaper at the times mentioned in the Certificate opposite hereto.

mitness my hand and official seal this

22nd day of October , 19 75

NOTARY PUBLIC. D. C.

REGULATION OF THE DISTRICT OF COLUMBIA REGULATION NO. 74-13
The District of Columbia Council adopted the regulation below on an emergency basis in a special meeting called for that purpose on Friday May 31, 1974. That regulation is as follows:
Title: Regulation concerneing temporary rent increase moratorium. Section 1. No landlord or his agent may charge a greater rent for June 1974 and July 1974 on early residential unit rented by him, than he received or charged for that same unit on May 1, 1974.
Section 2. All Federally owned or federally subsidized housing shall be exempt from this regulation. Section 3. Corporation Council may institute proceedings to enjoin the charging or collecting of any ront in violation of this regulation. Section 4. Any person who will-villy violates any provision of this regulation shall be fined not more than \$5000 for each such violation. Section 5. This regulation shall take criect immediately upon engetment.

Enactment Date: May 31, 1974.

EDWARD B. WEBB JR. Secretary

Merrhy Certify that the roxegoing advertisement was printed and published in

The Washington Post

a daily newspaper, upon the following dates at a cost

of FORTY SEVEN AND 02/100 Dollars:
June 2, 1974

Regulation No. 74-14

1

2

3

4 5

6

7

8

10

11 12

13

14

15 16

17 18

19

20

21

22

23 24

P-251



June 14, 1974
Enactment Date

# Regulation

of the

#### District of Columbia

TITLE REGULATION OF SLOW-MOVING VEHICLES

Councilman Jerry A. Moore, Jr. Presents the following regulation:

WHEREAS, the District of Columbia Council finds that it is in the interest of traffic safety to regulate certain slow-moving vehicles using the public highways of the District of Columbia; and

WHEREAS, the District of Columbia Council is authorized to make and modify regulations relating to the movement of traffic and the equipment for motor vehicles.

NOW, THEREFORE, BE IT ENACTED by the District of Columbia Council that:

Section 1. Title 32 of the District of Columbia Rules and Regulations (Motor Vehicle Regulations for the District of Columbia), is amended by adding after section 6.412 the following new section:

"Section 6.413 - EMBLEM REQUIRED ON SLOW-MOVING VEHICLES.

"(a) As used in this section, the term 'slow-moving motor vehicle' means (1) any motor vehicle designed for operation at speeds not in excess of fifteen miles per hour, or (2) any motor vehicle which is generally utilized in its operation for a purpose which normally requires it to be operated at speeds not in excess of fifteen miles per hour, or (3) any motor vehicle or other vehicle while being towed by a motor vehicle within the scope of paragraphs (1) and (2) of this subsection. The term 'slow-moving motor vehicle' shall not include any

	Santan Control of the		RE	CC	ORD OF C	0	UN	C	IL V	The car to be consequently to be a self-the carbon and the carbon and the	unico de la compania		Andrew Colonia	Librora was a second
COUNCILMAN	AYE	NAY N.V.	A.B.	R.A.	COUNCILMAN	AYE	NAY	N.V.	A.B. R.A.	COUNCILMAN	AYE	NAY N	V. A.F	3. R.A.
NEVIUS	X				FOSTER				X	PARKER	X		-	
TUCKER	X				MEYERS	X				ROBINSON	X	-		
FORD			X	-	MOORE	X				SELDEN	IX			
		X—Ind	icate	s Vo	e A. B.—Absent	N.	V. N	ot Vo	oting R.	A.—Readopted				
Submitted on first	read	ling at a	a me	eetin	g of the District of	E Co	lum	bia (	City Cou	incil on May 2	1	1974		
Adopted on second										~			·	
Presented to the I	Maylo	r-Comn	nissi	oner	June 4, 1974				2	Lual F	h	dela		
	71.	+	/		Date				S	ecretary of the City			-	
Approved	1/10	ella	W	Va	ski thas					Jı	ine	14,	19	74
Approved =====	<i>y</i>	M	Iayo	r-Con	nmissioner			-				Date		
Enacted W/O sig	natur	re of th	ne N	Tavo	according to ten	da	v li	mita	tion rule		20 50 00 00			
2314000					8		,					Date		tro tro tim tim tim
Disapproved and a	return	ned to t	he (	City (	Council									
Disapproved and i	CCUII.	ica to t	110	Jacy	May	or-C	omm	issio	ner			Date		ery era era era era
Readopted														
			ate											
I hereby certify tha	at this	s regula	tion	is tr	ue and adopted (or	rea	dop	ted)	as state	d therein.	1	111		

Certified copies are available.

Secretary of the City Council

#### 2\_of\_2

motor vehicle specifically excluded by the Commissioner or his designated agent from the requirements of this section.

- "(b) A slow-moving vehicle emblem shall consist of a fluorescent yellow-orange triangle with a dark red reflective border conforming insofar as practical to standard ASAE S276.2 (revised March 1967) adopted by the American Society of Agricultural Engineers.
- "(c) Any slow-moving vehicle using the public highways of the District of Columbia at any time during the day or night shall display a slow-moving vehicle emblem of the type set forth in subsection (b) of this section. The use of such emblem shall be in addition to any other lighting devices, flags, or other equipment required by law. The use of such emblem in any manner or for any purpose other than as provided in this subsection is prohibited."

 $\underline{\text{Section 2}}.$  This regulation shall take effect immediately upon enactment.

74-15 Regulation No.

2

3

4 5

6

7

8

9

10

11 12

13

14

15

16

17

18 19

20

21

22 23

24



June 14, 1974 **Enactment Date** 

# Regulation

of the

### District of Columbia

TITLE HEALTH CARE FACILITIES REGULATION

Dr. Henry S. Robinson, Jr. Presents the following regulation:

WHEREAS, the District of Columbia Council is authorized to make all reasonable and usual regulations for the protection of the health of the citizens; and

WHEREAS, the District of Columbia Council is authorized by \$ 1-226 D. C. Code 1973 ed., pursuant to Section 402(4) of Reorganization Plan No. 3 of 1967 to make and enforce all such reasonable and usual police regulations as may be deemed necessary for the protection of lives, limbs, health, comfort and quiet of all persons and the protection of all property within the District of Columbia; and

WHEREAS, the District of Columbia Council is authorized by \$ 47-2344 D. C. Code 1973 ed., pursuant to Section 402(391) of Reorganization Plan No. 3 of 1967 to require licenses and regulate businesses which in the judgment of the Council require inspection, supervision or regulation; and

WHEREAS, the District of Columbia Council is authorized by \$ 1-228 D. C. Code 1973 ed., pursuant to Section 402(5) of Reorganization Plan No. 3 of 1967 to make building regulations; and

WHEREAS, the District of Columbia Council is authorized by § 6-118 D. C. Code 1973 ed., pursuant to Section 402(134) of Reorganization Plan No. 3 of 1967 to promulgate rules and regulations to prevent and control the spread of communicable diseases; and

bdminis		RECO	ORD OF	100	ACIL V	OTE		
COUNCILMAN	AYE NAY N	V. A.B. R.A.	COUNCILMAN	AYE NA	Y N.V. A.B. R.A.	COUNCILMAN	AYE NAY	N.V. A.B. R.A
NEVIUS	X		FOSTER		IX	PARKER	X	
TUCKER	X		MEYERS	IX		ROBINSON	X	
FORD		IX	MOORE	X		SELDEN	X	
	X—I	ndicates Vot	o A. B.—Absont	N. V. N	lot Voting R	. A.—Readopted		
ubmitted on first	reading a	t a meeting	of the District of	f Colum	nbia City Co	uncil on Februa	ry_5,_1	974
			June 4, 1974			9		1- f
recented to the					8	kward B.	Wels	last

X—Indicates Vote A. B.—Absent N. V. Not Voting R. A.—Reacop	7.00
Submitted on first reading at a meeting of the District of Columbia City Council on Fe	bruary 5, 1974
Adopted on second and final reading <u>June 4, 1974</u>	proposed de deserve
Presented to the Mayor-Commission of June 4, 1974  Secretary of the Date	the City Council
ApprovedMayor-Commissioner	June 14, 1974
Enacted W/O signature of the Mayor according to ten day limitation rule:	Date
Disapproved and returned to the City Council	Date
ReadoptedDate	1
I hereby certify that this regulation is true and adopted (or readopted) as stated therein.	5 wish
Secretary of	the City Council

P-251

REGULATION 74-15

# 2 6l

WHEREAS, the District of Columbia Council is authorized by § 33-405 D.C. Code 1973 ed., pursuant to Section 402(262) to make rules and regulations for the administration and enforcement of the Narcotics Drug Act of June 20, 1938.

NOW, THEREFORE, BE IT ENACTED by the District of Columbia Council that:

<u>Section 1.</u> The District of Columbia Council hereby adopts the following regulation to be known as the Health Care Facilities Regulation:

# "TITLE I. Purpose, Scope, Definitions and Separability of Provisions

Section 1. The purpose of this regulation is to provide standards for the establishment and maintenance of proprietary and non-profit health care facilities, and public facilities operated by the District Government, in order to protect and promote the health, welfare and safety of all individuals residing therein.

Section 2. This regulation shall apply to the establishment, maintenance, and operation of health care facilities and shall be supplemental to existing Federal laws and regulations pertaining to the establishment, maintenance, and operation of such facilities and every constituent unit thereof, and to such laws and regulations relating to the design, construction, quality of materials, maintenance and operation of all buildings and structures and the activities and businesses carried on therein.

This regulation is intended to set forth the requirements for the establishment, maintenance and operations of health care facilities.

This regulation shall be made available to the public upon request and shall be maintained on file in the Commissioner's office for inspection during the regular business hours.

- Section 3. For purposes of this regulation the following terms shall have the meanings ascribed:
- (1) <u>Activity of Daily Living</u>: Getting in and out of bed, bathing, dressing, eating, walking, and taking medications prescribed for self-administration.
- (2) <u>Administrator</u>: The person responsible for planning, organizing, directing, and controlling the operation of a health care facility, or who in fact performs such functions, whether or not such functions are shared by more than one person.
- (3) <u>Commissioner:</u> Commissioner of the District of Columbia or his designated agent.
- (4)  $\underline{\text{Continuous:}}$  Available at all times without cessation, break or interruption, 7 days a week, 24 hours a day.
- (5)  $\underline{\text{Dentist}}$ : An individual licensed to practice dentistry in the District pursuant to title II, chapter 3 of the District of Columbia Code.
- (6) <u>Dietary Service</u>: An organized service applying principles of nutrition and management to menu planning, food preparation and service provided to patients and personnel in the facility.
  - (7) <u>Dietitian:</u> An individual who meets the qualifications and

## 3 61

standards for membership in the American Dietetic Association, and who applies the principles of nutrition and management to menu planning, food preparation, and service.

2.

(8) District: The District of Columbia.

(9) Existing Skilled Care Facility: A skilled care facility in operation prior to the effective date of this regulation.

(10) <u>Facility:</u> The overall organization and program and services including staff personnel, the building or buildings, equipment and supplies necessary for implementation of health, nursing and sheltered care services.

(11) <u>Full Time</u>: The number of days per week and hours per day that constitutes the regularly scheduled working week of the employees in a health care facility.

(12) <u>Food Service Manager:</u> A person who meets the qualifications and standards for membership in the Hospital Institutional and Educational Food-Service Society or who has satisfactorially completed special courses approved by the Commissioner in Food Service Supervision and who has had supervised work experience in all phases of food service.

(13) <u>Food Service Personnel</u>: Those persons who prepare or serve food or are in any way involved with the use, care, or maintenance of kitchen equipment or the sanitation and housekeeping functions involved in the preparation and serving of food.

(14) <u>Health Care Facility</u>: A residential facility providing medical or non-medical services consistent with accepted professional, therapeutic, medical care concepts and practices as well as current health programs and legislation. The term shall include and refer to the following levels of care:

l. Skilled Care Facilities

Intermediate Nursing Care Facilities
 Supervised Personal Care Facilities

(15) <u>Health Related Services</u>: Services other than medical pertaining to protective, preventive, and personal services performed by qualified personnel. These services shall include but not be limited to dietary, dental, podiatry, social services, restorative, pharmaceutical and patient activity.

(16) <u>Intermediate Care</u>: Professional nursing services provided under the direction of a physician to individuals who do not have such an illness, disease, injury or other condition as to require the degree of care and treatment which a hospital or skilled nursing facility is designed to provide. Services include both regular and continuing health related services.

(17) <u>Intermediate Nursing Care Facility</u>: A facility or distinct part thereof primarily engaged in providing intermediate care.

(18) <u>Licensed Practical Nurse:</u> A person who is currently licensed by the Practical Nurses' Examining Board of the District pursuant to subchapter II of chapter 4, title 2 of the District of Columbia Code.

(19) <u>Maintain:</u> To keep in a state of efficiency.

(20) Medical Records Practitioner: A person who is eligible for certification as a Registered Record Administrator (RRA), or an Accredited Record Technician (ART) by the American Medical Record Association under its requirements; or is a graduate of a school of medical record science that is accredited jointly by the Council on Medical Education of the American Medical Association and the American Medical Record Association.

## 4 61

- (21) Nursing Assistant or Aide: Anyone who has been trained to give services to patients which do not require the skills of a professional or practical nurse.
- (22) <u>Nursing Personnel:</u> Registered nurses, licensed practical nurses, practical nurses, nursing assistants, aides and orderlies.
- (23) Occupational Therapist: 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 years of appropriate experience as an occupational therapist, and has achieved a satisfactory grade on a proficiency examination conducted, approved, or sponsored by the U.S. Public Health Service.
- (24) Owner: Any person who, alone or jointly or severally with others, shall have legal title to any building or premises arranged, designed or used in whole or in part, to house one or more persons.
- (25) <u>Patient:</u> An individual who is in need of and receiving professional services directed by a physician toward maintenance, improvement, or protection of mental and physical health or alleviation of disability or pain.
- (26) <u>Permissible Occupancy</u>: The maximum number of patients or residents for which the facility is licensed to care.
- (27) <u>Person:</u> Individuals, partnerships, corporations, associations, executors, administrators, guardians, trustees and agents.
- (28) <u>Personal Care</u>: General supervision of and direct assistance to an individual who, because of advanced age, infirmity, physical or mental limitations, is unable to perform his activities of daily living.
- (29) <u>Pharmacist:</u> A pharmacist licensed in the District pursuant to title 2, chapter 6 of the District of Columbia Code.
- (30) <u>Physician:</u> A person licensed or registered to practice the healing art in the District pursuant to subchapter I of chapter I, title 2 of the District of Columbia Code.
- (31) <u>Physical Therapist</u>: A person who is licensed to practice physical therapy pursuant to subchapter III of chapter 4, title 2 of the District of Columbia Code.
- (32) <u>Podiatrist</u>: An individual licensed to practice podiatry in the District pursuant to title 2, chapter 7 of the District of Columbia Code.
- (33) <u>Practical Nurse:</u> A person who has graduated from a school of practical nursing approved by the National Association of Practical Nurse Education, or who has attended at least one year of an approved school of professional nursing.
- (34) <u>Principal Physician</u>: A physician who is available to the facility to provide medical consultation related to the patient care policies and procedures and who shall provide emergency medical care in the facility or in the absence of the patient's private physician.
- (35) <u>Professional Nurse:</u> A registered nurse or licensed practical nurse.

#### REGULATION 74-15

#### 5 61 \_\_\_of\_\_\_

- (36) <u>Professional Nursing Services</u>: Those medical services pertaining to the curative, restorative, and preventive aspects of nursing care that are performed or supervised by a registered nurse or licensed practical nurse under the direction of a physician.
- (37) Qualified Personnel: Persons holding official credentials, accreditation registration, certification or holding licenses issued by the District. The term as used in these regulations shall include administrators, dentists, dietitians, occupational therapists, professional nurses, physicians, podiatrists, speech pathologists or audiologists, pharmacists, patient activity specialist and social workers.
- (38) Registered Nurse: A person who is licensed and currently registered by the Nurses' Examining Board of the District pursuant to subchapter I of chapter 4, title 2 of the District; or a person licensed in another jurisdiction whose application for licensure is pending in the District. Registered nurse shall be abbreviated RN.
- (39) <u>Resident:</u> A person in a health care facility who is independent and self-sufficient to the extent that only minimum supervision is necessary in a protective environment.
- (40) <u>Resident Beds</u>: Accommodations with supporting services such as food, laundry, and housekeeping for residents who generally stay in excess of 24 hours.
- (41) Skilled Care Facility: A facility or distinct part thereof primarily engaged in providing to in-patients continuous professional nursing coverage and health related services under the direct supervision of physicians. Skilled care facilities are solely limited to those facilities classified as nursing homes, convalescent homes, and extended care facilities which provide 24-hour professional nursing services and a complete program of health related and rehabilitative services under the direct supervision of a full-time Medical Director or principal physicians.
- (42) <u>Skilled Nursing Services:</u> A service furnished by or under direct supervision of professional nurses to assure the safety of the patient and achieve the medically desired results.
- (43) <u>Social Worker</u>: A graduate of a school of social work accredited by the Council on Social Work Education or a person with a Baccalurate degree with experience in social service.
- (44) <u>Speech Pathologist or Audiologist</u>: A person who meets the education and experience requirements for a Certificate of Clinical Competence in the appropriate area (speech pathology or audiology) granted by the American Speech and Hearing Association; or meets the educational requirements for certification, and is in the process of accumulating the supervised experience required for certification.
- (45) <u>Sponsor</u>: The person, persons, or agency legally responsible for the welfare and support of a patient or resident and/or having legal authority to act on behalf of the patient or resident.
- (46) <u>Supervision</u>: Direct overseeing and inspection of a particular act, function or activity.
- (47) <u>Supervised Personal Care Facility</u>: A facility or distinct part thereof providing, in a supervised environment, personal care assistance and other health related services which shall be provided under the direction of a physician

REGULATION 74-15

### 6 of 61

(48) Therapeutic Diet: A regimen prescribed by a physician for the treatment of a patient with a specific illness through modification and/or control of calories, increase or decrease of nutrients, changes in texture of food, or restriction of specific ingredients.

### Section 4. Separability of Provisions

If any provision of this regulation is declared unconstitutional, by a court of competent jurisdiction, or the applicability thereof to any person or circumstance is held invalid, the validity of the remainder of the regulation and the applicability of such provision to other persons and circumstances shall not be affected thereby.

#### TITLE II. License of Health Care Facilities

## Section 1. - License Requirements for Health Care Facilities

- (a) No person shall either directly or indirectly operate a health care facility without having first obtained a license from the Commissioner authorizing that operation.
- (b) No license to operate a hospital, sanitatorium or other facility for the care, custody, shelter, or treatment of the physically or mentally ill shall be deemed to authorize the operation of a health care facility. The operation of a health care facility which is part of a hospital, sanitorium or other facility or is operated in conjunction with, or under the same management, as a hospital, sanitorium, or other facility for the care, custody, shelter, or treatment of the physically or mentally ill shall require a license as a health care facility pursuant to this regulation.
- (c) A separate license shall be required for each health care facility when more than one health care facility is operated by the same owner at different premises. Only one license shall be required for a health care facility located in separate buildings on the same grounds or premises and operated by one owner.
- (d) Unless specifically exempted by this regulation, the provisions and requirements herein, shall apply to all health care facilities established or operated in the District and the Commissioner shall have the necessary power, including subpoena power pursuant to sections 1-237 and 4-60l of the District of Columbia Code to supervise, inspect and investigate those facilities to determine compliance with this regulation.
- (e) Each license shall set forth the name and address of the premises of the health care facility, the name of the licensee, and the licensed bed capacity in each level of health care within the facility.
- $% \left( t\right) =\left( t\right) +\left( t\right) =\left( t\right) +\left( t\right) +\left($
- (g) Each license shall be issued only for the premises and person or persons named as applicants in the application and shall not be valid for use by any other person or persons or at any place other than that designated in the license. Any transfer as to person or place without the approval of the Commissioner shall cause an immediate forfeiture of such license.
- (h) Each license certificate in the licensee's possession shall be the property of the District and shall be returned to the Commissioner immediately upon the suspension or revocation of a license, or upon the refusal to renew a license or upon its forfeiture in accordance with subsection (g) of this section or

## 7 61

in accordance with section 5 of this title, or if operation of a facility is discontinued by the voluntary action of the licensee.

#### Section 2. Fees:

- (a) The Commissioner shall pursuant to section 47-2344 of the District of Columbia Code fix and may adjust from time to time, health care facility license fees which shall in his judgment be commensurate with the cost to the District of inspections, supervision and regulation required by this regulation.
- (b) No license fee pursuant to subsection (a) of this section shall be required of any health care facility operated by the District Government.

#### Section 3. Certificate of Need

Prior to the issuance of a permit for new construction or renovation of a skilled care or intermediate nursing care facility in the District, a Certificate of Need shall be secured from the Commissioner pursuant to section 8-7:128 of the District of Columbia Health Regulations.

### Section 4. Application for License:

- (a) Any owner of a health care facility proposing to operate a health care facility in the District shall, prior to the commencement of operation, make application to the Commissioner for a health care facility license. The application shall contain the following information, all of which shall be a matter of public record, available for inspection upon request during regular business hours:
- (1) The name, age, address and occupation of the owner making application; or in the case of a corporation or association, the names, ages, addresses, and occupations of the officers and directors thereof.
- (2) The name, age, address and occupation of the individual designated by the applicant as the administrator of the facility and any additional information concerning that individual which the Commissioner may require.
- (3) The address of the premises which are to constitute the health care facility, together with a description of all structures and facilities forming a part thereof in such detail as the Commissioner may require.
  - (4) The name by which the facility is to be known.
- (5) The name and address of the owner or owners of the facility and if the owner is a corporation, the names and addresses of the officers, directors and stockholders owning at least 1% of the authorized and issued stock of the corporation.
- (6) The name, address, and occupation of any person not set forth in the preceding paragraph who will be entitled to receive directly or indirectly through a designee, or assignee, any pecuniary profit from the operation of the home, other than compensation for services rendered.
- (7) The level or levels of health care to be provided and the maximum bed capacity in each level.
- (8) A program statement describing the programs and services to be provided including contractural and staff resources.

### 8 of 61

(9) Proof that the premises are in conformity with all applicable federal and local health, safety, and zoning regulations, and building codes, and that any necessary permits for occupancy have been issued by the appropriate authorities and are in full force.

(10) Other reasonable information which the Commissioner may require in order to permit him to ascertain whether the applicant is in a position to operate a health care facility in conformity with the provisions of this regulation.

- (b) An applicant for a health care facility license shall sign the license application and shall affirm that all statements therein are true. The applicant's signature shall be in the case of an individual owner that of the individual, in the case of a partnership that of all partners thereof, in case of a corporation by two of the officers thereof, one of whom shall be the President.
- (c) Each applicant shall provide an annual budget, financial records, and such information, and such assurances as the Commissioner shall require, concerning financial resources and insurance coverage to demonstrate an ability to provide adequate care and protection to the patients and/or residents during the licensed period.
- (d) Each applicant shall inform the Commissioner within 10 days of any change in the facts stated in the license application.

# Section 5. <u>Issuance of License and Notification of Change in Circumstances:</u>

- (a) The Commissioner shall issue a license upon receipt of a completed application, and after (1) at least one on-site facility inspection by the Commissioner to ascertain complaince with this regulation, and (2) a determination by him that the representations made in the application are correct and sufficient, to show that the applicant has complied with the requirements of this regulation.
- (b) A license issued by the Commissioner shall expire one year from the date of issuance.
- (c) The name of the facility shall not be changed without notice to the Commissioner. The words "hospital", "rehabilitation center" or any words conveying a substantially similar meaning shall not be used in the name of a health care facility. A new license shall be issued bearing the new name of the facility and the same expiration date as the license issued in the facilities' former name.
- (d) Written approval shall be required by the Commissioner for any change in ownership of the facility. Such approval may be granted only upon a demonstration that the health care facility and its operation will conform with all licensing requirements as though it were the subject of an application for original license. The Commissioner shall be promptly notified of any change in the administrator of the facility.
- (e) The owner of a health care facility shall inform the Commissioner of any change in the operation, program, or services of a facility of a degree or character which may affect its licensure.
- (f) No license shall be issued to an applicant who has been previously convicted of operating a health care facility without a valid license within the past five years from date of application.

## 9 of 61

#### Section 6. License Renewal, Suspension and Revocation

- (a) The Commissioner shall be required to renew a health care facility license when he has determined that the licensee has complied with the provisions of this regulation.
- (b) Application for renewal of a health care facility license shall be submitted to the Commissioner on a form approved by him not later than ninety days prior to the expiration date of that license.
- (c) The Commissioner may, after providing notice and opportunity for hearing in accordance with Section 7 of this title, deny, refuse to renew, or suspend or revoke any license if he finds any of the following:
- (1) A failure to comply with the provisions of this regulation.
- (2) A failure to comply with any other Federal or District law or regulations applicable to health care facilities.
- (3) That any licensee has misrepresented to the Commissioner or other appropriate government official, any material fact in obtaining a license, describing a resident's condition, care or services with respect to any matter governed by this regulation.
- (4) That any licensee, administrator, or person in charge of the facility has committed, aided, abetted, or permitted to be committed, any acts of dishonesty, fraud, gross negligence, abuse, assault, battery or other illegal acts in the operation of the facility.
- (5) That any licensee has since the granting of the license been convicted of a felony or any other crime involving honesty, integrity or morals.
- (d) The Commissioner shall suspend a license whenever he finds that the failure of a facility to comply with any provision of this regulation or with any other Federal or District law or regulation applicable to such facility, is of such a serious nature and magnitude that there is an immediate danger to the health, safety or welfare of the patients or residents therein. Such suspension shall continue until the immediate danger has been corrected and the facility has been reinspected by the Commissioner.
- (e) If the Commissioner finds that the immediate interests of the patients or residents in a facility would be best served by affording the facility an opportunity to correct a condition which would otherwise constitute a basis for suspension, revocation of, or refusal to renew a license under subsection (c) of this section, he may affort the licensee the opportunity to correct the violation within 30 days after receipt of a notice to correct.

#### Section 7. Hearings and Judicial Review:

(a) The Commissioner, after giving notice to the licensee or applicant for a license and an opportunity for a hearing, may suspend or revoke any license issued hereunder, or may deny issuance of a license for failure to comply with or for a violation of these regulations. Any person desiring a hearing shall make such request in writing within (5) five days after issuance of the notice. In each case the Commissioner shall maintain an official record, shall serve upon the licensee or the applicant a proposed decision including

### REGULATION 74-15

## 10 61

findings of fact and conclusions of law and shall render the final decision in writing accompanied by findings of fact and conclusions of law. Each case shall be determined in accordance with the provisions of the District of Columbia Administrative Procedure Act as set forth in Sections 1-1509 and 1-1510 of the District of Columbia Code.

(b) The Commissioner may take emergency action pursuant to section 1-1505 (c) of the District of Columbia Code with regard to any suspension or revocation provided for in section 6 of this title.

#### TITLE III. Penalties, Remedies and Enforcement Procedures

#### Section 1. Penalties and Remedies

- (a) Any person who violates any provision of this regulation shall be guilty of a misdemeanor and, upon conviction, shall be subject to a fine not to exceed \$300.00, or to a term of imprisonment not to exceed ninety days.
- (b) The imposition of any fine or term of imprisonment pursuant to subsection (a) of this section shall be in addition to any denial, suspension, revocation, or refusal to renew a health care facility license which may result from the violation.
- (c) Each day of any violation shall constitute a separate offense, and the penalties prescribed above shall be applicable to each such separate offense, except that no further penalties shall be imposed for the period during which any appeal from a conviction of such offense is pending.
- (d) Any person or representative thereof, who is damaged due to a violation of this regulation shall:
- $\hbox{(1)} \ \ \text{have a civil cause of action against any person} \\ \text{violating this regulation, and}$ 
  - (2) be entitled to recover from any such person:
    - (A) Actual damages
    - (B) Punitive damages
    - (C) A reasonable attorney's fee and

litigation costs reasonably incurred.

#### Section 2. Right of Entry, Inspection and Subpoena Powers

- (a) The Commissioner and any other duly authorized official of the District having jurisdiction over, or responsibilities pertaining to any health care facilities, patients or residents in such facilities, shall have the right after presenting official credentials of indentification and authority issued by the District either with, or without prior notice, to enter upon and into the premises of any health care facility licensed pursuant to this regulation or for which an application for license has been made, in order to determine compliance, and to facilitate verification of information submitted on, or in connection with, an application for licensure pursuant to provisions of this regulation. The conduct of the authorized official shall be such that the entry and inspection shall take place with the least possible disruption to the patients.
- (b) The right of entry and inspection shall be extended to any premises which the Commissioner has reason to believe is being operated or maintained as a health care facility without a valid license. Provided, however, that no entry or inspection of any unlicensed premises shall be made without the permission

# <u>ll\_of\_61</u>

of the owner or administrator in charge thereof, unless a warrant is first obtained from the District of Columbia Superior Court pursuant to District of Columbia Code section 11-5.41 authorizing the entry or inspection for the purpose of determining compliance with provisions of this regulation. Such entry and inspection shall be made with the least possible disruption to the patients.

#### Section 3. Access Requirements Relating to Health Care Facilities

- (a) The health care facility shall permit members of community organizations and representatives of community legal services programs, whose purposes include rendering assistance without charge to nursing home patients, to have full and free access to the health care facility in order to:
- (1) Visit, talk with, and make personal, social and legal services available to all patients.
- (2) Inform patients of their rights and entitlements, and their corresponding obligations, under Federal and District laws by means of distribution of educational materials and discussion in groups and with individual patients.
- (3) Assist patients in asserting their legal rights regarding claims for public assistance, medical assistance, and social security benefits, as well as in all other matters in which patients are aggrieved. Assistance may be provided individually, as well as on a group basis, and may include organizational activity, as well as counseling and litigation.
- (4) Inspect all areas of the health care facility except the living areas of a patient who protests such inspection. Such authority shall not include the right to examine the business records of the facility without the consent of the Administrator, nor the clinical record of a patient without his consent.
- (5) Engage in all other methods of assisting, advising, and representing patients so as to extend to them the full enjoyment of their rights.
- (b) Such access shall be permitted between the hours of 8:00 a.m., and 8:00 p.m. daily.
- (c) Personsentering a health care facility pursuant to this section shall promptly advise the Administrator or the Acting Administrator or other available agent of the facility of their presence. Such persons shall not enter the living area of any patient without identifying himself to the patient and without receiving the patient's permission to enter.
- (d) Individual patients shall have the complete right to terminate any visit by persons having access pursuant to this section. Communications between a patient and such persons shall be confidential, unless the patient authorizes the release of such information.
- (e) No patient shall be punished or harassed by the health care facility or by its agent or employees because of his efforts to avail himself of his rights.
- (f) The health care facility shall, in a conspicuous place at or near the entrance to the facility and on each floor of the facility, post a notice which sets forth this section and shall upon admission, or in the case of a person who is already a patient in such home, within 48 hours of the effective date of this

### REGULATION 74-15

### 12 61

regulation, provide every patient with a personal copy of such notice. In the case of a patient who for any reason cannot either read or read English, such notice shall be given orally as well as in writing. A certification of the provision of personal notice as required herein shall be entered in a patient's clinical record.

(g) Nothing in this section shall be construed to restrict any right or privilege of any health care facility patient to receive visitors who are not representatives of community organizations or legal services programs as defined in subsection (a) of this section.

## Section 4. Payment of Public Funds to Unlicensed Facilities

(a) No person, department, agency, officer or employee of the District shall pay, or approve for payment, from public funds, any amount or amounts to a health care facility under any Federal or District program of public assistance or other aid in connection with services provided, or to be provided, to an actual or prospective patient or resident in such facility unless that facility has a current license issued by the Commissioner under this regulation.

#### Section 5. Research

If a health care facility conducts research, or allows research to be conducted within the facility it shall follow, and comply with the statement of assurance on research involving human subjects required by the United States Department of Health, Education and Welfare.

### Section 6. Period for Compliance with Standards

- (a) If any health care facility, in operation before the effective date of this regulation, is determined by the Commissioner to have deficiencies under the requirements of this regulation, such facilities shall be licensed for a period of one year after the expiration of the facility's current license, with an additional extension of up to 12 months if approved by the Commissioner, <u>Provided</u>, That:
- (1) The facility submits a written plan of correction which contains the specific steps that it will take to meet all such requirements and a timetable detailing the corrective steps to be taken and when correction of deficiencies will be accomplished.
- (2) The Commissioner makes a finding that the facility is reasonably able to meet such requirements through corrective steps and they can be completed during the allowable period of time.
- (3) During the period allowed for corrections, the facility be in compliance with existing District Fire Safety and Sanitation Codes and regulations and the 1967 edition of the Life Safety Code.
- (4) The facility is surveyed by officials designated by the Commissioner at least semiannually until corrections are completed and the Commissioner finds on the basis of such surveys that the facility has in fact made substantial effort and progress in its plan of correction as evidenced by supporting documentation, signed contracts and/or work orders.

#### TITLE IV. Prohibition of Discriminatory Practices

#### Section 1. Discriminatory Practices Prohibited:

(a) All health care facilities licensed by the District shall.

#### REGULATION 74-15

### 13 of 61

comply with applicable provisions of Titles VI and VII of the Civil Rights Act of 1964 (78 Stat. 241).

- (b) Discrimination and/or isolation based upon age, race, religion, sex, socio-economic or intellectual characteristics within the facility in recreational activities, meals and other social functions shall be prohibited unless medically recommended by the patient's physician in writing, in which case such recommendation shall be entered in the patient's clinical record.
- (c) No patient shall be denied admission to a health care facility or discharged from a health care facility based upon the patients marital status.

#### TITLE V. Skilled Care Facility Standards:

#### Section 1. - Administrative Management

- (a) <u>Administrator</u> A full-time Administrator shall be employed five consecutive days per week during regular business hours. He shall be responsible for the internal operation of the facility.
- (1) The Administrator shall have the following qualifications:
- (A) He shall be licensed under District of Columbia Council Regulation No. 70-37.
- (B) He shall be certified annually by a licensed physician as having no physical or mental disabilities or personality disturbances which would significantly interfere with carrying out his responsibilities.
- (2) In the absence of the Administrator, a registered nurse, physician or licensed administrator shall be designated as Acting Administrator, with full authority, to act for him in his absence.
- (3) Adequate written guidelines for the Acting Administrator shall be provided.
- (b) <u>Personnel Licensure</u> All personnel required to be licensed shall maintain current licensure in the District. A list of all personnel with current registration numbers shall be on file and available to agents of the Commissioner.
- (c) <u>Personnel Policies</u> Personnel policies shall be written and available to all staff and to agents of the District. These policies shall include, but not be limited to the following:
- (1) Wage scales, hours of work, vacation, sick leave, insurance and other benefits.
- (2) Pre-employment and annual medical examinations by a licensed physician. These medical examinations shall include, but not be limited to, medical history, physical examination, chest x-ray and other appropriate tests as indicated.
- (3) Plans for orientation of all personnel and for regularly scheduled staff meetings.
  - (4) Annual evaluation of employee performance by

## 14 61

l appropriate supervisor.

(5) Position descriptions for each category of personnel. Each employee shall be given a copy of his position description.

(6) Personnel file for each employee.

(d) <u>General Admission Policies</u> - The facility shall admit and retain only those patients who can be treated safely and adequately within the limitation of the licensing requirements and who require the level of care provided.

(1) Admission requirements which are predicated upon religion, sex, organizational membership, lodges, orders, etc., shall be in writing. Whenever a facility denies an applicant admission to the facility, the reason for such denial shall be given to the applicant in writing.

(2) Policies regarding patient fees and payments and refund policies shall be in writing and copies of such policies shall be provided to the Commissioner as well as to each patient and sponsor.

#### (e) Patient Status Policies

(1) There shall be written procedures to be followed whenever there is a significant change in patient's health status or in charges, billings or other related administrative matters.

 (A) In case of serious illness or accident, medical care shall be secured immediately and the Administrator or Director of Nursing Services shall immediately notify the next of kin or sponsor and document in the patient's record.

(B) Death shall be determined and pronounced only by a physician. In the case of death, both the patient's attending physician and the next of kin or sponsor shall be notified promptly.

(C) The facility shall provide for deaths to be investigated in accordance with District of Columbia Code, Title XI, chapter 23.

 (2) Information describing the care and services provided by the facility shall be accurate and clearly stated. Patient and sponsor, shall be given a written copy of fees and a detailed description of care and services provided signed by the Administrator, prior to admission.

(3) <u>Patient Status Policy</u> - The Administrator shall report to a patient sponsor at least every six months regarding the general physical and mental condition of the patient.

(f) Any patient determined to be competent may discharge himself from the facility upon presentation of a written release; Provided That, the sponsor or next of kin of patients determined to be legally incompetent shall be notified prior to the release of the patient. No patient who is determined to be competent shall be transferred or discharged by the facility on a non-emergency basis without a written order from the attending physician and without having first been consulted and informed. Any transfer or discharge on a non-emergency basis of an incompetent patient shall require a written order from the attending physician and timely notification of next of kin and sponsor.

(g) <u>Transfer Agreement</u> - There shall be a written agreement with one or more hospitals so that there will be reasonable assurance that transfer

15 61

of patients will be affected between the hospitals and the skilled care facility whenever such transfer has been medically determined necessary by the attending physician.

(1) The agreement shall be with a hospital

located in the District.

(2) The agreement shall specify that the hospital will accept, immediately, any emergency patient from the facility.

(3) The agreement shall provide that all necessary medical and social information accompany the patient, both to and from the facility and the hospital.

(4) The terms of the agreement shall be established jointly by the facility and the hospital participating in the agreement.

(5) The agreement shall designate responsibility for provision and payment of transportation to and from the hospital.

(6) Each facility shall maintain a copy of the agreement in its administrative files.

(h) <u>Visitors</u> - Each patient shall be permitted to receive visitors, privately, at any reasonable hour.

(i) <u>Posting of License</u> - All licenses, permits and certifications shall be posted in a conspicuously visible location in the room or hallway immediately inside the main or front door. The license for the facility shall indicate the permissible occupancy for the building and where applicable, the specified number of beds designated for each level of care. No facility shall have more patients than the number of beds for which licensed, except in case of an emergency when temporary permission may be granted by the Commissioner.

(j) <u>Emergency Care of Patients</u> - The facility shall have written policies and procedures governing the care of patients in an emergency, i.e., during a communicable disease episode; food poisoning outbreak; or when a patient is critically ill or mentally disturbed.

(1) Any occurrence of communicable diseases, as defined by section 8-5:104 of the District of Columbia Health Regulations, food poisoning or dysentery or other unusual occurrence which threatens the welfare, safety or health of any patient, shall be reported immediately by the examining physician to the Commissioner.

(2) The facility shall furnish such information related to such occurrences as the Commissioner may require.

(3) The patient's attending physician and next of kin and sponsor shall be notified of the emergency.

(k) <u>Rights of Patients</u> - A supportive environment shall be provided and maintained to promote self-esteem, personal dignity, and to insure that the patient's property and civil rights are respected and protected. The

## 16 61

following "rights and privileges" of the patient shall be in writing and a copy shall be given to each patient and sponsor upon admission:

(1) The Administrator shall not handle the personal business affairs of patients, without first being authorized to do so in writing by the patient, if competent, or if not, by his sponsor.

 (2) An accurate record shall be kept of all funds and personal property desposited for safekeeping with the facility for use by the patient. This record shall contain a listing of all deposits and all withdrawals made, substantiated by receipts. A copy of the record shall be presented to the patient and sponsor on a semi-annual basis and upon transfer or discharge from the facility.

(3) The facility shall provide for the safekeeping of possessions and valuables of patients if they request this service, <u>Provided That</u>, a limitation may be places on the dollar value of the valuables and possessions accepted by the facility. In such cases the patient or his sponsor shall be provided with a receipt for these items.

(4) Patients shall be encouraged and allowed to wear their own clothing. If clothing is provided by the facility, it shall be appropriate and it shall not be dehumanizing.

(5) Patient's mail shall be delivered unopened.

(6) Patients shall have access to a telephone or the right to have a private telephone.

(7) Provisions shall be made for patients, who so desire, to bring personal possessions and furnishings to their living quarters in the facility unless the facility can demonstrate that it is not practical or feasible or safe.

(8) Patients shall have the right of privacy in their rooms and facility personnel shall respect this right by knocking on the door before entering a patient's room.

(9) Physical and mental harassment or abuse of patient is prohibited.

(10) Each patient shall have the right to retain the services of his personal physician at his own expense if able or under medicare, medicaid or any other plan. When appropriate, the personal physician shall supply the health care facility with his medical findings after examining the patient.

(11) Provisions shall be made to meet the spiritual

needs of the patient by:

on any patient.

(A) Advising the proper clergyman, when requested by the patient or sponsor, of the patient's admission to the facility.

(B) Allowing patients to attend religious services of their choice in the community.

(12) No religious beliefs or practices shall be imposed

(13) Patients shall be provided the right of registration

35 36

37 38

39 40

41 42

43 44

45 46

47 48

49 50

51

52

53 54

55

56

57

58

59 60

#### REGULATION 74-15

17 61

and disposition of complaints without being intimidated by threat of discharge or 1 other reprisal. All patients, next of kin and/or sponsors shall be provided 2 3 with the address and telephone number of the local Social Security Office and 4 the District Licensing Office as designated by the Commissioner. 5 (1) <u>Insurance Coverage</u> - The facility shall carry 6 7 sufficient insurance to cover the four basic exposures: 8 (1) Hazard (fire, extended coverage and 9 10 vandalism) 11 (2) Consequential (indirect) loss from operation 12 13 breakdowns 14 (3) Theft 15 16 (4) Legal risk (liability) 17 (A) The liability insurance shall include 18 malpractice of at least \$100,000 and comprehensive general of at least \$300,000 -19 20 \$500,000. 21 22 (B) The facility shall carry Workmen's 23 Compensation insurance for all employees pursuant to section 36-501 of the 24 District of Columbia Code. 25 26 Section 2. - Administrative Records 27 (a) The Administrator shall maintain current and accurate 28 records which shall be on file and available at all times for inspection and review 29 30 by the Commissioner. 31 (b) Records related to patients - Within 30 days after 32 33

- the end of each calendar year, the Administrator shall report the following information to the Commissioner on appropriate forms to be provided by the Commissioner.
  - (1) Total admissions
  - (2) Total discharges
  - (3) Total number of deaths
  - (4) Authorized bed capacity
  - (5) Average daily bed occupancy
  - (6) Total days of care given
  - (7) Total number of autopsies
- (8) Aggregate number of patients receiving restorative services, dental services and podiatric services according to type of service.
- (c) Administrative Records Within 30 days after the end of each calendar year, the Administrator shall report the following administrative information to the Commissioner on appropriate forms to be provided by the Commission er.
  - (1) Payroll records

	18 	_of61
	(2)	Reports of fire inspection
	(3)	Compliance reports of Life Safety Code
6. 1.11	(4)	Report of inspection of fire alarm system and
fire drills		
	(5)	Report of elevator inspection
	(6)	Disaster plan and procedures
and curtains	(7)	Certification of flame spread rating of carpets
limited to the following: waste food service		Contracts for services including but not oval, exterminating service, linen service and
(if applicable)	(9)	Radiation survey report of x-ray equipment
restorative services, diagnosti services, social services, med	but c an lical	Contracts or written agreements for not limited to the following: physician service d laboratory services, dental services, podiatry records and dietary consultant services. pecify the number of hours to be provided.
facility shall maintain individuincluding but not limited to accept (e) New memory employee shall be assigned the	al re ider <u>Main</u> e res	sponsibility for assuring that records are
maintained, completed and pres and retained for at least 5 year		ed. All administrative records shall be filed
Section 3 Patien	t Cā	are Policies
and related medical and other s with the advice of a committee Director, the Director of Nursin	servi of p ng Se	shall be written policies to govern the nursing cices provided. These policies shall be developed or of the personnel, including the Medical ervices, one or more physicians and one or more include but not be limited to the following:
	(1)	Physician services
	(2)	Nursing services
	(3)	Dietary services
and speech therapy)	(4)	Restorative services (physical, occupational,
	(5)	Pharmaceutical services
	(6)	Diagnostic services
	(7)	
	, ,	
	(8)	Dental services

#### REGULATION 74-15 19 of 61 1 (9) Podiatry services 2 3 (10) Social services 4 5 (11) Patient activities 6 7 (12) Clinical records 8 9 (13) Utilization review 10 (14) Environmental controls, management and 11 12 safety 13 (15) Unusual occurences and incidents including 14 15 but not limited to accidents, injuries and drug errors. 16 (16) Infection control 17 (b) Policies shall be reviewed by the Committee at 18 least annually with written notation, signature, and date of review. 19 20 (c) The Administrator shall be responsible for the 21 execution of these policies. 22 23 Section 4. - Admission Policies 24 25 (a) Patients in need of nursing care shall be admitted 26 to the facility only upon the written recommendation of a physician. 27 28 (b) The facility shall secure patient information prior to, or at the time of admission, which shall include but not be limited to 29 30 the following: 31 32 (1) Current medical findings 33 34 (2) Diagnosis 35 36 (3) Treatment plan and rehabilitation potential 37 38 (4) Summary of the course of treatment followed 39 40 prior to admission 41 42 (5) Orders from a physician for the immediate 43 care of the patient 44 45 (c) A physical examination of the patient shall have 46 been performed not more than 5 days prior to admission, or performed within 48 47 hours after admission. 48 49 (d) If medical orders for the immediate care of a patient 50 are unobtainable at the time of admission, the Medical Director or Principal 51 Physician responsible for emergency care shall give temporary orders. 52 53

Section 5. - Physician Services and Medical Supervision of Patients

(a) A Medical Director or Principal Physician shall assume full responsibility for the overall supervision of medical care provided in the facility.

54 55

56

57

58 59

60

(b) All patients shall be under the supervision of a physician and shall be seen as often as their condition requires, but no less....

REGULATION 74-15
------------------

### 20<sub>of</sub> 61

than every 30 days.

- (1) The physician shall prescribe a planned regimen of medical care which covers the following: Medications and treatment, restorative services, diet, special procedures for the health and safety of the patient, patient activities and plans for continuing care and discharge.
- (2) Patient's total program of care shall be reviewed and revised at intervals appropriate to his needs, but no less than every 30 days.
- (3) Medications and treatments ordered shall be in effect for the specified number of days indicated by the physician, not to exceed a period of 30 days unless recorded in writing by the physician.
- (4) Telephone orders shall be accepted by qualified professional nurses only and recorded, and shall be countersigned by the physician within 48 hours.
- (5) The physician shall make arrangements for the medical care of the patient in his absence.
- (6) Documentation of the medical supervision of patient shall be evidenced by orders and progress notes in the patient's record, written and signed by the patient's physician.
- (7) Each patient shall have a comprehensive medical examination and evaluation of his health status at least every six months which shall be documented in the record. Clinical laboratory and other appropriate tests shall be given annually.
- (c) <u>Physicians for Emergency Care</u> The Administrator shall obtain a written agreement from one or more physicians to provide necessary medical care in case of an emergency.
- (1) A schedule listing the names and telephone numbers of each physician and the specific days each is on call shall be posted at each nursing station.
- (2) There shall be established procedures, written and posted, to be followed in an emergency, which cover the immediate care of the patient, persons to be notified, and reports to be prepared.

#### Section 6. - Nursing Services

- (a) <u>Nursing Service Requirements</u> A registered nurse shall be on duty at the facility on a 24-hour basis, 7 days per week. In addition, the facility shall provide 24-hour professional nursing service which is sufficient to meet the nursing needs of all patients as determined by the Commissioner.
- (b) <u>Director of Nursing Services</u> There shall be a registered nurse employed full time as Director of Nursing Services and who devotes full time to the nursing service of the facility.
- (1) The Director of Nursing Services shall be qualified by education and/or experience, with appropriate documentation, in specialty areas related to the facility.
  - (2) The Director of Nursing Services shall:

1 2 3	(A) Develop and maintain nursing objectives, standards of nursing practice, nursing procedures manuals, and written job descriptions for each level of nursing personnel.								
4 5 6 7	(B) Recommend to the Administrator the number and levels of nursing personnel to be employed, recruit and select, and recommend termination of employment when necessary.								
8 9 10	(C) Assign and supervise all levels of nursing personnel.								
11 12 13 14	(D) Participate in budget planning for nursing services.								
15 16 17	(E) Participate in the development and implementation of patient care policies.								
18 19 20	(F) Coordinate nursing services with other paramedical services.								
21 22 23	(G) Plan and conduct orientation programs for new nursing personnel and continuing inservice education for all nursing personnel.								
24 25 26	(H) Actively participate in the selection of prospective patients in terms of nursing staff available in the facility.								
26 27 28 29 30	(c) <u>Registered Nurses</u> - There shall be registered nurses employed on a 24-hour basis, 7 days per week to provide and supervise the nursing care of all patients.								
31 32 33	(1) A registered nurse shall be qualified by education and/or experience, with appropriate documentation, in specialty areas related to the facility.								
34 35 36	(2) A registered nurse shall:								
37 38 39	(A) Make daily rounds to all nursing units performing such functions as visiting patients, reviewing clinical records, medication orders and cards, patient care plans and staff assignments.								
40 41 42	(B) Accompany physicians when visiting patients								
43 44 45 46	(C) Have the ability to recognize significant changes in the condition of patients and take appropriate action.								
47 48 49	(d) Nursing Personnel - Nursing personnel shall be assigned duties consistent with their training and experience.								
50 51 52	(1) The amount of nursing time available for patient care shall be exclusive of non-nursing duties.								
53 54	(2) Sufficient nursing time shall be available to assure that each patient:								
55 56 57	(A) Receives treatments, medications and diet as prescribed.								
58 59	(B) Receives proper care to prevent decubiti.								

----of\_\_\_61

groomed.

(C) Is kept comfortable, clean and well

(D) Is treated with dignity, kindness,

consideration and respect.

(e) 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 24 hours a day, 7 days per week. The facility shall provide at least 2.4 hours of bedside nursing care per patient on a 24-hour basis, 7 days per week excluding the hours of the Director of Nursing Services and any assistant directors of nursing services. The following table sets out the required nursing service staffing:

### REQUIRED NURSING SERVICE STAFFING

	Bed Capacity								
	20 or Less	21-30	31-40	41-50	51-60	61-70	71-80	81-9-	91-100
Duty Hours	1 R.N.	1 R.N.	1 R.N.	1 R.N.	2 R. N.	2R.N.	2R.N.	2R.N.	2R.N.
7:00 A.M · 3:00 P.M.	2 N.P.	1 L. P. N. 2 N. P.	1L.P.N. 3 N.P.	2L.P.N. 3N.P.	2L.P.N. 4N.P.	3L.P.N. 4N.P.	3L.P.N. 5N.P.	3L.P.N. 6N.P.	3L.P.N. 7N.P.
3:00 P.M 11:00 P.M.	IR.N. IN.P.	1R.N. 1L.P.N. 1N.P.	lR. N. lL. P. N. 2N. P.	lR.N. 2L.P.N. 2N.P.	2R.N. 2L.P.N. 2N.P.	2R.N. 3L.P.N. 2N.P.	2R.N. 3L.P.N. 3N.P.	2R.N. 3L.P.N. 4N.P.	2R. N. 3L. P. N. 5N. P.
11:00 P.M 7:00 A.M.	lR.N. lN.P.	lR.N. lN.P.	lR.N. lL.P.N. lN.P.	lR.N. lL.P.N. 2N.P.	lR.N. 1L.P.N. 2N.P.	lr. N. 2L. P. N. 2N. P.	IR. N. 2L. P. N. 3N. P.	1R.N. 2L.P.N. 4N.P.	1R.N. 2L.P.N. 5N.P.

R.N. - Registered Nurse

L. P. N. - Licensed Practical Nurse.

N.P. - Nursing Personnel

#### REGULATION 74-15

## 24 61

In facilities with over 100 patient beds additional professional nurses and nursing personnel shall be employed to provide at least 2.4 hours of bedside nursing care per patient day on a 24-hour basis, 7 days per week, maintaining a staffing pattern as outlined in the table. If the facility provides more than one level of health care, i.e., skilled care and intermediate, etc., the nursing 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 &mi-annually, upon the written request of the licensee to the Commissioner.

- (f) <u>Restraint and Confinement</u> The facility shall have a written policy that defines the use of restraint and a procedure for monitoring the use consistent with the following requirements:
- (1) Physical restraints shall be employed only upon written order in the clinical record by a physician to protect the patient from injury to himself or to others.
- (2) Restraint shall not be employed as a means of punishment or for the convenience of the staff, or as a substitute for a therapeutic program.
- (3) Orders for restraint shall not be in force for longer than twelve (12) hours, subject to written renewal by a physician.
- (4) A patient placed in restraint shall be checked at least every 30 minutes by nursing personnel trained in the use of restraint. A record of each check shall be maintained in the patient's clinical record.
- (5) Mechanical restraint shall be designed and used so as not to cause physical injury to the patient and used so as to cause the least possible discomfort.
- (6) Motion and exercise shall be provided for a period of not less than 10 minutes during each 2 hour period of restraint.
- (7) Confinement of a patient in a locked room shall be prohibited.
- (8) Totally enclosed beds and barred enclosures shall be considered restraint.
- (9) Drugs shall not be used excessively, as punishment, for the convenience of staff, as a substitute for therapeutic programs or in quantities that interfere with a patient's rehabilitation potential or activities of daily living.
- (g) <u>Restorative Nursing Care Program</u> The facility shall have a restorative nursing care program directed toward assisting each patient to achieve and maintain the highest level of self-care, esteem, and independence.
- (1) Restorative nursing care initiated in the hospital shall be continued immediately upon admission to the facility.
- (2) The nursing staff shall evaluate the rehabilitation potential of all patients and make recommendations to the physician for appropriate orders.
  - (3) The nursing staff shall practice restorative

60

## REGULATION 74-15

# 25\_of\_\_61

1	nursing skills in their daily care of patients. These skills shall include:							
2 3	(A) Maintaining good body alignment							
4	and proper positioning of bedfast patients.							
5 6 7 8	(B) Encouraging and assisting bedfast patients to change position at least every two (2) hours, day and night to stimulate circulation and prevent decubiti and deformities.							
9 10 11 12 13	(C) Keeping patients active and out of bed for reasonable periods of time, except when contradicted by physician's orders.							
14 15 16 17	(D) Encouraging patients to achieve independence in activities of daily living by teaching self-care, transfer and ambulation activities and by redirecting their interests if necessary.							
18 19	(E) Assisting patients to adjust to their disabilities and to use their prosthetic devices.							
20 21 22 23	(F) Achieving good body alignment and balance of patients using mechanical supports which are properly designed and applied under the supervision of a professional nurse.							
24 25 26	(G) Initiating a bladder and bowel training program for the incontinent patient.							
27 28 29	(H) Assisting patients to carry out prescribed physical therapy exercises between visits by the physical therapist.							
30 31 32 33 34 35 36	(h) <u>Inservice Education Program</u> - There shall be an inservice education program in effect for all nursing personnel in addition to detailed job orientation for new personnel. Inservice programs shall be scheduled and conducted monthly for all nursing personnel on each tour of duty, and records of these programs shall be maintained and available for review by the Commissioner. Inservice programs shall include but not be limited to the following:							
37 38 39	(1) Emergency procedures, disaster plans and fire evacuation plans.							
40 41 42	(2) Speciality areas related to the facility.							
43 44	(3) Drugs, therapeutics and pharmaceutical services.							
45 46	(4) Dietary needs and services.							
47 48	(5) Patient care plans and policies							
49 50	(6) Clinical records, reporting and recording policies and procedures.							
51 52 53 54	(7) Social and psychological aspects of patient care.							
55 56	(8) Restorative services, physical therapy, occupational therapy and speech therapy.							
57 58 59	(9) Dental needs and services.							

(10) Podiatry needs and services.

#### 26 of 61

- (11) Therapeutic patient activities.
- (12) Infection control

Nursing personnel shall be encouraged by the Administrator and Director of Nursing Services to attend education and training programs, conducted in the community, that relate to patient care.

- (i) <u>Nursing Care Plan</u> There shall be a written nursi ng care plan for each patient including diagnosis, treatment prescribed, long and short-term goals and other pertinent information.
- (1) The nursing care plan shall include daily nursing care needs. How these needs can best be met, patient's preferences, dietary needs, methods and approaches recommended, and modifications necessary to insure best results.
- (2) Nursing care plans shall be available for use by all personnel responsible for rendering direct services to patients.
- (3) Nursing care plans shall be reviewed and revised by the registered nurse as needed, at least every 30 days, and signed and dated by the registered nurse.
- (4) Relevant nursing information from the nursing care plan shall be included with other medical information when patients are transferred.
- Infection Control Committee composed of members of the medical, nursing, administrative, dietary, pharmacy, housekeeping, maintenance and other services. The Committee shall establish policies and procedures for investigating, controlling and preventing infections in the facility. The Committee shall monitor staff performance to insure that the policies and procedures are executed. The Committee shall conduct quarterly meetings and keep minutes for review by the Commissioner. The infection control policies and procedures shall be reviewed annually and revised as needed. Environmental Services including housekeeping, pest control, laundry, and linen supply shall be in accordance with sections 16 through 20 of this title.
- (j)  $\underline{\text{Dietary Supervision}}$  The dietary needs of each patient shall be documented in the nursing care plan.
- (1) Nursing personnel shall observe in the record that patients are served diets as prescribed.
- (2) Patients needing assistance in eating shall be given such assistance promptly upon receipt of meals.
- (3) Adaptive devices shall be provided to contribute to the patient's independence in eating.
- (4) Food and fluid intake of patients shall be observed and deviations from normal recorded, and reported to the Director of Nursing Services, physician and dietitian.

### Section 7. - Dietary Services

(a) The facility shall provide qualified dietary and food service personnel to meet the general and specific needs of all patients. All

#### 27<sub>of</sub> 61

food and drink shall be clean, wholesome, free from spoilage, and so prepared as to be safe for human consumption and served in accordance with title 8, chapter 6, part 1 of the D.C. Health Regulations. Specific dietary services shall be in accordance with the following:

(1) <u>Supervision</u> - The individual responsible for total food service shall be a dietitian or food service manager who receives regularly scheduled consultation no less than four (4) hours per week from a dietitian, or the facility shall employ a contract food service fulfilling the same requirements.

(2) <u>Staffing</u> - The required ratio of full time food service personnel including relief personnel to patients shall be no less than (1) one food service worker to every ten (10) patients to insure that the dietary needs of patients are met. There shall be food service employees on duty for a period of 12 or more hours per day, seven (7) days per week. Dietary supervisory personnel shall not be included in the staffing ratio.

(3) Menus - Menus shall be planned at least one week in advance and the current week's menu posted in the food preparation area. All changes in menu shall be recorded. Standard routine diet modifications appropriate to the needs of individual patients shall be prepared by the dietitian or dietary consultant and posted as a supplement to the menu. Substitutions of equal nutritive value shall be offered to patients in the event that food is refused.

 (4) <u>Inservice Education</u> - A regularly scheduled program of inservice education shall be conducted for all food service personnel. Records shall be maintained on such inservice programs and shall be available for review by the Commissioner.

(5) <u>Employee Records</u> - Current employee records shall be maintained and shall include a resume of each employee's training and experience, evidence of health examinations, reports of accidents occuring on duty, and work assignments consistent with employee qualifications.

(6) <u>Health Examinations</u> - All food service personnel shall have pre-employment and annual physical examinations by a licensed physician, and shall be certified by him in writing as having no evidence of communicable disease or carrier state, and as being in good health. The health examination shall include a medical history, physical examination by the physician, chest x-ray and such other laboratory tests including stool cultures as may be indicated. The certificate of health shall be kept on file in the Administrator's office and shall be available for inspection by the Commissioner.

(7) <u>Employees Clothing</u> - Food service employees shall wear clean, washable garments while working and shall keep their hands clean at all times. All female employees shall wear hairnets and all male employees shall have clean hair or head coverings while engaged in the preparation and serving of food. No tobacco products shall be used nor shall smoking be permitted, in any food preparation area.

(b) The facility shall meet the following general dietary requirements:

(1) Three or more meals a day shall be served. In addition, to the extent medically possible, snacks and bedtime nourishment shall be offered.

(2) Meals shall be scheduled so that the maximum interval between meals is five (5) hours, except that there shall be

58 59

60

30 days.

be filed and retained for 90 days.

## REGULATION 74-15

(2) Record of food purchased for preparation shall

## 28 of 61

	of				
1 2 3	no more than 14 hours between a substantial evening meal and breakfast the following day.				
4 5 6	(3) The minimum daily food requirement for each patient, unless otherwise ordered by the patient's physician, shall be:				
7 8 9	(A) Two or more 8 ounce cups of milk or milk products.				
10 11 12	(B) Two or more servings (4 to 6 ounces cooked weight) of protein (meat, fish, eggs or poultry).				
13 14 15	(C) Two or more servings of fruit, one of which shall include citrus fruit or other good source of vitamin C.				
16 17 18 19	(D) Two or more servings of vegetables, one of which shall include a dark green or deep yellow vegetable as a source of vitamin A.				
20 21 22	(E) Four or more servings of whole grain or enriched bread or cereal.				
23 24 25	(F) Other foods needed to complete meals and to provide additional food energy to fulfill caloric needs.				
26 27 28	(4) Feeding assistance shall be provided to patients who are blind or otherwise handicapped.				
29 30 31 32 33	(5) Provisions shall be made for group dining. If patients are unable to go to the central dining room, a convenient area closer to their living quarters shall be designated for group dining pursuant to section 18(d) of this title.				
34 35	(c) Nutritional requirements shall be in accordance with:				
36 (1) Physician's orders and, to the extent 37 medically possible, meet the dietary allowances of the Food and Nutrition 38 of the National Academy of Science, adjusted for age, sex and activity. 39					
40 41 42 43 44 45 46 47 48	(2) <u>Therapeutic Diets</u> - Special (modified) diets shall be prescribed by the attending physician and prepared under the guidance of a Dietitian. The diet prescription shall be a part of the patient's clinical record. Changes in diet orders, authorized by the physician, shall be forwarded in writing to the kitchen and notation made in the patient's clinical chart. In the absence of the dietitian, the food service manager shall have sufficient knowledge of food values to make appropriate substitutions when necessary.				
49 50 51 52	(3) The dietitian shall have access to the patient's clinical record and shall document all observations, consultations and instructions regarding patient acceptance and tolerance of prescribed diets.				
52 53 54 55	(d) <u>Dietary Records</u> - The following records shall be maintained and available for review by the Commissioner:				
56	(1) Menus as served shall be filed and retained for				

	28 61 of
1 2 3	no more than 14 hours between a substantial evening meal and breakfast the following day.
4 5 6	(3) The minimum daily food requirement for each patient, unless otherwise ordered by the patient's physician, shall be:
7 8	(A) Two or more 8 ounce cups of milk or milk products.
9 10 11	(B) Two or more servings (4 to 6 ounces cooked weight) of protein (meat, fish, eggs or poultry).
12 13 14	(C) Two or more servings of fruit, one of which shall include citrus fruit or other good source of vitamin C.
15 16 17 18 19	(D) Two or more servings of vegetables, one of which shall include a dark green or deep yellow vegetable as a source of vitamin A.
20 21 22	(E) Four or more servings of whole grain or enriched bread or cereal.
23 24 25	(F) Other foods needed to complete meals and to provide additional food energy to fulfill caloric needs.
26 27 28	(4) Feeding assistance shall be provided to patients who are blind or otherwise handicapped.
29 30 31 32 33	(5) Provisions shall be made for group dining. If patients are unable to go to the central dining room, a convenient area closer to their living quarters shall be designated for group dining pursuant to section 18(d) of this title.
34 35	(c) Nutritional requirements shall be in accordance with:
36 37 38 39	(1) Physician's orders and, to the extent medically possible, meet the dietary allowances of the Food and Nutrition Board of the National Academy of Science, adjusted for age, sex and activity.
40 41 42 43 44 45 46 47 48	(2) <u>Therapeutic Diets</u> - Special (modified) diets shall be prescribed by the attending physician and prepared under the guidance of a Dietitian. The diet prescription shall be a part of the patient's clinical record. Changes in diet orders, authorized by the physician, shall be forwarded in writing to the kitchen and notation made in the patient's clinical chart. In the absence of the dietitian, the food service manager shall have sufficient knowledge of food values to make appropriate substitutions when necessary.
49 50 51 52	(3) The dietitian shall have access to the patient's clinical record and shall document all observations, consultations and instructions regarding patient acceptance and tolerance of prescribed diets.
53 54	(d) <u>Dietary Records</u> - The following records shall be maintained and available for review by the Commissioner:

30 days.

> (2) Record of food purchased for preparation shall be filed and retained for 90 days.

(1) Menus as served shall be filed and retained for

REGULATION	74-15	

## 29 61

- (e) <u>Diet Manual</u> A current diet manual recommended by the Commissioner shall be readily available to food service personnel and supervisors of nursing service.
- (f) <u>Tested Recipes</u> A file of tested recipes adjusted to appropriate yield shall be maintained and used by all personnel engaged in food preparation.
- (g) <u>Food on Hand</u> Supplies of staple nonperishable food for a minimum of a one-week period, and of perishable foods for a minimum of a two-day period shall be maintained on the premises.
- (h) <u>Budget</u> The dietitian or food service manager shall participate in planning and budgeting for the dietary needs of all patients and shall be responsible for determining the quantity, quality and variety of food purchased.

#### Section 8. - Restorative Services

- (a) The facility shall provide directly or through written contract physical therapy, occupational therapy and speech therapy services to meet the physical needs of all patients, in addition to restorative nursing care.
- (b) Restorative services shall be administered in accordance with physician's orders and by a physical therapist, occupational therapist and speech pathologist or audiologist.
- (c) Restorative services assistants shall be employed by the facility to assist the therapists in performing functions not requiring therapy expertise. Restorative services assistants shall receive continuing onthe-job training under the supervision of the therapists.
- (d) Restorative services, including modalities to be used, frequency, and anticipated goals shall be written and included as part of the total patient care plan.
- (e) Therapists' treatment plan and progress notes for each patient shall be signed, dated and made a part of the patient's complete clinical record.
- (1) Patients receiving therapy shall be re-evaluated by the physician and therapist at least every 30 days. There shall be documentation of the evaluation included in the patient's clinical record.
- (2) Therapist's progress notes shall be informative to the physician and nursing personnel so that the patient's activity can be maintained and supported by nursing personnel.
- (f) The facility shall provide therapy services areas of sufficient size to accommodate and store necessary equipment and supplies and to facilitate movement of disabled patients pursuant to section 18(f) of this title.
- (g) Each therapist shall participate in preparing a budget and determine the need for equipment necessary for services provided. Each therapist shall advise the Administrator of the need for equipment purchase, rental, storage and maintenance of same.
- (h) There shall be regularly scheduled inservice education programs for therapy staff. Records of these programs shall be kept on file and available for inspection by the Commissioner.

REGULATION 7	4-15
--------------	------

## 30 of 61

#### Section 9. - Pharmaceutical Services

- (a) District and Federal laws, regulations, standards, administrative guidelines and rules regulating the procurement, handling, storage, administering and recording of drugs shall be complied with.
- (b) The facility shall have written methods and procedures for its pharmaceutical services developed by a staff pharmacist, a consultant pharmacist, or a pharmaceutical advisory committee which shall include one or more licensed pharmacists. These written methods and procedures shall be in accordance with accepted professional pharmaceutical practices, shall be reviewed annually and shall be approved by the Commissioner.
- (1) If the facility has a pharmacy, a licensed pharmacist shall be employed to administer the pharmacy department.
- (2) If the facility does not have a pharmacy, it shall have procedures for promptly and conveniently obtaining prescribed drugs and biologicals from community pharmacists and shall employ a consultant pharmacist.
- (3) If the facility does not have a pharmacy, but does maintain a supply of drugs:
- (A) The consultant pharmacist shall be responsible for the control of all bulk drugs and maintain records of their receipt and disposition.
- (B) The consultant pharmacist shall dispense drugs from the drug supply, properly label them and shall make them available to appropriate professional nursing personnel.
- (C) Provision shall be made for emergency withdrawl of medications from the drug supply.

#### (c) Physician Orders

- (1) All medications administered to patients shall be ordered in writing by the patient's physician.
- (A) Oral (telephone) orders shall be given only to a professional nurse, immediately reduced to writing in the patient's clinical record, signed by the professional nurse, and countersigned by the physician within 48 hours.
- (B) Medication orders shall contain specific instructions as to dosage per time interval, (hours, day, week, months), the time when the medication is to be administered and the route of administration, whether orally, intramuscularly, intravenously, rectally, etc.
- (C) The physician shall note on the patient's clinical record when applicable, the condition(s) for which the medication has been ordered, expected reactions or possible adverse reactions, and procedures for attending to such expected or possible reactions.
- (2) <u>Medication Stop Order Policies</u> The facility shall have written "medication stop order policies" approved by the Medical Director to ensure that a medication is administered correctly and for only as long a period as is necessary.

. . . . .

## 31 61

 (A) The registered nurse and the prescribing physician together shall review monthly each patient's medications. Such review shall be signed and dated by the physician in the patient's clinical record.

(B) The patient's attending physician shall be notified of stop order policies and contacted promptly by the professional nurse for renewal of medication orders to provide continuity of the patient's therapeutic regimen.

(C) Orders for anticoagulant drugs shall be re-affirmed every 72 hours by the attending physician.

(d) Administration of Medications - All medications shall be prepared and administered only by a physician or by professional nursing personnel. Each administered dose shall be properly and promptly recorded and initialed in the patient's clinical record by the person administering the medication. Items necessary for the proper preparation and administration of medications shall be available at the nursing station.

(1) Medications shall be prepared immediately preceding administration and the person preparing the medication must administer the medication.

(2) In administering medications, medication cards or other systems approved by the Commissioner shall be used and checked against the physician's order. The physician or professional nurse administering the medication shall personally verify the identity of the patient immediately before administering the medication.

(3) Medication errors and drug reactions shall be immediately reported to the patient's physician and an entry thereof made in the patient's clinical record as well as on an incident report.

(4) Refusal of medications by a patient shall be documented on his clinical record and reported immediately to his attending physician.

(5) Self-administration of medications by patients is prohibited, except for emergency drugs on special order of the patient's physician, or in a pre-discharge program under the supervision of a professional nurse.

(6) Medications shall be released to patients on discharge only on the written authorization of the patient's physician.

(7) Up-to-date medication reference texts and sources of information such as tests on pharmacology, posology, the <u>Physician's Desk Reference</u> or the <u>American Society of Hospital Pharmacists Formulary shall be provided by the Administrator.</u>

(e) <u>Labeling and Storage of Medications</u> - Medications shall be stored in a locked cabinet at the nurse's station. Cabinets shall be well lighted and of sufficient size to permit storage without crowding and shall be maintained in a clean and orderly manner. Medication preparation areas shall be of sufficient size, well lighted and shall have counters which are constructed of non-porous, easily cleanable materials; shall have a pharmaceutical sink, and a climate conditioning to insure proper storage temperatures for the medications.

(1) All medications shall be labeled by a pharmacist and such label shall contain the following information.

(A) Patient's full name

\*\* 110

32 ----61

1 2	
3 4	
5	
7	
8 9	
10	
12	
13 14	
15 16	
17 18	
19	
21	
22 23	
24 25	
26	
28	
2 3 4 5 6 7 8 9 10 11 2 13 14 15 16 17 18 19 20 21 22 32 24 25 6 27 28 9 31 32 33 33 33 34 34 34 34 34 34 34 34 34 34	
31 32	
33 34	
35 36	
37	
38 39	
40 41	
41 42 43	
44	
45 46 47	
48	
49 50	
51 52	
53	
54 55	
56 57	

58

59 60

- (B) Physician's full name
- (C) Prescription number
- (D) Date of issue
- (E) Name and strength of drug
- (F) Expiration date of all time-dated drugs
- (G) Name, address and telephone number of

the pharmacy issuing the drug

(H) If the drug is dispensed under its "generic"name, the manufacturer's name and the lot or control number shall also appear on the label.

(2) Labels shall be securely affixed to the outside of medication containers and shall be properly protected with transparent tapes or other suitable means.

(3) The medications of each patient shall be kept and stored in their original containers. There shall be no transferring of of medications between containers.

(4) Medications requiring refrigeration shall be kept in a pharmaceutical refrigerator, or in a separate locked compartment within a refrigerator at or near the nursing station. All refrigeration used for storage of medications shall have thermometers which are easily readable, in proper working condition and accurate within a range of plus or minus two degrees.

(5) Medications labelled for "external use" or "poison" shall be kept separate from other medications in a locked cabinet.

(6) Medication containers having soiled, damaged, illegible or otherwise incomplete labels shall either be returned to the issuing pharmacist for relabeling or shall be properly destroyed. Nursing personnel shall not package, repackage, return to containers nor label in whole, or in part, any medications, nor alter in any way a medication label.

(7) Medications having an expiration date shall be removed from usage and properly destroyed after such date. Medications no longer in use, or medications, or written prescriptions for patients who have left the facility shall be properly destroyed. Such disposal shall be witnessed by an authorized representative of the facility and a signed notation shall be made on the patient's chart.

#### (f) Control of "Controlled Substances"

(1) The facility shall comply with all District and Federal laws relating to the procurement, storage, dispensing, administration and disposal of all "Controlled Substances" as defined by 21 U.S. Code section 803(6).

(2) Double-locked cabinets, or securely fastened, locked boxes or drawers within lockable medicine cabinets, shall be provided for the storage of all substances controlled by the "Comprehensive Drug Abuse Prevention and Control Act of 1970."

33 63

- (a) The facility shall have a written agreement with a physician or licensed laboratory, approved by the District for obtaining required clinical laboratory, x-ray, audiological, ophthalmologic, and other diagnostic services.
- (b) The physician having ordered the laboratory work, shall be promptly notified by the Director of Nursing Services of the test results.
- (c) Arrangements shall be made by the facility for transportation of patients, if necessary, to and from source of diagnostic services.
- (d) All diagnostic reports shall be included in the clinical record.

#### Section 11. - Dental and Podiatric Services

- (a) The facility shall have a written agreement with a dentist for obtaining regular and emergency dental services. Dental services shall include diagnostic, preventive, educational, consultative, or corrective procedures administered by or under the supervision of a dentist.
- (b) Dental care shall be rendered upon need or request of the patient or sponsor.
- (c) The facility shall have a written agreement with a podiatrist for obtaining routine and emergency podiatric services. Podiatric services shall include direct services to patients, as well as consultation and inservice training for nursing personnel.
- (d) Appropriate space and equipment with proper maintenance shall be provided in the facility for dental and podiatric services, or transportation shall be arranged by the facility for patients to visit the dentist's or podiatrist's office.
- (e) Medications or treatments prescribed by the dentist or podiatrist shall be in writing and included as part of the patient's clinical record. Nursing personnel shall assist patients in carrying out the dentist's or podiatrist's orders.
- (f) Reports of treatment by the dentist or podiatrist shall be documented at the time of each visit, and included in the clinical record of each patient.

#### Section 12. - Social Services

- (a) The facility shall provide social services, directly or through contractual services, to meet the medically related social needs of patients.
- (b) There shall be a Social Worker in the facility who has the responsibility for recognizing social problems and taking necessary action to solve them.
- (c) A complete social evaluation of each patient shall be made as soon as possible after admission to identify patient's needs. A plan shall be formulated to meet these needs during his treatment and care in the facility and in planning for his discharge.
  - (d) The social evaluation, plan of care, all social  $\cdots$

34 61

service activity and reports shall be incorporated in the patient's clinical record.

(e) The Social Worker shall participate in clinical staff conferences, including utilization review committee meetings, and confer with attending physicians at intervals during the patient's stay in the facility, and prior to discharge of the patient.

(f) The Social Worker shall plan for orientation and inservice education programs, case conferences, and staff orientation to community services.

#### <u>Section 13 - Patient Activities</u>

(a) Patient activities suited to the needs and interests of all patients shall be provided as an important therapeutic adjunct to the active treatment program and to encourage restoration to self-care and resumption of normal activities of daily living. A patient's activity program shall include, but not be limited to, active, passive, individual and group activities directed toward stimulating interest and participation in hobbies, music, drama, arts and crafts, and social functions. Suitable activities shall be provided for patients who are unable to leave their rooms. Patients shall be encouraged but not forced to participate in patient activity programs.

(b) <u>Director of Patient Activities</u> - In facilities of 50 or more beds, a Director of Patient Activities shall be employed to plan, organize and direct a daily patient activity program. This individual shall hold current registration in the National Therapeutic Recreation Society as a therapeutic recreation specialist or possess qualifications necessary for such registration and shall be required to work the number of hours per week as prescribed.

(c) Patient Activities Specialist - A patient activities specialist is a person who works under the direct supervision of the Director of Patient Activities when appropriate. This individual meets the qualifications necessary for registration as a Therapeutic Specialist in the National Therapeutic Recreation Society, or has two (2) years full time paid experience in a health care facility, or (60) sixty hours of specialized training in therapeutic recreation and patient activities. If the patient activities specialist is employed in a facility with fewer than 50 beds which does not employ a Director of Patient Activities, the non-registered patient activities specialist must receive at least (16) sixteen hours of consultation per month, from a person who meets the qualifications of a Director of Patient Activities. The number of patient activities specialists and hours of work required shall be determined by the following table:

NUMBER OF BEDS	HOURS REQUIRED	RESPONSIBLE PERSONS
1-10 beds	10 hours per week (at least 3 days)	Administrator/owner or patient activities specialist
11-29 beds	20 hours per week (at least 5 days)	patient activities specialist
30-49 beds	30 hours per week (at least 5 days)	patient activities specialist
50-100 beds	60 hours per week	Director of Patient Activities l patient activities specialist

\*\* \*\*\*

35 61

For additional beds, the following shall be required: 2 3 l-29 additional 1 Director of Patient Activities 20 hours per week 4 beds (5 days) l patient activities specialist 5 (for total 80 hours per 6 week) 7 8 30-50 additional beds 30 hours per week l Director of Patient 9 Activities 10 2 patient activities specialists 11 (for total 90 hours per week) 12 13 51-100 additional beds 60 hours per week l Director of Patient 14 Activities 15 2 patient activities 16 specialists (for total 120 17 hours per week) 18 19 The ratio of patient activity specialists to residents shall be no less than one (1) 20 activity specialist to every fifty (50) residents. (d) In addition to staff requirements, activity program schedules and execution of same shall be approved by the Commissioner.

## (e) Qualifications and Responsibilities of the Director

#### of Patient Activities

(1) The Director of Patient Activities shall supervise the activity specialists and coordinate their activities with nursing, social services, physical therapy, and dietary and other services.

(2) In the absence of a Director of Volunteers, the Director of Patient Activities shall be responsible for recruitment, training and supervision of patient activity volunteers, if volunteers are used.

(3) The Director of Patient Activities shall make the fullest possible use of community, social and recreational resources.

(4) The Director of Patient Activities shall evaluate all patients on admission to determine their therapeutic and diversional needs. These evaluations shall be reviewed every 90 days and signed, dated, and incorporated in the patient's clinical record.

(5) The Director of Patient Activities shall prepare a detailed budget and determine the type of equipment and supplies necessary to provide adequate programs, and shall advise the administrator regarding the purchase, storage and maintenance of same.

(6) The Director of Patient Activities shall prepare a calendar of regular monthly activities and post this calendar in conspicuous locations. The entire activity program shall be reviewed and updated at least every 6 months.

(7) The Director of Patient Activities shall attend facility staff meetings.

(f) Provision of Space - Appropriate space shall

### 36 of 61

be provided for recreational activities to accommodate and store necessary equipment and supplies and to facilitate movement of disabled persons, i.e., wheelchair.

#### (g) <u>Inservice Education</u>

- (1) A regularly scheduled program of inservice education shall be conducted for all patient activity staff, volunteers, and other facility personnel.
- (2) These programs shall include community involvement and be directed towards interpreting the aims and methods of the activity programs.
- (3) Records of all inservice education programs shall be maintained and shall be available for review by the Commissioner.

#### Section 14. - Clinical Records

- (a) A clinical record shall be established and maintained for each patient admitted to the facility, and all information contained therein shall be treated as confidential. A Medical Records Practitioner, or qualified employee of the facility, shall be employed full-time and assigned the responsibility for assuring that records are maintained, completed and preserved. If the facility does not employ a Medical Records Practitioner the designated employee shall be trained by and receive regular consultation from a person so qualified.
- (b) The clinical record shall serve as a basis for planning patient care and shall provide a means of communication between the physician and other professional disciplines contributing to the patient's care.
- (c) The clinical record shall furnish documentary evidence of the course of the patient's illness and treatment and shall serve as a basis for review, study and evaluation of the medical care rendered to the patient.
- (d) The forms appropriate for use in maintaining the clinical records shall be subject to approval by the Commissioner.
- (l) <u>Composition of Record</u> Each clinical record, with all entries kept current, dated, and signed with full signatures and discipline identification, shall include but not be limited to the following:
- (A) <u>Patient Register:</u> The patient's name age, sex, marital status, social security, medicaid numbers, home address, religion, and date admitted; names, addresses and telephone numbers of personal physician, dentist, next of kin or sponsor; admitting diagnosis, final diagnosis, condition on discharge, disposition, date of discharge, and any other information required by the Commissioner.
- (B) <u>Transfer Information</u>: A hospital discharge summary or transfer form from attending physician.
- (C) <u>Medical Evaluation</u>: Patient's medical history, physical examination, diagnosis, prognosis, and an estimation of rehabilitation potential.
- (D) <u>Physician's Orders</u>: All medications, diet, treatment and rehabilitation procedures required for the safety and well.

37 of 61

Ţ
2
3
4
5
6
7
8

#### (E) Physician's Progress Notes:

(1) Shall be written at the time of observation to describe significant changes in the patient's condition, when medication and treatment orders are changed, and when the patient's condition remains stable to indicate a status quo condition.

(2) At least a monthly statement

note shall be entered.

being of the patient.

- (3) On discharge, the patient's medical experience shall be summarized by the attending physician.
- (F) <u>Medication and Treatment:</u> A daily record of all medications and treatment given.
- (G) <u>Nursing Notes</u>: Shall be kept daily and in accordance with the policies of the nursing service.
- (H) <u>Physician's Consultative Reports:</u> Statement of medical consultants of various disciplines concerning the patients status and treatment.

#### (I) Laboratory, X-ray and Diagnostic

#### Reports

- (J) <u>Service Reports:</u> On-going reports of physical therapy, occupational therapy, speech therapy, podiatry, dental, patient activity and nutritional and social services.
- (K) <u>Accident or Incident Reports:</u> Detailed reports of any unusual occurrences, including medication reactions.
- (L) <u>List of Patient's Personal Belongings</u>: Shall be made at the time of admission, and updated at appropriate intervals.
- (2) <u>Patient Care Plan</u> A comprehensive patient care plan shall be developed and maintained for each patient and readily available to all personnel involved in rendering direct services to patient.
- (A) The patient care plan shall be inclusive and shall indicate the patient's needs with appropriate orders for the following services: Nursing, restorative, dietary, dental, diagnostic, patient activity, social and podiatry.
- (B) Upon discharge, the patient care plan shall be incorporated in the clinical records.
- (3) <u>Retention of Records</u> All clinical records of discharged patients shall be completed within 15 days and shall be filed and retained for at least 5 years.

#### <u>Section 15. - Utilization Review</u>

(a) A utilization review plan shall be developed with the advice of the committee of professional personnel responsible for promulgation and enforcement of patient care policies pursuant to section 3 of this title.

## 38 61

(b) Utilization reviews shall be made, on a sample or other basis, of admissions, duration of stay, and professional services furnished for the purpose of analyzing the medical necessity of the services, and of promoting the most effective use of available health facilities and services. Such reviews shall emphasize identification and analysis of patterns of patient care in order to maintain consistent high quality.

(c) <u>Utilization Review Plan</u> - The facility shall have a written description of its utilization review plan which shall include:

(1) Frequency of meetings

(2) The type of records to be kept

(3) The method to be used in selecting cases on a sample or other basis

(4) The definition of what constitutes the period or periods of extended duration

(5) Arrangements for committee reports and

(6) Responsibilities of the facility's administrative staff in support of utilization review

(d) <u>Composition of the Utilization Review Committee</u> - The utilization review committee shall include:

(1) Two or more physicians, with the inclusion of other professional personnel, or

(2) A committee or group outside the facility composed of two or more physicians which is established by a  $l \propto al$  medical society, and some or all of the hospitals and extended care facilities in the locality.

their dissemination

#### REGULATION 74-15

#### 39 of 61

#### Section 16. Environmental Requirements

(a) Skilled care facilities shall be designed, constructed, located, equipped and maintained to provide a functional, healthful, safe, comfortable and supportive environment for all persons using the facilities. The physical plant of skilled care facilities shall provide maximum environmental support for the goals of services offered and shall be responsive to the needs of patients, staff and the visiting public.

## (b) Criteria for appropriate location of skilled care facilities.

(1) Accompanying the plans and program information required by section 17 (a) of this title, a statement of compliance with the following criteria for location of facilities shall be submitted to the Commissioner:

(A) Facilities shall be accessible to the fullest extent possible to the patient groups served. Facilites shall be located on or near major streets and roads and along, or within easy walking distance of public transportation routes and shopping areas. Location in a remote area will not be acceptable except where it can be shown that there is a special need for services in such an area.

(B) Skilled care facilities shall be located in areas containing, and shall be located reasonably near, a sufficient number and variety of community resources to carry out all contractural and in-house program requirements including but not limited to those listed in sections 1, 5 and 13 of title 5 of this regulation, such as hospital services, patient activity programs, volunteer participation, etc.

(C) Ambient Noise Level-Skilled care facilities shall not be located in proximity to sources of loud, continuous, or impact noises. The facility shall be remotely located from railroads, factories, airports, and similar noise sources. The ambient noise level at the proposed sites of new skilled care facilities shall not exceed 55 decibels during the day and 50 decibels at night in residential or special purpose zones, or 60 decibels during the day and 55 decibels at night in commercial zones, and shall otherwise comply with any District of Columbia regulation relating to noise control standards.

(D) <u>Air Pollution</u>-Skilled care facilities shall be located in areas reasonably free from noxious and hazardous smoke and fumes, and the location of these facilities shall otherwise be in compliance with the Air Quality Control Regulations of the District of Columbia (D.C. Council Reg. No. 72-12, as amended).

(2) The Commissioner shall develop additional guidelines to assure the appropriate and equitable location of skilled care facilities throughout the District.

## Section 17. Physical Structure and Construction Requirements

(a) <u>Procedure for review</u>-Before a skilled care facility is constructed, added to, or remodelled, or before an existing structure is converted for use as a skilled care facility, properly prepared plans, specifications, a study indicating facility elevator needs, and a program statement indicating location

#### REGULATION 74-15

#### 40\_of\_61

and use of rooms, and the location, size and type of fixed equipment, shall be submitted to the Commissioner for review and approval before a permit for such construction is issued.

#### (b) Applicable General Codes.

(1) The physical plant of a skilled care facility shall conform to all applicable portions of the Housing Regulations of the District of Columbia, and shall meet all other applicable District rules and regulations. All new construction of skilled care facilities, and all additions to, repairs and remodeling of existing buildings used for these facilities, shall conform to the District of Columbia Building Code (Title 5A-1, District of Columbia Rules and Regulations, hereafter referred to as DCRR), to all other applicable District of Columbia rules and regulations, to the National Fire Protection Association (NFPA) Standard No. 101 (1967), Section 10-1, "Hospitals, Nursing Homes and Residential-Custodial Care Occupancies," and to the American National Standards Institute, Inc. Document No. A 117.1-1961, "American Standards Institute, Inc. Document No. A 117.1-1961, "American Standard Specifications for Making Buildings and Facilities Accessible to, Usable by, the Physically Handicapped." All new construction for skilled care facilities shall comply with the minimum requirements of the Hill-Burton Program (administered by the Health Services and Mental Health Administration of the U.S. Department of Health, Education and Welfare), as specified in "General Standards for Construction and Equipment for Hospital and Medical Facilities," Section 9: Facility for Long-Term Care - Nursing Homes. and Chronic Disease Hospitals, Public Health Service publication No. 930-A-7, as revised, 1969, (hereafter referred to as Hill-Burton standards).

(2) All additions to existing skilled care facilities shall comply with the minimum standards of Hill-Burton, Sections 9.14-9.18. For the purpose of this regulation, conversions of existing buildings to skilled care facilities shall be considered as new construction. Existing skilled care facilities shall comply with the provisions of the NFPA Standard No. 101, Section 10-2.

(3) Where District code requirements conflict with those of the federal or national agencies adopted by reference above, the more stringent shall apply, except that requirements specified in Sections 16-18 of this Title shall supersede any other requirements.

(c) Other Construction Requirements. In addition to compliance with all applicable standards and regulations, all skilled care facilities, including those in operation before the effective date of this regulation, shall comply with the following:

#### (1) Electrical Systems.

(A) General: All electrical systems shall be designed, constructed, maintained and inspected in accordance with the National Electrical Code (Title 5B-1, DCRR) and the District of Columbia Electrical Code (Title 5b-2, DCRR), and all other applicable District rules and regulations. Electrical cords and appliances shall be maintained in a safe condition and frayed wires, cracked or damaged switches and plugs shall be replaced. The use of exposed wiring shall not be permitted.

(B) Emergency Electrical System:
The facility shall have available,
and in working order, an emergency electrical system approved by
the Commissioner. The emergency electrical system shall provide
lighting and power for lights at nursing stations, telephone
switchboards, night lights, exits, stairways, corridors, boiler

5

#### REGULATION 74-15

#### 41<sub>of</sub> 61

rooms and fire alarm systems. Emergency power shall be provided for a minimum of one (1) elevator where elevators are used for transporting patients.

#### (C) Artificial Illumination Levels.

(i) General illumination levels.
Lighting levels throughout

the facility shall conform to the following minimum lighting level table, provided that the facility shall provide any additional lighting level as may be needed by patients with visual impairments and as may be needed for special tasks. The facility and its lighting system shall be designed, equipped and maintained to avoid high brightness, highly reflective surfaces and glare.

# MINIMUM LIGHTING LEVELS FOR SKILLED CARE FACILITIES (Footcandles on the task)

Corridors and interior ramps Stairways other than exits Exit stairways & landings Doorways Administrative & Lobby areas Chapel and/or quiet areas Physical Therapy Occupational Therapy Dining Area Social Area Patient Care Unit-General Patient Care Unit-Reading Nurses Station - General Nurses Station - Desks & Charts Utility Rooms Pharmacy Area Kitchen - General Kitchen - Work Areas Laundry Rooms Janitor's Closet Boiler Room Toilet Facilities

(ii) Night Lights. The facility shall be equipped with night lights providing no less than one (1) foot-candle of illumination in corridors, toilets, patients bedrooms and similar areas.

(iii) <u>Type of Light.</u> General area lighting levels may be provided by flourescent lighting. Some incandescent lighting shall be provided in patient's bedrooms, living and social areas.

shall contain windows in size and area and in specifications in accordance with the District of Columbia Building Code. In habitable rooms, windows, shall be of an openable type, with sills no higher than 3'-0" above the floor. Obscure glass, glass blocks or similar non-transparent and distortion-producing materials for openings shall not satisfy window area requirements under this regulation.

(3) Water Supply and Distribution General.

(A) Water supply and distribution systems shall conform with the District of Columbia Plumbing Code (Title 5C-2, DCRR) and with the Model Plumbing Code for the Washington Metropolitan Areas, (Title 5C-1, DCRR), and all other applicable District rules and regulations.

\*\* \*\*\*

#### REGULATION 74-15

#### 42<sub>of</sub> 61

(B) <u>Safe Supply.</u> The water supply shall be approved by the Commissioner. Samples for bacteriological testing shall be taken. There shall be no crossconnection between the safe water supply and water supplies that are questionable or unsafe, or any source of pollution through which a safe supply might become contaminated.

(C) Hot and cold water. Each sink, lavatory, bathtub and shower shall have a continuous supply of hot and cold running water. The temperature of hot water at fixtures used by patients shall be automatically controlled and shall not exceed 110 degrees Farenheit. An adequate supply of hot water for patient use shall be available at all times. The water supply system shall also include a separate or boosted supply at higher temperatures for the kitchen, dishwashing and laundry uses. Water pressure shall be 15 p.s.i. on all floors during periods of peak demand.

(D) Drinking water. Drinking fountains shall be installed in areas available for general patients use. Half of the number of fountains provided shall be installed for use by wheelchair patients, and shall not project into corridors or rooms.

(4) <u>Sewerage Systems</u>. The system for the disposal of water-carried sewerage shall be constructed, operated and maintained in accordance with the codes referenced in paragraph 3 of this section.

#### (5) Solid waste Disposal.

(A) General. Solid waste management including disposal and incineration in skilled care facilities shall comply with the Solid Waste Regulations of the District of Columbia (D.C. Council Reg. No. 71-21), with the Air Quality Control Regulations of the District of Columbia (D.C. Council Reg. No. 72-12, as amended), the D.C. Building Code, and all other applicable District rules and regulations.

(B) Any person making, using, storing or having in his charge or under his control any shavings, excelsior, rubbish, sacks, bags, litter, hay, straw, or combustible waste materials, shall, at the close of each working day, remove all such material, which shall be completely baled and stacked in an orderly manner, from the building or store such material in suitable vaults or in metal or metal lined and metal covered receptacles or bins. The frequency of trash and garbage pick ups shall be adequate to prevent long storage periods.

(C) <u>Trash and refuse</u>. Adequate facilities shall be provided for the collection and storage of all trash and other refuse accumulations in a health care facility. All such wastes shall be handled and stored in a manner pursuant to Title 8, chapter 6, Part I of the District of Columbia Health Regulations (General Food Regulations).

(D) <u>Food grinders</u>. Each skilled care facility served by a sanitary sewer and conducting activities any of which generate food waste (garbage) shall have and use one or more food waste (garbage) grinders and shall otherwise be in compliance with D.C. Council Reg. No. 71-21, Solid Waste Regulation, as amended.

#### (6) Heating and cooling

(A) <u>General</u>. All fuel burning heating equipment shall be designed, installed, vented and maintained in good repair in accordance with the Fuel Burning Equipment Code (Title 5H, DCRR), with the Air Quality Control Regulations

#### REGULATION 74-15

#### 43<sub>of</sub> 61

(D.C. Council Reg. No. 72-12, as amended), and all other applicable District rules and regulations. Air conditioning equipment and its installation shall comply with the Refrigerator and Air-Conditioning Code (Title 5F, DCRR) and all other applicable District rules and regulations.

(B) Minimum temperature capability of system. The heating system shall be Of a size and capacity to maintain a temperature of 70 degrees Farenheit and a relative humidity of 25% in all occupied rooms. Each room used by patients shall be maintained at a minimum temperature of 70 degrees Farenheit between 7:00 AM and 10:00 PM and 66 degrees Farenheit other times, whenever such room is occupied. The heating system shall be thermostatically controlled from one or more areas.

(C) Other Requirements. Heating and cooling systems shall provide freedom from drafts. Heating fixtures shall be properly shielded for the safety of the patient. Each heating source shall be equipped with hand controls. No portable room heaters, space heaters or fireplaces shall be permitted as primary sources of heatin any room, although fireplaces may be utilized for decorative and social/recreational purposes. Only authorized persons shall have access to boiler and mechanical equipment rooms.

(7) Ventilation and Exhaust Systems.

(A) Each facility shall be wellventilated through the use of windows, forced air, or both. Both natural and mechanical ventilation and exhaust shall comply with the provisions of the D.C. Building Code, and all other applicable District rules and regulations.

(B) If only natural ventilation is relied upon, the total openable area shall equal at least 1/16th of the floor area served. When openable area other than windows is included in the required area, at least 50% of the required area shall be furnished by a window or windows. Ventilating skylights may be permitted to furnish not more than 50% of the required openable area.

(C) Mechanical ventilation shall consist of a system providing habitable rooms with a minimum of two air changes per hour, and all other areas with at least ten air changes per hour. Not more than 25% of the kitchen air may be obtained from the dining room or other rooms. Not more than 50% recirculation of air shall be permitted within rooms inwhich food or drink is served. Corridors shall not be used to exhaust air from any room with unusually high levels of odor or humidity.

(D) Isolation rooms and connected bathrooms shall be exhausted in such a manner as to prevent contamination of other areas.

(E) All cooking units that create smoke, steam gases, fumes, odors, vapors or excessive heat shall be hooded and vented, or locally vented, to the outside air by forced draft, in such a manner as to effectively remove such conditions: Provided that, small burners used intermittently for short periods of time, warming equipment, bread toasters, coffee urns, and radiant cooking units need not be so vented unless they, or a combination of such units, create a nuisance. Stove and other cooking unit ventilation hoods shall be provided with automatic fire extingushment systems.

(F) Air velocities across the face of any louver, grill or other ventilating opening shall not exceed 400 cubic feet per minute. In all duct and fan installations, noise generation shall not exceed by more than 10 decibels the existing

#### 44\_of\_61

noise level in the area served.

(G) All ventilation and exhaust systems shall be maintained in good operating order. Air filters shall be provided and properly cleaned, regularly replaced and maintained in all recirculating air systems.

## (8) Accoustical Insulation and Noise Reduction.

(A) <u>General</u>. In a skilled care facility, no patient room or area shall have a general noise level in excess of 45 decibels at any time. In addition, every effort shall be made in the facility to reduce noise levels, and impact and air borne sound transmission. Air spaces around ducts and other openings into rooms and air spaces under and around doors and partitions shall be properly sealed to maintain sound isolation.

(B) <u>Carpeting and Fabrics</u>. Wall-to-wall carpeting, suitable for use under wheelchairs and rolling equipment shall be used in all patient areas where the general noise level would otherwise exceed 45 decibels at anytime. Window curtains of soft fabric, fabric wall hangings and other materials that absorb sound shall be used in areas of high noise generation. Carpeting shall not be used in wet work areas, kitchens and treatment rooms. Throw or scatter rugs shall not be used except for non-slip entrance mats mounted flush with floor surface.

# (C) Flame-Resistant Properties of Carpeting and Fabrics. All

curtains used for decorative or accoustical purposes, cubicle curtains, and other fabrics hung on walls shall be of flame-proof material and shall be maintained flame-resistant. All carpeting in skilled care facilities shall have a flame spread rating of not over 75 or, in fully sprinklered buildings, a rating of not over 200 and shall otherwise comply with the Bureau of Health Insurance-State Agency Letter No. 172, "Guidelines for the Surveying of Carpets in ECF's and Non-Accredited Hospitals", (Baltimore, Maryland, January 1973, U.S. Department of Health, Edcuation and Welfare, Social Security Administration).

constructed, maintained and inspected in accordance with the District of Columbia Elevator Code (Titles 5E-2 and 5E-1, DCRR) and other applicable District rules and regulations. Electric or electrohydraulic elevators shall be installed in the facility if either patients' bedrooms or other patient areas are located on floors above street level. Elevators shall be of a sufficient size to accommodate a wheeled stretcher. Car doors of non-hospital type elevators shall have a minimum clear opening of 32". Cabs floors shall stop automatically flush with each floor level. Elevators shall be equipped with a by-pass switch to enable emergency express use. The number of elevators in the facility shall be determined by an elevator need study submitted by the owner of a skilled care facility to be approved by the Commissioner and shall be provided in the following minimum ratio:

No. of Beds 1-59	No. of Elevators  2 (one of which shall be a hospital type)
60-200	3(one of which shall be a hospital type)
201-350	4(one of which shall be a hospital type)
Over 350	A study of thefacility

45\_of\_61

2 3

1

8

18 19 20

21

22

23

16

17

28 29 30

31

32

37 38

43

54 55 56

57 58

59

60

shall be made to determine the need for number of additional elevators

(10) Wall, Ceilings, Floors and Finishes.
Walls and floors shall be designed and maintained to minimize the incidence of accidents. Hazards such as projecting sharp corners shall be avoided. Walls and ceilings generally shall be made of materials that permit frequent washing. Finishes in areas exposed to water, high humidity or grease shall be moisture-proof and grease proof. Floors shall be easily cleanable, either carpeted or of non-slip surface. All floor materials shall be mounted flush with adjacent materials to provide unbroken surfaces facilitating wheelchair use. Door threshholds and expansion joint covers shall be flush with the floor. Where the floor directly above is used by patients, ceilingS of unheated rooms or of rooms where there is high heat generation such as boiler or laundry rooms, kitchens, etc., shall be insulated to prevent heat loss or transfer. Floors on grade or above air spaces shall also be insulated to

(11) Ramps, Stairs and Corridors. Doorway, passage way and stair well design shall meet the requirements of the D.C. Building Code, all other applicable District rules and regulations, the NFPA Standard No. 101 Sections 10-1 and 10-2 and the ANSI standards in document All7.1-1961. Such circulation routes shall be kept free from obstructions at all times. Ramps, stairways and corridors shall be equipped with firmly secured handrails or bannisters on each side. Handrail ends shall return to the wall. Ramps shall be generally designed for wheelchair use, with a maximum gradient of 8.33% (1 to 12).

#### Section 18.

prevent heat loss.

#### Architectural Program Requirements

(a) General. The provision of space in a skilled care facility and the way in which the facility is equipped, furnished and maintained shall provide a home-like setting for patients while providing the staff a pleasant and functional working environment. Utilization of decoration, color, furnishings, etc., shall be designed to minimize the institutional character of facilities and services. The limited mobility of patients shall be considered in designating uses and proximity relationships for various rooms in the facility. Patients shall find readily accessible from their bedrooms any room for their social, recreational and dining activiites. Staff shall be afforded adequate and pleasant working space, as well as space appropriate to their personal needs.

(b) Outdoor Space. Every new skilled care facility shall provide in its design and on its property some outdoor area for use by patients, staff and the visiting public for quiet recreation. Residents shall be encouraged to go outdoors. Steps shall not be included in the design of the outdoor space and the space shall be accessible from the ground floor level of the facility without the use of ramps or steps, whenever possible. The outdoor space shall be well-planted and maintained. It shall be of sufficient size and shape to permit three or more sitting areas that are reasonably private from one another. The space shall be so located to receive direct sunlight for at least four (4) hours each day. Existing skilled care facilities shall provide such space meeting the allove requirements as their existing property affords.

#### (c) Nursing Unit.

Each nursing unit shall have the following major service areas within it:

#### \_46of\_61\_

(1)  $\underline{\text{Nursing station.}}$  Space and faciliites shall be provided for the supervision and care of patients.

(A) Space and facilities for the proper and easy maintenance of medical records shall be provided and shall consist of an ample writing surface, well-lighted and within easy reach of file cabinets or other record storage equipment. A separate, fully enclosed room shall be provided for major record-keeping duties. The room shall be well-ventilated, reasonably insulated from sound, and equipped with a telephone.

(B) Other office space shall be provided,

as needed.

(C) At least one toilet room with a lavatory for nursing staff and a limited access area for storage of staff clothing and personal items shall be provided both convenient to the nursing station.

to the bedroom.

#### REGULATION 74-15

	<u>47_of_61</u>
1 2 3 4 5 6 7 8 9	(D) A medication preparation and storage room adjacent to nursing station shall be provided. The room shall be well-lighted, fully enclosed and equipped with hot and cold water fixtures and a locked refrigerator, and other locked cabinets used only for storage of medications and drug supplies, including "controlled substances." The room may also be used as a "clean workroom" for nursing procedures, if there is adequate space to ensure a separate work area and counter space for medication preparation from those of nursing procedures. A single sink unit may be used for both activities. Access to the room shall be limited.
11 12 13	(E) A telephone for use by staff, shall be provided.
14 15 16	(F) A call system register shall be provided indicating signals from each patient bedroom, toilet room and bath or shower room and from each patient social recreation space.
18 19 20 21	(2) <u>Storage Areas</u> . Adequate space shall be provided in each nursing unit for the storage of all equipment, for clean linens and for other non-pharmaceutical supplies.
22 23 24 25 26 27 28	(3) <u>Utility Rooms</u> . Adequate space shall be provided in each nursing unit for the separate handling of various "solied" functions. Separate rooms shall be provided when various "soiled" functions should not be mixed. All such rooms shall contain a clinical sink, adequate work counters and cabinet space, and waste and soiled linen receptacles. Adequate facilities shall be provided for the following "soiled" functions:
29 30 31	(1) The safe handling and storage of soiled linens;
32 33 34	(2) The sanitary disposal of dressings and infected materials;
35 36 37	(3) The cleaning and sanitizing of bed pans, equipped with a sanitary, self-closing waste receptacle;
38 39 40 41 42	(4) The sterilization of glassware, enamelware, stainless steel, instruments, syringes, needles and rubber goods, etc., equipped, if necessary, with an instrument sterilizer approved by the Fire Department of the District of Columbia.
43 44 45	(5) The sterilization, cleaning and disinfecting of patients equipment and for the storage of individual patient equipment which has been properly labeled.
46 47 48 49	(4) <u>Patient Bedrooms</u> . Patient bedrooms shall be designed and equipped for providing nursing care and for the comfort and privacy of patients. Bedrooms shall provide a personal, home-like atmosphere.
50 51 52 53	(A) Each bedroom shall have direct access to a major corridor and at least one window. Patient bedrooms shall not be located on floors below grade.
54 55	(B) A lavatory with hot and cold running

(C) Each bedroom shall be equipped with a bed appropriate to the patient's physical condition; a bedside table/cabinet

water shall be located either in each patient bedroom or in a bathroom adjacent

#### 48 of 61

with individual reading lamps for each bed, within easy reach of each bed, and equipped with at least a 100-watt bulb; a call system; at least one comfortable chair for each occupant of the room; a bureau providing some lockable storage space for personal items, with a surface on top for the display of photographs and other personal items, a wardrobe or closet for each occupant; a clock with numbers at least one inch high; a large print calendar; and a mirror in an appropriate ; place to be easily used as a grooming aid. Institutional furnishings shall be avoided except as needed for medical purposes. The room should be pleasantly decorated, with curtains, rugs, etc. Patients should be encouraged to do their own decorating, including the hanging of personal pictures, the display of personal items, etc.

(B) Multi-bed rooms shall have flame proof curtains or other devices for patient privacy.

(C) All bedrooms shall be equipped with telephones or telephone jacks. Bedfast patients shall have a telephone at bedside at all times.

(D) Patients rooms shall be equipped with sufficient electrical receptacles to permit installation of television sets and radio sets with remote controls and individual bed sound box, in multiple occupancy rooms. Bedfast patients shall be provided television and/or radio upon request, without charge.

(E) Single bedrooms shall be provided as isolation facilities for patients with infectious and contagious diseases, for patients who develop acute illness, or who are in terminal phases of illness, and for patients who are unduly disturbing to others. The rooms shall be ventilated in such a manner to prevent contagion and shall have separate, adjacent toilet and bathing facilities.

(F) No patient bedroom shall have more than four (4) occupants. Single or double occupancy should be the basic unit of accommodating patients. At least three feet (3') of space shall be maintained around beds in multiple occupancy rooms.

(G) Doors to patient bedrooms shall be lockable from the inside or outside by the patient. Keys shall be readily available to attendants as well as furnished to the patient/occupant of the room.

(H) Multiple occupancy rooms shall provide no less than 90 square feet per patient exclusive of closets, toilet rooms, wardrobes and vestibules. Minimum room dimension for double rooms, exclusive of toilet room, closets, etc., shall bel0' -0". Minimum gross room dimension for other multi-occupancy rooms shall be 12' -0".

(I) Single occupancy rooms shall provide no less than 120 square feet per patient exclusive of closets, wardrobes, toilet rooms and vestibules. Minimum room dimension shall be 10'-0".

 $\mbox{\footnote{\footnot$ 

#### (5) Patient Toilet and Bathrooms.

(A) Toilet facilities, lavatories, bathtubs and showers must be located on the same floor as the bedrooms they serve. Toilet and lavatories shall be located within 50 feet of the bedrooms

#### \_49 of \_61

they serve. Fixtures shall be provided on each floor in the following ratios to the number of persons served on each floor.

No. of Patients of each sex	Water <u>Closets</u>	<u>lavs.</u>	Tubs or Showers
1-6	1	1	1
7-12	2	2	2
13-18	3	3	3
19-26	4	4	4
Each eight or fewer additional patients			
of each sex add:	1	1	1

No fewer than one bathtub shall be provided for every 16 patients or less.

(B) Grab bars shall be installed in all toilet and bathing compartments. All toilet and bathrooms shall be equipped with sturdily-mounted handrails to provide adequate assistance to patients. Bathtubs shall be installed in a safe and approved manner. Door hardware on toilet stalls shall be of the type that operates both from the inside and outside. Connection to the nurses' call system shall be provided in every toilet, tub, or shower stall and in every toilet room or wash room used by patients.

(C) At least one (1) toilet room and stall for every ten (10) non-ambulatory patients shall be large enough to accommodate a wheelchair patient and an attendant and shall be provided on each floor where such non-ambulatory patients reside. When such toilet requirements are met, it is not necessary to count non-ambulatory patients again for the purposes of calculating standard water closet needs as specified in the fixture table in paragraph 5(A) of this section. Doors to toilet rooms and toilet stalls shall have a minimum width of 2'-10" to admit a wheelchair.

(D) All bathrooms, tubs and shower stalls shall be large enough to accommodate a wheelchair patient and attendant. Showers shall be no less than four (4) feet square in size and shall have no curbs.

(E) Every toilet, shower or tub shall be installed in a separate stall or room.

(F) In addition to those that may be located in patient bedrooms, lavatories shall be provided in the same room with, or directly adjacent to all toilets or urinals. Where multiple toilets are installed in the same room, lavatories shall be provided in the ratio of at least one for every three toilets or urinals. In multiple installations, urinals may be substituted for water closets in male facilities if the ratio does not exceed one (1) urinal for every two (2) water closets.

(G) Patient toilet and bathing facilities

(H) At least one (1) room for toilet training shall be provided in each nursing unit for every eight(8) patients in that unit who are incontinent in bowel or bladder functions. Three (3) feet of clearance at the front and the sides of the water closet shall be provided, as well as adequate room for other fixtures and equipment, as needed.

48 49 50

2

17 18

19

20

21

22

23

24

25

26 27

28

29

30

31

32

33

34

35 36

37

38

39

40 41

42

43 44

45

46

47

51 52

53 54 55

56

shall not be used by staff.

#### 50 of 61

(I) Other patient toilet facilities - When patients have the use of common living or eating space on floors other than those on which they reside an additional toilet and lavatory shall be provided adjacent to these common spaces for each 50 persons or less of each sex.

(J) Rooms shall be arranged in the facility

(J) Rooms shall be arranged in the facility so that the sole entrance or exit from any bedroom or toilet room shall not be by way of any other bedroom, toilet room or food-handling area.

(6) <u>Refreshment Stations</u>. Every nursing unit shall have an area or unit for the storage and serving of between-meal snacks for use by staff and patients not otherwise restricted to a medically-supervised diet. The area shall contain a refrigerator for food stuffs only, a sink and approved equipment for heating foods and drinks. Space should be ample for the storage of all foods individual patients wish to store.

#### 51<sub>of</sub> 61

(7) <u>Laundry</u>: Each nursing unit shall be provided with a small residential-type laundry area for use by patients to wash personal clothing.

#### (8) Social Recreation Space

- (A) Every nursing unit shall contain,on the same floor as the unit, social recreation space in the amount of 20 Sq. Ft. per an average number of patients in the unit. No single space for this purpose shall exceed 360 square feet in area, however sound-insulated flexible partitions may be used to subdivide larger space.
- (B) When more than one such social space exists on a single nursing unit, one of these social spaces may be used for small group, on-ward dining if ample other social space exists to accommodate the vaverage number of patients who may wish to occupy it at any one time.
- (C) Social space shall be located as close as possible to the bedrooms of patients, and, whenever possible, within 50' of bedrooms.
- (D) Social space shall contain no fewer than two openable window except in rooms smaller than 100 sq. ft. Whenever possible, all such space shall be located in the facility along walls that receive at least 2 hours of direct sunlight a day.
- (E) All social spaces shall be attractively furnished with domestic (non-institutional) furniture and shall be attractively decorated. Patients shall be encouraged to participate in the decoration of the rooms. The rooms shall contain plants, pets of suitable temperament such as fish, birds, hamsters, etc. Furniture shall be arranged to create separate clusters tor small group conversation.
- (F) At least one (1) social space on each nursing unit shall contain a television set, a library with books, current periodicals and newspapers, and a piano.
- (G) Social spaces shall be located near or adjacent to refreshment stations for easy access to food and drink.
- (H) At least one (l) social space on each nursing unit shall be designated for quiet privacy of a small group and may be utilized for patients and their visitors. If such social space is not used for visiting, additional visiting space shall be provided allowing for visual and conversation-level accoustical privacy.
- (g) <u>Public Telephones</u> Each nursing unit shall provide semiprivate or private space where ambulatory patients and visitors may make phone calls: At least one (l) telephone shall be installed for this purpose for approximately every ten (10) patients on the unit who do not have private telephones.

#### (d) Food Service Areas

(1) <u>General</u> - Food service areas shall be planned, equipped and operated in accordance with chapter 6, part 6 of the Health Regulations of the District of Columbia (Title 8, DCRR) entitled "Establishment, Maintenance and Operation of Restaurants, Delicatessens, or Catering Businesses," with chapter 6, part 1 of the Health Regulations entitled "General Food Regulations," and with all other applicable District rules and regulations.

#### (2) Kitchen and Dietary Area

(A) The facility shall have a kitchen area adequate to"

### 52 of 61

meet its food service needs. When food is prepared on the premises, the kitchen area shall be arranged and equipped for the refrigeration, storage, preparations, and serving of food, as well as for dishwashing, utensil washing, refuse storage and removal.

- (B) Food preparation areas shall be arranged for the separation of functions and so located to permit efficient service to patients.
- (C) Handwashing facilities with single-service towels shall be provided for kitchen workers in all areas where food is handled and in the separate areas of each food operation.
- (D) Use of food preparation areas for non-dietary functions shall be prohibited.
- (E) <u>Dining Areas</u> A well lighted, well ventilated area shall be provided in the facility for those patients able to eat outside their rooms. At least 12 square feet of floor area shall be provided for each patient using the room. When dining space for the entire facility is centralized on one floor, additional space on the floor of each nursing unit for small-group dining shall be provided for those patients unwilling or unable to travel to the centralized dining room. Every dining area shall have windows and shall be pleasantly furnished and decorated in a home-like style. Patients shall be encouraged to participate in decorating dining rooms. Special tables and extra square footage shall be provided in the dining area as needed, for wheelchair seating.
- (e) <u>Multi-purpose Room</u> Each skilled care facility shall provide at least one (l) room large enough to accommodate all patients and accompanying staff for special events of a recreational or social nature. The dining area may be used for such purposes where it can be shown that such multi-use of the room can be scheduled so that all functions can be accommodated without interference.

#### (f) Therapy Service Areas

(1) General - The skilled care facility shall provide areas for therapy of sufficient size to accommodate and store all necessary equipment and supplies and of a sufficient size to facilitate the movement of patients and staff. Appropriate equipment for the functions performed in this area shall be provided and properly installed, with utilities provided and properly safe-guarded. Lavatories and toilets designed for disabled patients, particularly those in wheelchairs with staff attendants, shall be provided directly adjacent to each therapy area. Therapy service areas shall include those for physical therapy, etc. and for dental and podiatry services.

(2) <u>Physical Therapy Room</u> - Physical therapy rooms shall be provided as needed to accommodate the full physical therapy services provided in the skilled care facility. Parallel bars, handrails, wheelchair, walkers, crutches and canes are required as standard ambulation equipment.

(3) <u>Examination and treatment rooms</u> - Special rooms shall be provided for examinations, treatment and other therapeutic procedures. These rooms shall be equipped with a treatment table, or special treatment chair, a lavatory or sink with knee, foot or elbow controls, an instrument sterilizer approved by the Fire Department, an instrument table and the necessary instruments and supplies.

#### (9) Other Patient Service Areas

(1) Concession Shop - The skilled care facility

#### 5.3\_of\_\_\_61

shall provide at least one (l) area easily accessible to patients for a concession shop at which patients, staff and the public may purchase various items such as magazines, candies, small gifts, various supplies, etc. Postage stamps and stationary shall be sold in the shop. Vending machines shall not fulfill requirements for a concession shop. The shop shall be open a minimum of 4 (four) hours per day during day time working hours.

1 2

(2) <u>Barber and beauty shop</u> - The facility shall provide rooms for personal grooming services for both men and women patients. The services of a barber and a beautician shall be available. Rooms for these services shall be centrally located and attractively decorated. Consideration shall be given for wheelchair patients in the design and equipping of these rooms.

(3) Recreational and occupational therapy rooms - Rooms shall be provided, as needed, with appropriate equipment and utilities for the functions performed in connection with recreational and occupational therapy. If ceramics instruction is provided, the proper voltage for kiln installation shall be provided and kilns shall be installed in accordance with all applicable District rules and regulations. Sinks shall be installed with proper traps to prevent drains from clogging.

(h) <u>In-Service Training Program Areas</u> - Rooms shall be designated in the facility in sufficient number and size to accommodate all in-service training and continuing education programs that are provided.

(i) <u>Public Toilet and Washing Facilities</u> - Separate toilet and lavatory facilities shall be provided for the general public.

#### (j) <u>Staff Facilities</u>

(1) Where persons of both sexes work on the premises, separate, toilets and lavatories shall be provided for each sex. Where employees live on the premises at least one water closet, one lavatory and one bathtub or shower shall be provided for each four (4) or fewer employees of each sex so domiciled. Where employees live off the premises, at least one (1) water closet and one lavatory shall be provided for each sex, provided at least one bathtub or shower is available for employee use.

(2) Employee Change Rooms - One or more change rooms for each sex shall be provided for the use of employees not living on the premises. Individual clothing storage facilities shall be provided for all non-nursing staff. Change rooms shall be well-ventilated. Air from these rooms shall not be recirculated.

#### (k) Laundry Areas

 (1) <u>Patient Laundry</u> - There shall be a separate area provided for the reception of all patient laundry, and it shall not be in the patient areas. Suitable bags shall be provided for patient linen. Patient linen shall not be sorted, laundered, rinsed, or stored in bathrooms, patient rooms, kitchens, or food storage areas.

(2) <u>Linen Supply</u> - The linen supply shall be at least three times the amount needed for the usual occupancy. Clean linen and clothing shall be stored in clean, dry, dust-free areas, easily accessible to nurses' stations.

 (3) <u>Laundry Facilities</u> - Laundry facilities shall be located in areas separate from the patient units and shall be provided with the necessary washing, drying, and ironing equipment. The laundry areas shall not be used as passageways. The dryers shall be vented to the outside and

#### 54 of 61

equipped with removable lint traps. Electrical equipment shall be grounded in an approved manner. The laundry facility shall be of adequate capacity to accommodate.

(4) <u>Soiled Linen</u> - Soiled linen shall be stored in separate well-ventilated areas and shall not be permitted to accumulate in the facility. Contaminated laundry shall be placed in double specially colored bags and processed in a manner recommended by the Commissioner. The laundry process shall be such that the finished articles shall be free of dirt, of irritating chemical residues, and pathogenic organisms.

(5) <u>Finished Laundry</u> - Clean, finished laundry shall be transported from the laundry to the facility in enclosed lined hampers with removable liners, or enclosed carts or dollies, or wrapped in secure paper packages.

#### (1) <u>Maintenance and Housekeeping Supplies Storage</u>

(1) Adequate provision shall be made for the storage of all housekeeping supplies and equipment in a separate room from any toilet or utility room. The storage area shall be well lighted and ventilated and shall be equipped with a janitorial sink.

(2) All poisons and toxic substances, including those used for pest control shall be stored in non-patient and in non-food preparation areas of the facility. Storage areas containing such poisons shall be locked and shall have limited access.

## 55 61

#### Section 19. Variances for existing skilled care facilities.

- (a) The owner of an existing skilled care facility required to comply with the provisions of sections 16-18 of this title may be excused by the Commissioner from such compliance, either in whole or in part, upon a finding by the Commissioner that full compliance would result in exceptional or undue hardship by reason of excessive structural or mechanical renovations: <a href="Provided">Provided</a>, that a variance may be granted only to the extent necessary, to relieve such exceptional or undue hardship, and only when compensating factors are present which give adequate protection to the public health or safety and which assure that the intent and purpose of sections 16-18 of this title are not impaired.
- (b) To be considered for a variance, the owner of an existing skilled care facility shall submit a written request to the Commissioner setting forth:
  - (1) the specific requirements in sections 16-18 of this Title from which the owner seeks relief;
  - (2) the exceptional or undue hardship which would result from compliance with those requirements; and
  - (3) the extent to which the owner seeks to be exempted from those requirements.
- (c) Any request for a variance shall be published in the <u>District of Columbia Register</u> at least 30 days before the Commissioner acts on the request. Such publication shall be at the expense of the requesting party. The publication shall contain a brief statement describing the variance sought and the reasons the variance is sought. Any public comment on the request for a variance shall be submitted to the Commissioner within 30 days after publication of the request. The Commissioner shall maintain a public record of all variances granted and such record shall state the basis upon which the variances were granted. No variance shall be granted for reasons other than those stated in the record.
- (d) The owner of a skilled care facility adversely affected by the refusal of the Commissioner to grant a variance may appeal such action by the Commissioner pursuant to the provisions of the District of Columbia Administrative Procedure Act (title I, chapter 15 of the D.C. Code). The owner shall be notified in writing of the refusal of a variance and of his right to a hearing with respect to such refusal. A request for a hearing shall be made by the owner in writing to the Commissioner within 15 days of receipt of the notice of refusal. Failure of the owner to request a hearing, or failure of the owner to appear at a scheduled hearing shall be considered a waiver of the owner's right to a hearing and the Commissioner's refusal of the variance shall become effective immediately.
- (e) Any variance granted pursuant to this section shall be reviewed by the Commissioner when the owner of the facility proposes to undertake any construction or modification of the facility as specified in section 17(a) of this title.

#### Section 20. <u>Environmental Services</u>.

- (a) <u>Housekeeping Services</u>. The skilled care facility shall provide housekeeping and maintenance personnel to maintain the exterior and the interior of the facility in a safe, clean, orderly and attractive manner.
  - (1) Housekeeping personnel shall have as their primary responsibility, the the sanitary maintenance of the facility. Nursing and dietary personnel shall not perform housekeeping duties. Housekeeping personnel shall keep the facility free from offensive order accumulations of dirt, rubbish, dust and hazards. Floors shall be cleaned regularly. Polish, if used, shall be of the safety non-slip type. Deordorizers shall not be used to cover up odors caused by unsanitary conditions or poor housekeeping practices.

## 55a of 61

(2) Storage areas, attics, and basements shall be kept safe and free from accumulations of extraneous materials such as refuse, discarded furniture, and other waste materials. Combustibles such as cleaning rags and compounds shall be kept in closed metal containers.

. ...

#### REGULATION 74-15

#### $^{56}$ of $^{61}$

(3) Patient areas - It shall be the duty of the housekeeping staff to thoroughly clean any area which has been allocated for use by a person before it is allocated for use by any other person. Patient rooms shall be cleaned and arranged in an orderly fasion and shall be well-ventilated. Odor control shall be achieved by cleanliness and proper ventilation.

#### (b) <u>Maintenance Services and Pest Control</u>.

- (1) Maintenance service. Maintenance services shall include the responsibility for the provision of light, heat, power and water to the building and transmission points where they are to be used. Buildings equipment, and grounds shall be regularly maintained and attended. The building shall be maintained in good repair, free of hazards to the health and safety of patients, staff and public such as cracks, warped or loose boards, loose tiles, and loose or broken windowpanes, or any other damaged or defective parts of the building.
- (2) <u>Pest control</u>. A pest control program shall be in operation in the facility. Pest control services shall be provided either by the maintenance staff of the facility or by contract with a recognized pest-control company.
- (A) The facility shall be so constructed and maintained that the premises are free from insects and rodents, and shall be kept clean and free from debris which might provide harborage for insects and rodents.
- (B) Windows shall be screened during insect seasons (March 15 through November 15, inclusive) and all openings to the outside shall be so designed that insects are excluded.
- (C) Care shall be taken to use the least toxic and the least flammable effective insecticides and rodenticides.

#### (c) General safety and inspection.

- (1) <u>Safety</u>. In addition to hazard-free maintenance, safety shall be further insured by prohibiting from all skilled care facilities any occupancies or activities undesirable to the health and safety of patients and staff in the facility.
- (2) <u>First aid</u>. First aid supplies shall be maintained in a place known to, and readily available to all personnel responsible for the health and well-being of patients and staff.
- (3) Administrative inspection. The administrator of the facility or an authorized representative shall regularly inspect the building(s) and grounds to insure they are free from hazards of any kind and that sanitary standards and infection control standards are developed and maintained. Investigations into the causes of accidents shall be instituted immediately upon an accident occurring and corrective measures shall be immediately adopted.
- (4) <u>Compressed Gases</u>. The facility shall provide for safe storage and handling of flammable and non-flammable gases approved by the Commissioner. Storage rooms for flammable compressed gases shall contain no oxidizing materials. Storage rooms for flammable and non-flammable gases shall be deemed hazardous locations. All containers or cylinders shall be securely racked and fastened at all times. The caps of cylinders shall be maintained in place at all times when cylinders are not in use.

#### 57\_of61

#### (d) <u>Fire Protection, Prevention and Disaster Plan</u>.

(1) <u>Manual of Instructions</u>. There shall be a written manual of instructions of action to be taken in the event of a fire, approved by appropriate officials of the District of Columbia Fire Department.

The manual shall include the plan to be followed in case of fire, explosion or other emergency and shall specify persons to be notified, locations of alarm signals and fire extinguishers, evacuation routes, procedures for evacuating helpless patients, frequency of fire drills, and the assignment of specific tasks and responsibilities to the personnel of each shift.

(2) The fire plan shall be developed with the assistance of qualified fire and safety experts, and 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 through-out the facility. The most recent fire inspection report with the date of the latest inspection of the alarm system shall be available in the Administrator's office.

## 58 61

## TITLE VI. INTERMEDIATE NURSING CARE FACILITIES

#### Section 1. Administrative Management, Administrative Records, Patient Care Policies and Admission Policies

Sections 1,2,3 and 4 of title 5 of this regulation relating to administrative management, administrative records, patient care policies and admission policies shall apply to intermediate nursing care facilities.

#### Section 2. Physician Services

Section 5 of title 5 of this regulation relating to physician services shall apply to intermediate care facilities except that the physician attendance for each patient in the facility is required at least every 60 days and more often when medically necessary as determined and documented by the attending physician. All medications prescribed by the patient's physician shall be reviewed at least quarterly.

#### Section 3. Nursing Services

- (a) The facility shall provide a sufficient number of nursing personnel on duty at all times to meet the total nursing needs of the patients on a 24-hour a day basis, 7 days a week. Nursing personnel shall be assigned duties consistent with their training and experience.
- (1) The amount of nursing time available for patient care shall be exclusive of non-nursing duties.
- (2) Sufficient nursing time shall be available to assure that each patient:
- (A) Receives treatments, medications and diet as prescribed.
  - (B) Receives proper care to prevent decubiti.
    - (C) Is kept comfortable, clean and well

groomed.

(D) Is treated with dignity, kindness,

consideration and respect.

(b)  $\underline{\text{Staffing}}$  - 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 2.0 hours of bedside nursing care per patient on a 24-hour basis, 7 days per week. The following table sets out the required nursing service staffing:

#### 60 of 61

In facilities with over 150 patient beds, additional professional nurses and nursing personnel shall be employed to provide 2.0 hours of bedside nursing care per patient day on a 24-hour basis, 7 days per week, maintaining a staffing pattern as outlined in the table. If the facility provides more than one level of health care, i.e., skilled care and intermediate, etc., the nursing 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 Commissioner.

(c) Restraint and confinement, restorative nursing care program, inservice education program, nursing care plan, infection control and dietary supervision as set forth in section 6 of title 5 shall apply to intermediate nursing care facilities.

#### Section 4. Dietary Services

Section 7 of title 5 of this regulation relating to dietary services shall apply to intermediate nursing care facilities.

#### Section 5. Restorative Services

The intermediate nursing care facility shall provide directly or through contractural services, physical therapy services to meet the physical needs of all patients, in addition to restorative nursing care. A full range program of physical therapy is desirable but not mandatory, however, these services shall be made available to individual patients when specifically prescribed by his physician.

#### Section 6. Occupational and Speech Therapy

The intermediate nursing care facility shall provide by written agreement occupational and speech therapy services to meet the general needs of all patients. A full range program of occupational therapy and speech therapy is desirable but not mandatory, however, these services shall be made available to individual patients when specifically prescribed by his physician.

### Section 7. Pharmaceutical, Diagnostic, Dental and Podiatry Services

Sections 9, 10 and 11 of title 5 of this regulation relating to pharmaceutical, diagnostic, dental and podiatry services shall apply to intermediate nursing care facilities.

#### Section 8. Social Services

- (a) The facility shall provide for social services, directly or through contractural services, to promote preservation of the patient's physical and mental health.
- (b) There shall be a designated staff member suited by training or experience who has the responsibility for recognizing social problems and taking necessary action to solve them.
- (c) A social evaluation of each patient shall be made as soon as possible after admission to identify patient's needs. The designated staff member shall arrange for the necessary social services and for the integration of social services with the total patient care plan.
  - (d) The social evaluation, plan of care, all social

59\_\_of\_\_\_61

2 3 4			TATOUT		CADE			
4 5			REQUIRED I	RMEDIATE	-	FFINC		
6			ILQUIRED I	d Dillanov.	PUATOR DIN	FFING		
7								
8		20 or						
9		less	<u> 21 - 30 </u>	31 - 40	41 - 50	<u>51 - 60</u>	61 - 70	71 - 80
10								
11	Duty hours		1					
12		1 RN*	1 RN*	l RN*	IRN*	1RN	l RN	l RN
13 14	3:00 P.M.	l NP	2 NP	l LPN	lLPN	llpn	2LPN	2LPN
15				2NP	3NP	4NP	4NP	5NP
16								
17	3:00 P.M	lLPN**	lLPN**	lLPN**	lLPN**	lRN	lrN	lRN
18	11:00 P.M.	lNP	2NP	2NP	3NP	lLPN	lLPN	2LPN
19						3NP	4NP	5NP
20								
21								
22	11:00 P.M	llpN**	lLPN**	llpn**	lLPN**	lLPN**	1LPN	2LPN
23	7:00 A.M.	lNP	lNP	2NP	3NP	3NP	4NP	4NP
24								
25 26		01 00	01 100	101 110	111 100	101 100	101 140	141 150
27	Duty House	81 - 90	91 - 100	<u> 101 - 110</u>	<u>111 - 120</u>	<u> 121 - 130</u>	<u> 131 - 140</u>	<u> 141 - 150</u>
28	Duty Hours 7:00 A.M	1RN	2RN	2RN	2RN	3RN	3RN	3RN
29	3:00 P.M.	2LPN	2LPN	2-LPN	3LPN	3LPN	3LPN	3LPN
30	5.00 T.WI.	6NP	6NP	7 NP	7NP	7 NP	8NP	9NP
31		0111	0212		, 212	, 212		
32								
33	3:00 P.M	1RN	2RN	2RN	2RN	2RN	2RN	2RN
34	11:00 P.M.	2LPN	2LPN	2LPN	3LPN	3LPN	3LPN	3LPN
35		5NP	5NP	6NP	6NP	6NP	7NP	8NP
36								
37		1037	1557	1017	0.037	0.037	0.001	0.777
38 39	11:00 P.M	IRN	lRN	1RN	2RN	2RN	2RN	2RN
39 40	7:00 A.M.	llpn END	2LPN	2LPN	2LPN	2LPN	2LPN 6NP	2LPN 7NP
41		5NP	5NP	5NP	5NP	5NP	OINE	/ IV P
42								
43								

R.N. - Registered Nurse

. ...

L.P.N. - Licensed Practical Nurse

N.P. - Nursing Personnel

<sup>\*</sup> May be L.P.N. provided that a registered nurse is employed at least 4 hours per week, during the day tour of duty, to provide consultation.

<sup>\*\*</sup> May be an R.N.

## 61 of 61

service activity and reports shall be incorporated in the patient's clinical record.

(e) The facility shall provide for a social worker to participate in orientation and inservice education of staff and volunteers; participate in education programs, case conferences, and staff orientation to community services.

#### Section 9. Patient Activities

(a) Section 13 of title 5 of this regulation relating to patient activities shall apply to intermediate nursing care facilities.

#### Section 10. Clinical Records

- (a) A clinical record shall be maintained for each patient admitted to the facility, and all information contained therein shall be treated as confidential.
- (b) The clinical record shall serve as a basis for planning patient care and shall provide a means of communication between the physician and other professional disciplines contributing to the patient's care.
- (c) The clinical record shall furnish documentary evidence of the course of the patient's illness and treatment and shall serve as a basis for review, study and evaluation of medical care rendered to the patient.
- (d) The forms appropriate for use in maintaining the clinical records shall be subject to approval by the Commissioner.

#### Section Il. Utilization Review

- (a) A written plan shall be developed to provide for independent professional review and re-evaluation of patients in intermediate nursing care facilities to determine whether their current physical and mental conditions are such as to indicate continued placement in the intermediate nursing care facility. The plan shall provide procedures sufficient to determine whether the services actually rendered are adequate and responsive to the conditions and needs identified, and whether a change to other living arrangements or other facilities is indicated.
- (b) Such reviews shall be conducted at intervals no longer than quarterly by or under the supervision of a physician and other appropriate medical, professional nursing, and social service personnel not employed by or having a financial interest in the institution.

#### Section 12. Environmental Control, Management and Safety.

Sections 16,17,18,19 and 20 of title 5 of this regulation shall apply to intermediate nursing care facilities."

- Section 2. The provisions of chapter 8 of the Housing Regulations of the District of Columbia shall not apply to skilled care and intermediate nursing care facilities after the effective date of this regulation.
  - Section 3. This regulation shall take effect immediately upon passage.

, ,,,

Regulation No. \_\_\_\_

1

3

4

5

6

7 8

9

10

11

12 13

14

15 16

17

18 19

20

21

2223

24



June 29, 1974 Enactment Date

# Regulation

#### of the

#### District of Columbia

TITLE REGULATION AMENDING ARTICLE 25, POLICE REGULATIONS, TO PERMIT ISSUANCE OF IDENTIFICATION CARDS FOR NON-DRIVERS

Councilman Tedson J. MeyersPresents the following regulation:

WHEREAS, Section 402 (4) of Reorganization Plan No. 3 of 1967 transferred to the District of Columbia Council the regulatory and other functions of the Board of Commissioners under D.C. Code, Section 1-226 with respect to making reasonable and usual police regulations for the protection of lives, limbs, health, comfort and quiet of all persons and the protection of all property within the District of Columbia; and

WHEREAS, numerous D.C. residents who do not drive have appealed to the Council to authorize the District of Columbia Government to issue an identification card for non-drivers to those who apply for such a card; and

WHEREAS, the Council finds making available such an identification card would be a desirable government service,

NOW, THEREFORE, BE IT ENACTED by the District of Columbia Council that:

Section 1. Article 25, District of Columbia Police Regulations is hereby amended by the addition of a new section 16, which shall read as follows:

Section 16. (a) The Mayor-Commissioner of the District of Columbia or his authorized agent may offer on a voluntary basis for issuance to residents of the District of Columbia, over age 15, upon the payment of a fee and the submission of an

RECORD OF COUNCIL VOTE										
COUNCILMAN	AYE NAY N.	V. A.B. R.A.	COUNCILMAN	AYE NAY N.V.	A.B. R.A.	COUNCILMAN	AYEN	AY N.V.	A.B. R.A.	
NEVIUS	X		FOSTER	X		PARKER	X			
TUCKER	X		MEYERS	X		ROBINSON			X	
FORD	X		MOORE	X		SELDEN	X			
	X—In	dicates Vot	e A. B.—Absent	N. V. Not Vo	oting R.	. A.—Readopted				

FORD MOORE SELDEN	
K-Indicates Vote A. BAbsent N. V. Not Voting R. AReadopte	ed
Submitted on first reading at a meeting of the District of Columbia City Council onJu	ne 4, 1974
Adopted on second and final reading <u>Iune 18, 1974</u>	<i>a+1</i> -1-1-1
Presented to the Mayor-Commissioner, June 19, 1974	, Well!
Date Secretary of the	e City Council
Approved Julia Mulia V	2-9 JUN 1974
Mayor-Commissioner	Date
Enacted W/O signature of the Mayor according to ten day limitation rule:	
Effected W/O signature of the Mayor according to ten day initiation rule.	Date
Disapproved and returned to the City Council	
Mayor-Commissioner	Date
Readopted	
Date	.( 0
I hereby certify that this regulation is true and adopted (or readopted) as stated therein.	
P-251 Secretary of th	e City Council

#### $^{2}$ of $^{2}$

application therefor, the amount and form of application as may be determined by the Commissioner, a special identification card which may contain the name, address, photograph and such other identifying data that the Commissioner may prescribe; provided that (1) such card carries conspicuously a notation that disclaims the bearer's authority to use the card for any purpose other than identification, and (2) carries the statement, "This identification card is furnished by the District of Columbia Government as a service to the bearer. Application for, or possession of, this card is not required by law."

- (b) Such special identification card shall expire every four years, but may be renewed upon request and payment of the fee for renewal.
- (c) Residents of the District of Columbia who are 65 years of age or older are exempted from paying a fee for such card.
- (d) No police officer is authorized to request presentation of the card authorized by this regulation as a means of identification, although the same may be volunteered by the bearer; nor shall the agency designated by the Mayor-Commissioner to administer the program authorized in this section, after any action upon the application, retain in its files any information other than the name, address, age of applicant to whom the card is issued, the date of issuance and a reference to the document(s) relied upon in verifying the identity of the applicant.
- (e) Any person who shall use fraud or misrepresentation in the application for and/or use of a special identification card issued under this Article shall be guilty of a misdemeanor and upon conviction thereof, shall be fined not more than \$300, or imprisoned for a period not exceeding 10 days, or both.

 $\underline{\text{Section 2}}.$  This regulation shall become effective thirty days following enactment.

~ Regulation No. 74-17

23

24

P-251



June 29, 1974

Enactment Date

# Regulation

#### of the

#### District of Columbia

TITLE AMENDMENTS TO TITLE 32, DISTRICT OF COLUMBIA RULES AND REGULATIONS (MOTOR VEHICLE REGULATIONS FOR THE DISTRICT OF COLUMBIA)

Reverend Jerry A. Moore, Jr. Presents the following regulation:

WHEREAS, Reorganization Plan No. 3 of 1967 transferred to the District of 1 Columbia Council the function of making rules and regulations for the registration, 3 operation, and ownership of motor vehicles; and 4 WHEREAS, the District of Columbia Council finds that it is necessary to amend 5 certain regulations in Title 32, District of Columbia Rules and Regulations (MOTOR 6 VEHICLE REGULATIONS FOR THE DISTRICT OF COLUMBIA). 7 8 NOW, THEREFORE, BE IT ENACTED by the District of Columbia Council that: 9 10 Section 1. Title 32 of the District of Columbia Rules and Regulations (Motor 11 Vehicle Regulations for the District of Columbia), adopted by District of Columbia 12 Council Regulation Number 72-13, is hereby amended as follows: 13 14 (1) by striking out "and regularly used" in the definition of "Commercial 15 Vehicle" in section 1.301; 16 17 (2) by striking out "under" in section 2.301 and inserting in lieu thereof 18 "upon", and by inserting immediately before the period at the end of such section 19 20 ", or for which the prescribed fee has not been paid"; 21 (3) by amending Section 2.305(a) (9) as follows: 22

RECORD OF COUNCIL VOTE										
COUNCILMAN	AYE NAY N.V.	A.B. R.A.	COUNCILMAN	AYE NAY N.V.	A.B. R.A.	COUNCILMAN	AYE	NAY N.V.	A.B. R.	
NEVIUS	X		FOSTER	X		PARKER	X			
TUCKER	X		MEYERS	X		ROBINSON			X	
FORD	X		MOORE	X		SELDEN	X			
	X—Indicates Vote A. B.—Absent N. V. Not Voting R. A.—Readopted									

traffic regulations of the District of Columbia and elsewhere as to

"(9) Has been convicted with such frequency of offenses against

FORD IN I I I MOORE IN I	SELDEN
X—Indicates Vote A. B.—Absent N. V. Not Voting	R. A.—Readopted
Submitted on first reading at a meeting of the District of Columbia City C	ouncil on June 4, 1974
Adopted on second and final readingJune 18, 1974	A1
Presented to the Mayor-Commissioner June 19, 1974	would for while
Approved Thattes Mashin Too	Secretary of the City Council 2 9 JUN 1974
Mayor-Commissioner	Date
Enacted W/O signature of the Mayor according to ten day limitation re	ule:
	Date
Disapproved and returned to the City CouncilMayor-Commissioner	Date
Readopted	14 1 1 1 1 1 1
Date	
I hereby certify that this regulation is true and adopted (or readopted) as sta	therein.

Secretary of the City Council

#### of 6

indicate a disrespect for traffic laws, such fact being established by the point system described in subsection (b) of this section; or a pattern of traffic offenses over a one year period which indicate a disregard for the safety of other persons or property."

- (4) by amending subsections (a) and (b) of section 2.309 to read as follows, and by adding thereto a new subsection (d):
  - "(a) The initial period of revocation following conviction for an offense for which revocation is made mandatory by law shall be six months for the first offense, one year following a second offense, and two years following a third or subsequent offense.
  - "(b) The initial period of revocation under the discretionary authority of the Department shall be for six months. The period of revocation for subsequent offenses shall be established in the discretion of the Director."
  - "(d) Unless minimum periods have been established in individual cases involving a person's physical or mental qualifications to drive, all persons whose licenses have been revoked shall be eligible to apply for restoration of privileges at the expiration of the period for which such privileges have been revoked."
- (5) by inserting "or order of suspension or revocation," immediately before "whichever" in subsection (e) of section 2.315;
- (6) by inserting "that such notice has been served on him" immediately before the period in subsection (f) of section 2.315;
  - (7) by amending section 2.506 to read as follows:

"The Department shall not issue any license hereunder —

- (1) To any person who is under the age of 21 years;
- (2) To any person who is unable to read, write and speak the English language;
- (3) To any person who is covered by diplomatic immunity;
- (4) To any person who does not possess a valid District motor vehicle operator's permit;
- (5) To any person who has previously been adjudged to be afflicted with or suffering from any mental disability or disease and who has not at the time of application been restored to competency by the methods provided by law;
- (6) To any person who is required by these rules to take an examination unless such person shall have successfully passed such examination;
- (7) To any person employed by a Federal or District of Columbia agency, whose established policy forbids such person from operating a public vehicle for hire;
- (8) To any employee of the Department whose employment is concerned directly with the issuance of a license;

#### \_3\_of\_6\_

- (9) To any person who has not, within the three years immediately preceding the date of his application for a license, resided for at least one year in the Metropolitan Area, and has not had at least one year's driving experience as a licensed motor vehicle operator in the Metropolitan Area;
- (10) To any person who, by reason of his physical or mental disability, the Director has good cause to believe would not be capable of safely operating a public vehicle.
- (11) To any person who has been convicted of offenses against traffic regulations of the District of Columbia and elsewhere with such frequency as to indicate a disrespect for traffic laws and a disregard for the safety of other persons or property.
- (12) To any person, if --
  - (a) He is a chronic alcoholic or addicted to the use of drugs;
  - (b) He is on parole or probation at the time of the filing of his application for a license, except that if such parole or probation arose out of a conviction for a crime other than those listed in paragraph (c) below, his application may be considered for approval by the Director if a letter from the appropriate parole or probation officer is submitted with the application stating that there is no objection to the issuance of an instructor's license.
  - (c) He has, within the three years immediately preceding the filing of his application, been convicted of, or during such period has served any part of a sentence for, or is currently under indictment for the commission of or an attempt to commit any of the following:
    - (1) murder, manslaughter, mayhem, malicious disfiguring of another, abduction, kidnapping burglary, housebreaking, robbery, or larceny;
    - (2) assault with intent to commit any offense punishable by imprisonment in the penitentiary;
    - (3) any sex offense;
    - (4) any violation of the narcotic laws."
- (8) by amending section 2.901 by renumbering paragraphs (1), (2), (3), (4), (5), and (6) as paragraphs (2), (3), (4), (6), (7), and (9); by inserting in the appropriate places the following new paragraphs:
  - "(1) To any person who is under the age of 21 years;"

#### \_4\_of\_6\_

- "(5) To any employee of the Department whose employment is concerned directly with the issuance of a license;"
- "(8) To any person who has been convicted with such frequency of offenses against traffic regulations of the District of Columbia and elsewhere as to indicate a disrespect for traffic laws, such fact being established by the point system described in subsection (b) of section 2.305 of this Chapter; or for a serious traffic offense or offenses which indicate a disregard for the safety of other persons or property."

and by amending new paragraph (6) by inserting "in the Metropolitan Area" immediately after operator";

- (9) by striking out in subsection (d) of section 2.903 "thirty" and inserting in lieu thereof "ninety";
- (10) by inserting "District of Columbia" immediately after "current" in subsection (j) of section 3.201;
- (11) by striking out in subsection (k) of section 3.201 "the" the first time it appears therein and inserting in lieu thereof "except where a District of Columbia title of the vehicle accompanies the application, such";
- (12) by deleting in section 3.202 the designation "(a)" and all of subsection (b);
- (13) by striking out in subsection (a) of section 3.317 "vehicle owner" and inserting in lieu thereof "applicant";
- (14) by striking out in subsection (b) of section 3.317 "owner" and inserting in lieu thereof "applicant"; and by inserting just before the period at the end of the first sentence of such subsection the following:
  - ", and entitles the person in whose name such tags are to be registered to receive one unvalidated set of such tags";
  - (15) by amending subsection (c) of section 3.317 to read as follows:
    - "(c) The reservation described in this section may be made, and unvalidated sets of such tags may be issued, without reference to any specified vehicle: Provided, that such unvalidated tags may not be used as owner's identification tags, or displayed on any motor vehicle, or otherwise presented as evidence of the registration of any motor vehicle. Such reservation shall terminate at the end of the first registration year for which a motor vehicle has not been registered under such reservation: <u>Provided</u> <u>further</u>, that prior to the expiration of such registration year the person in whose name such reservation was made may renew such reservation for another registration year, by payment of a new \$25.00 reservation fee. If a motor vehicle has been registered in connection with the reservation, the Director may issue validated personalized identification tags for

#### 5 of 6

such vehicle and said reservation shall be maintained by the Director so long as such vehicle, or a substitute vehicle therefor, is registered.";

- (16) by striking out in section 3.407 "\$1.00" and inserting in lieu thereof "\$2.00";
- (17) by striking out in Part I of Appendix A of Chapter III "4" and inserting in lieu thereof "5";
- (18) by striking out in Part II of Appendix A of Chapter III "34,000" and inserting in lieu thereof "3,400";
  - (19) by deleting the last sentence of Part III of Appendix A of Chapter III;
- (20) by inserting "INDIVIDUAL TRANSACTION INVOLVING A" in Part VIII of Appendix A of Chapter III immediately after "EACH";
- (21) by striking out in subsection (a) of section 4.205 "an approved inspection seal for";
- (22) by striking out in subsection (a) of section 4.206 "as of July 1, 1969," and by inserting "current" immediately before "Motor Vehicle Inspection Manual";
- (23) by striking out in subsection (b) of section 4.207 "as of July 1, 1969", and by inserting "current" immediately before "Motor Vehicle Inspection Manual";
- (24) by striking out in subsection (e) of section 5.214 "special use" the last time it appears therein and inserting in lieu thereof "customer's";
- (25) by striking out in subsection (a) of section 6.203 ", other than motorcycles and truck tractors," and by inserting ", other than truck tractors manufactured or assembled prior to January 1, 1968, and motorcycles" immediately after "1955";
- (26) by striking out in subsection (b) of section 6.203 "twenty (20)" and inserting in lieu thereof "fifteen (15)";
- (27) by striking out in subsection (a) of section 6.204 "motorcycle, motor-driven cycle, or truck tractor manufactured and assembled after September 15, 1957" and inserting in lieu thereof "truck tractor manufactured or assembled after September 15, 1957, but prior to January 1, 1968, and motorcycles and motor-driven cycles";
- (28) by striking out in subsection (b) of section 6.205 "twenty (20)" and inserting in lieu thereof "fifteen (15)";
- (29) by striking out in subsection (c) of section 6.209 "may be white, amber or red" and inserting in lieu thereof "shall be white";
- (30) by inserting in subsection (a) of section 6.216 immediately after the designation "(a)" the following:

"The Director may register, as an authorized emergency vehicle, vehicles of any fire or police department, ambulances, and other official government-owned vehicles used for the emergency care or preservation of life, health, or property.";

D 110

#### 6\_of\_6

(31) by striking out "such" in section 8.112 immediately following "each", and inserting in lieu thereof "individual transaction involving a"; and by adding at the end of such section the following sentence:

"Until such fees and collection charges are paid, no services or products of the Department, including, but not limited to, original or duplicate motor vehicle operator's licenses, motor vehicle identification tags, special use tags, original or duplicate registration cards, or original or duplicate certificates of title, will be provided to such person.";

- (32) by striking out in paragraph (1) of subsection (a) of section 9.511 "eight" and ".08", and inserting in lieu thereof "six" and ".06."; by striking out in paragraph (2) of such subsection "fifteen, ".15", "eight", ".08", "twenty", and ".20", and inserting in lieu thereof "ten", ".10", "six", ".06", "eleven", and ".11", respectively; and by striking out in paragraph (3) of such subsection "fifteen", ".15", "twenty", and ".20", and inserting in lieu thereof "ten", ".10", "eleven", and ".11", respectively;
- (33) by striking out the subsection designation "(a)" of section 9.511; and by deleting subsections (b), (c), and (d) of such section.
  - (34) by striking out in paragraph (1) of section 10.102 "exclusively";
- (35) by adding "within the Metropolitan Area" immediately before the semi-colon in paragraph (9) of section 10.201;
- (36) by redesignating paragraph (11) of section 10.201 as paragraph (12) and inserting the following new paragraph (11):
  - "(11) To any person who has been convicted with such frequency of offenses against traffic regulations of the District of Columbia and elsewhere as to indicate a disrespect for traffic laws, such fact being established by the point system described in subsection (b) of section 2.305 of Title 32; or for a serious traffic offense or offenses which indicate a disregard for the safety of other persons or property."
- (37) by striking out paragraph (1) of section 10.601 and redesignating paragraphs (2) and (3) as paragraphs (1) and (2) respectively; and
  - (38) by repealing section 10.602.
  - Section 2. This regulation shall take effect immediately upon enactment.

Regulation No. \_\_\_\_\_



June 27 1974
Enactment Date

# Regulation

of the

#### District of Columbia

TITLE	AMENDMENT TO AIR QUALITY CONTROL REGULATIONS REGARDING SOLID
11122	WASTE REDUCTION CENTER NUMBER 1 (INCINERATOR NO. 5)

Mr. Rockwood H. Foster Presents the following regulation:

WHEREAS, the District of Columbia Council is authorized to make all reasonable and usual regulations for the protection of the health of its 2 citizens (§ 1-226, D.C. Code, 1967 Ed., Supp. V, 1972); and 3 4 WHEREAS, the Air Quality Control Act, § 8-611 et seg., D.C. Code 5 1967 Ed. (Supp. V, 1972) authorizes the District of Columbia Council to 6 make and revise regulations regarding the air quality of the District of 7 8 Columbia; and 9 WHEREAS, the Clean Air Act of 1970, as amended, 42 U.S. Code 10 § 1857 et seq., permits local jurisdictions to amend regulations previously 11 approved by the Environmental Protection Agency. 12 13 NOW, THEREFORE, BE IT ENACTED by the District of Columbia Council 14 15 that: 16 Section 8-2: 724 (a)(2) of the Health Regulations as 17 Section 1. originally adopted in Regulation No. 72-12 and as amended by Regulation 18 No. 73-18, is hereby further amended to read as follows: 19 20 . "A variance is hereby granted for the operation of the 21 District facility known as Solid Waste Reduction Center 22 Number 1. This variance shall expire on June 30, 1977." 23

RECORD OF COUNCIL VOTE																	
COUNCILMAN	AYE	NAY	N.V.	A.B.	R.A.	COUNCILMAN	AYE	NAY	N.V.	A.B.	R.A.	COUNCILMAN	AYE	NAY	N.V.	A.B.	R.A.
NEVIUS	X					FOSTER	X					PARKER				X	
TUCKER	X					MEYERS		X				ROBINSON	X				
FORD		X				MOORE	X					SELDEN	X				
X—Indicates Vote A. B.—Absent N. V. Not Voting R. A.—Readopted																	

TUCKER	$\times$		MEYERS	X			ROBINSO	N .	X		
FORD			MOORE	X			SELDEN		X		
	X—Indi	cates Vote	e A. B.—Absent	N. V. 1	lot Voti	ing R.	A.—Readopte	d			
Submitted on first i	reading at a	meeting	of the District	of Colur	nbia C	ity Cou	ncil on <u>Ju</u>	ne 18	197	4	 0
Adopted on second	and final rea	ding	June 25, 197	4				P		·{	 
Presented to the M	layor-Comm	issioner	June 25, 197	4			ecretary of the	e City (	Council	+	 
Approved _	etosi	Nas	h- Jos			~			JUN 197	γ <sub>4</sub> ν	 
v	Ma	ayor-Com	missioner						Date	•	
Enacted W/O sign	ature of the	e Mayor	according to to	en day l	imitati	on rule	:		Date		 
D:11	turned to th	a City C	Council								
Disapproved and re	eturned to th	e City C	Ma	yor-Comr	nissione	er			Date		 
Readopted	Da	te									
hereby certify that this regulation is true and adopted (or readopted) as stated therein.											

Certified copies are available.

Acting

Secretary of the City Council

P-251

\_\_\_of\_\_\_

Section 2. Regulation No. 73-18 as approved on September 4, 1973 is revised and amended to read as follows:

Tests to be performed by the Department of Environmental Services.

(a) The Department of Environmental Services shall conduct stack tests on a quarterly basis to determine stack emissions from Solid Waste Reduction Center Number 1 for the following substances:

mercury
lead
sulfur dioxide
oxides of nitrogen
carbon monoxide
hydrocarbons
particulates
beryllium
asbestos

- (b) The Department of Environmental Services shall conduct ambient air quality tests at least on a quarterly basis on all pollutants for which the Environmental Protection Agency has established ambient air quality standards together with tests for lead and mercury ambient levels.
- (c) The results of all tests performed pursuant to this Section shall be delivered to the District of Columbia Council no later than 20 days after said tests have been completed.
- (d) The results of all tests performed pursuant to this Section shall be published by the Department of Environmental Services in the  $\underline{\text{D. C. Register}}$  at the earliest date practicable after said tests have been completed.
- Section 3. The amendments made by this regulation shall take effect immediately upon enactment.

74-19 Regulation No. -----

1

2

3

4

5 6

7

8

9

10

11 12

13

14

15

16 17

18 19

20 21

22 23

24



July 26, 1974 Enactment Date

# Regulation

of the

#### District of Columbia

TITLE COSMETOLOGY	SCHOOL	REGULATION
-------------------	--------	------------

Dr. Henry S. Robinson, Jr. Presents the following regulation:

WHEREAS, the District of Columbia Council is authorized by § 1-226 D.C. Code 1973 ed., pursuant to Section 402(4) of Reorganization Plan No. 3 of 1967 to make and enforce all such reasonable and usual police regulations as may be deemed necessary for the protection of lives, limbs, health, comfort and quiet of all persons and the protection of all property within the District of Columbia; and

WHEREAS, the District of Columbia Council is authorized by § 2-1303 D.C. Code 1973 ed., pursuant to Section 402(60), Reorganization Plan No. 3 of 1967, to make rules and regulations to carry out the provisions of the Act of June 7, 1938 relating to cosmetologists.

WHEREAS, the District of Columbia Council is authorized by § 47-2344 D.C. Code 1973 ed., pursuant to Section 402(391) of Reorganization Plan No. 3 of 1967 to require licenses and regulate businesses which in the judgment of the Council require inspection, supervision or regulation.

NOW, THEREFORE, BE IT ENACTED by the District of Columbia Council that:

#### Section 1. Purpose and Scope

(a) Purpose. The purpose of these regulations is to establish requirements for schools of cosmetology in the District of Columbia.

COUNCILMAN	AYE NAY	N.V. A.B. R.A.	COUNCILMAN	AYE NAY N.V. A.B.	R.A.	COUNCILMAN	AYE	NAY N.	V. A.B.	R.A
NEVIUS	X	(a) corporati	FOSTER	X		PARKER	X			
TUCKER	X		MEYERS	X		ROBINSON	X			
FORD	10	X	MOORE	X	Tuell	SELDEN	Land I	hower	X	
	X-1	Indicates Vo	te A. B.—Absent	N. V. Not Voting	R.	A.—Readopted				

X-Indicates Vote A. BAbsent N. V. Not Voting R. AReadopte	d
Submitted on first reading at a meeting of the District of Columbia City Council onJa	nuary 8, 1974
Adopted on second and final reading July 16, 1974	
Presented to the Mayor-Commissioner July 16, 1974	>- Welly
Approved Mayor-Commissioner Secretary of the	2 6 JUL 1974
the state of the s	Dave
Enacted W/O signature of the Mayor according to ten day limitation rule:	Date
Disapproved and returned to the City Council	nty-five (435)
Mayor-Commissioner	Date
ReadoptedDate	cees of truly
I hereby certify that this regulation is true and adopted (or readopted) as stated therein.	S. Culling

P-251

Secretary of the City Council

#### REGULATION 74-19

## 2 9

(b) Scope. These regulations shall apply to all schools of cosmetology in the District of Columbia.

#### Section 2. Definitions

For purposes of this regulation the following terms shall have the meanings ascribed:

- (1) Board: The District of Columbia Board of Cosmetology.
- (2) <u>Instructor</u>: An individual licensed to teach cosmetology in the District of Columbia pursuant to § 2-1317 of the District of Columbia Code.
- (3) Operator: An individual licensed to practice cosmetology in the District of Columbia pursuant to § 2-1317 of the District of Columbia Code.
- (4) <u>School of Cosmetology</u>: Any place or premises, or part thereof, wherein or whereupon cosmetology or any part of its practices are taught.
- (5) <u>Student</u>: An individual, enrolled in a school of cosmetology, who is engaged in learning or acquiring any or all practices of cosmetology, and while so learning, performs or assists in any of the practices of cosmetology under the immediate supervision of a licensed instructor.

#### Section 3. Requirement of Certificate of Registration

No person shall either directly or indirectly operate a school of cosmetology without having first obtained a valid certificate of registration from the Board, pursuant to sections 2-1306 and 2-1310 of the D.C. Code. Prior to the granting of a valid certificate of registration by the Board, the applicant shall provide such information as shall be required by the Board and as further provided for in this regulation.

#### Section 4. Qualifications for Certification

#### (a) <u>Duration of Courses of Study</u>

Each school of cosmetology shall provide, for the purpose of teaching, courses of study of the following duration:

- (1) For operator training: Fifteen hundred (1500) hours in not less than eight (8) consecutive months.
- (2) For Manager/Instructor training: Two thousand (2000) hours in not less than eleven (11) consecutive months.

#### (3) Limited Certificates:

- (A) For manicurist training: One hundred and twenty-five (125) hours in not less than one (1) month.
- (B) For shampoo and scalp treatment training: One hundred and twenty-five (125) hours in not less than one (1) month.
- (C) For facial training: One hundred and twenty-five (125) hours in not less than one (1) month.
- (4) The period of time required to complete the courses of study listed in paragraphs (1), (2), and (3) of this section for students attending the night term of a school shall be increased as prescribed by the Board.

## 3 of 9

#### (b) <u>Instructors</u>

#### (l) Instructor/student ratio

No school shall provide less than one instructor for each twenty-five (25) students. The ratio of instructors to students shall be sufficient to provide that no more than five practical operations shall be supervised by any one instructor at any one time.

#### (2) Instructors Prohibited from Practice

No instructor in a school of cosmetology may devote any portion of his or her time to work in a beauty shop during training hours. The instructors shall be in attendance in the class room at all times during training hours.

#### (3) Licensed Physician Attached to Staff

Each school shall attach to its staff as a consultant, a person licensed or registered to practice the healing art in the District of Columbia pursuant to subchapter I of chapter I, title 2 of the D.C. Code, who shall lecture at least once a month on sanitation, sterilization, skin and scalp diseases, and personal hygiene.

#### (c) Record of Attendance

Each school shall keep a daily record of the attendance of each student, maintain regular class and instruction hours, establish grades, and hold examinations before the issuance of diplomas. A monthly report shall be submitted to the Board, listing each student in attendance, the student's license number, total number of hours attended by each student during the month covered by the report, and the cumulative total of hours of each student to date. Said report shall be submitted to the Board not later than the 10th day of the succeeding month. Upon completion of the course in which the student is enrolled, the school shall prepare a valid and accurate certificate attesting to the successful completion of the course by the student on a form to be provided by the Board. The form shall furnish the student with documentary evidence that such student has satisfactorily completed the prescribed training program, and shall be in addition to any certificate of completion which the school may confer upon a successful graduate of the school.

#### (d) Facsimile of Official Signature

Each school shall supply the Board with facsimile signatures, on its letterhead or a sheet of plain white paper, of the individual or individuals authorized by the owner of such school to sign all official certificates for admission of students to examinations, and all other official reports required by the Board.

#### (e) Maximum Class Day

The maximum amount of time spent by any student in class shall not exceed eight hours per day, nor six days per week.

#### (f) Separate Rooms

A school shall provide separate rooms for class work and practical instruction and a separate room for supervised practice.

REGULATION 74-19

#### 4 9 ----of----

#### (g) School to be Entirely Separate

A school shall be so located as to be entirely separate and have no connection with a beauty shop or any other place of business. An entrance for the use of the school separate and distinct from the entrance to any other office or place of business shall be provided.

#### (h) Advertisement

In the event that a school desires to advertise, it shall do so only as a school of cosmetology. A school and a shop not, in any form of advertising, be so designated as to mislead the public in regard to prices or location.

#### (i) Bottles and Containers Labeled

All bottles and containers in use must be clearly and correctly labeled as to the contents therein.

#### (j) Sanitary Regulations

Each school shall comply with all health and sanitary regulations for beauty shops now in force or which may be promulgated by the District of Columbia Council.

#### (k) Registration Blank and Certificate of Health

Each student applying for admission to a school of cosmetology shall secure, prior thereto, a registration blank from the Board of Cosmetology and a certificate of health signed by a physician licensed or registered to practice the healing art in the District of Columbia pursuant to subchapter I of chapter II, title 2 of the D.C.Code.

#### (1) <u>Bulletin Board</u>

A bulletin board shall be maintained by each school of cosmetology, and a copy of the Act of June 7, 1938, as amended, relating to the practice of cosmetology, (52 Stat. 611, D.C. Code, title 2, chapter 13.), of these regulations, the school's certificate of registration, and all instructor and student licenses granted by the Board shall be conspicuously displayed thereon at all times. In addition, commencing 90 days following the effective date of this regulation, each school shall conspicuously post on the bulletin board for the current and previous year, the number of students who have successfully completed the required course of study at the school; the number of students who have applied for the Board examination for licensure either as an operator or manager or both at the school; and the number of students from the school who have successfully passed the Board examination for licensure either as an operator or manager or both. The school shall also post where information may be obtained concerning refunds to customers and claims for damage resulting from work performed on the premises.

#### (m) Display of Sign

Each school shall display in a conspicuous place a sign which shall read:

"ALL WORK IN THIS SCHOOL DONE BY STUDENTS."

\*\* \*\*\*

REGULATION 74-19

## 5 9

#### (n) Student Practice Upon the Public

No school shall directly or indirectly charge any money whatsoever for treatment by one of its students or for materials used in the treatment until such student shall have successfully completed at least five hundred (500) hours of training. Schools wishing to charge the public for work of a student or materials used shall first certify to the Board that the student has successfully completed the required number of hours. Upon receipt of such certification, the Board shall issue to the student an identification card indicating that such student has completed the training requirements of the Board.

#### (o) <u>Curriculum</u>, <u>Course Schedules and Examinations</u>

Each school curriculum, course schedule and the content and type of examinations shall be submitted to and approved by the Board. Each school shall arrange the courses devoted to each branch of the practice of cosmetology in accordance with the following schedule. Practical instruction shall consist of class work and individual instruction in all subjects.

- (1) Theoretical instruction shall cover the following outline of study:
  - (A) Bacteriology.
    - (i) Growth, character, and reproduction of bacteria.
- (ii) Sterilization (methods, practical antiseptics, personal hygiene).
  - (B) Anatomy.
    - (i) Bones (heads, hands).
  - (C) Physiology.
- (i) Muscles (function, composition, divisions, blood supply, effect of stimulants and electricity, muscles of the head, face, and neck).
- (ii) Nervous system (cerebro-spinal system, cranial nerves, sensory and motor nerves, functions, sympathetic nervous system, nerves of the scalp, face, and neck, nerve supply to muscles).
- (iii) Circulatory system (blood, arteries, capillaries, veins, heart).
  - (iv) Lymph (formation, function).
- (v) Respiration (function of the respiratory tract, [larynx, trachea, bronchi,] lungs, importance of ventilating and cleanliness).
- (vi) Digestion (alimentary canal, absorption, elimination, skin, kidney, lungs, and intestines).
- (vii) Skin (definition of skin, functions of the skin, division of the skin).
  - (D) Glands.

1			(i)	Description		
2 3			(ii)	Description.  Diseases of the glands (sebaceo	us (oil) suds	ori forous
4 5	(sweat)	, malf			as (OII), sude	rrierous
6 7		(E)	Pigm	ent Anomalies.		
8 9			(i)	Nevi Lentigo (freckles).		
10 11			(ii)	Chloasam.		
12 13			(iii)	Leukoderma.		
14 15		(F)	Finge	er Nails.		
16 17			(i)	Growth.		
18 19			(ii)	Divisions.		
20 21			(iii)	Diseases.		
22 23		(G)	Hair			
24 25			(i)	Location and color.		
26 27			(ii)	Hair and racial characteristics.		
28 29			(iii)	Structure of the hair.		
30 31			(iv)	Growth of the hair.		
32 33			(v)	Scalp diseases.		
34 35		(H)	Chen	nistry.		
36 37			(i)	Bleaches.		
38 39			(ii)	Dyes.		
40 41			(iii)	Permanents.		
42 43			(iv)	Chemical relaxers.		
44 45	(2)	Sch	edules	of practical operations during cou	ırse of trainin	g
46 47 48	<u>Subject</u>				Minimum N Practical O Operator M	<u>perations</u>
49 50	Bubject			SHAMPOO	Operator W	4114901 01
51 52	Soap			DIAMIOO	30	50
53 54	Liquid dry Special				9	11 11
55 56	pheorai			RINSE		
57 58	Cha a m				6	7
59 60	Cream Color				6 6	7 8
00	Special				~	0

Blocking

Liquid (combination)

Hand and arm massage

Paste (bleach)

## REGULATION 74-19

	PERMANENT		
Permanent waving		43	72
Chemical straightening		43	72
	HOT WORK		
Pressing		8	12
Croquignole waiving		20	40
Blocking		8	12
Round curl		8	12
	WET WORK		
Pin curl		26	34
Finger wave		26	34
Skip wave		27	34
	HAIRCUTTING		
Short		16	20
Long		2	2
Trim		12	16
Thinning		16	20
	DYEING AND BLEACHIN	īG	

7 of 9

# Oily hair 10 15 Dry hair 10 15 Falling hair 12 18

SCALP TREATMENTS

38 FACIALS

39			
40	Arch	13	17
41	Plain	13	17
42	Bleach	13	17
43	Pack	13	17
44	Mask	13	17
45	Make-up	13	19
46			
47	MANICURE		
48			
49	Water	30	35
50	Cream	30	35
51	Hand and arm bleach	4	5
			_

(3) Distribution of Hours of Training

No student shall be certified by the school as having successfully completed the required course of study until such student has completed the hours of training which shall be distributed approximately as set forth below:

Provided That, students enrolled for limited certificates shall be required only to complete the hours set forth in section 4(a)(3) of this regulation.

#### 8\_of\_9

1		<u>OPERATOR</u>	MANAGER
2			
3	Manicuring	75	80
4	Pressing	160	225
5	Croquignole waving and styling	200	225
6	Shampooing	40	40
7	Permanent waving	200	225
8	Wet curls	125	175
9	Facials	50	50
10	Scalp treatments	25	35
11	Dye and bleach	100	125
12	Haircutting	100	125
13	Chemical straightening	225	230
14	Oral, written, and practical tests	50	75
15	Personal hygiene	75	125
16	Ethics, salesmanship	25	35
17	Courtesy, conduct, D.C. Law	50	50
18	Shop management, bookkeeping		100
19	Teaching methods, lecture courses		<u> </u>
20			
21	TOTALS	1,500	2,000

#### (4) Scope of Examinations

Prior to the issuance of a diploma and any certification to the Board each student shall be required to successfully complete examinations given by the school, as approved by the Board. Examinations shall cover all subjects listed in these regulations relating to theoretical instructions as well as practical and oral demonstrations by the student in manicuring, facials, shampooing, scalp treatment, rinses, dyes, finger waving, permanent waving, haircutting, sanitation and sterilization, chemical straightening, personal hygiene, ethics, D.C. Law, and for the manager course, shop management, bookkeeping, and teaching methods.

#### (p) Equipment required for schools of cosmetology

Minimum equipment required for schools of cosmetology with an enrollment of twenty-five students or less shall be as follows:

- 4 shampoo bowls
- 10 stoves
- 6 Dryers
- 3 Blowers
- 2 Facial chairs
- 4 All-purpose chairs
- l Vibrator
- 5 Manicure tables
- 2 Wet sterilizers

Dry sterilizer sufficiently large enough to hold equipment for 25 students.

A container for liquid sterilization on each manicure table.

#### Section 5. Denial, Suspension or Revocation of License

(a) Failure to comply with any provision of these regulations shall be grounds for the denial, suspension, or revocation of the certificate of registration of a school of cosmetology, pursuant to section 2-1304 of the D.C. Code.

#### 9 9 \_\_\_of\_\_\_

(b) Hearing Process. Nothing herein shall be construed so as to deprive the school of cosmetology of the hearing and appeal process provided in sections 2-1304 and  $\$\ 2-1305$ , D.C. Code.

. ...

August 1, 1974 Enactment Date

Regulation No. ....

1 2

3

4

5

7

8

9

10 11

12

13

14

15

16

17

18

19

202122

23

24



# **Regulation**

#### of the

#### District of Columbia

TITLE RENT CONTROL REGULATION FOR THE DISTRICT OF COLUMBIA

---Vice Chairman Sterling Tucker Presents the following regulation:

WHEREAS, a critical situation exists in the District of Columbia by reason of the acute shortage of leased or rented rooms, apartments, houses, and other housing accommodations, resulting in increased rents and serious overcrowding and causing severe threats to the public health, safety, and welfare; and

WHEREAS, unless rents and rental services for these leased or rental dwellings are regulated and controlled, unreasonable, unjust, and exorbitant rents and rental agreements will cause disruptive and abnormal conditions in the leased or rental accommodation market, which will produce serious threats to the orderly functioning of the housing market and the economy of the District of Columbia; and

WHEREAS, upon the imposition of rent control in the District, unless occupants of rented or leased housing accommodations in the District are entitled to a reasonable advance notice of the intention of their landlords to convert from a rental basis to condominium or cooperative units, mass evictions of substantial numbers of apartment dwellers, on short notice, will cause disruptive and abnormal conditions in the leased or rental dwelling market, which will further produce serious threats to the orderly functioning of the housing market and the economy of the District of Columbia; and

WHEREAS, pursuant to the District of Columbia Rent Control Act of 1973 (87 Stat. 623 P. L. 93-157), the District of Columbia Council is authorized to make such rules and regulations as it determines necessary and appropriate to regulate

			RE	EC	ORD OF C	OU	NC	IL	V	OTE					
COUNCILMAN	AYE	NAY N.	/. A.B.	R.A.	COUNCILMAN	AYE N	AY N.V.	A.B.	R.A.	COUNCILMAN	AYE	NAY	N.V.	A.B.	R.A.
NEVIUS		X			FOSTER	X				PARKER	X				
TUCKER	X				MEYERS	X				ROBINSON	X				
FORD	X				MOORE	X				SELDEN				X	
		X—In	dicate	s Vo	te A. B.—Absent	N. V.	Not V	oting	R.	A.—Readopted					
Submitted on first	read	ing at	a mo	etin	g of the District o	f Colu	mhia	City	Cou	ncil on July 1	8,	1974	!		
							iiibia	City	Cou	nen on					
Adopted on second	and	final re	eadin	g	July 26, 1974					-0		7	-4		
Presented to the 1	Mayor	-Opin	nissi	oner	July 26, 1974	1			ع	Swand S.	We	hely	h		
		11/2/	1 1		Date R		-		Se	ecretary of the City	Cou	ıncil	1	(	
Approved	11	Mex	M	MI	/Mahi VH	27					1 A	UG 19	974		
11	7	1	/Iayoı	-Con	nnissioner		*					Date			m en en
Enacted W/O sign	natur	e of t	ho N	Novio:	according to ten	dan	1::+-	tion	w. 1 -	Long wildle, the L					
Enacted W/O sig	matur	C OL U	ile iv	layor	according to ten	day	шша	LIOII	ruie			Date			as es es
D: 1 1															
Disapproved and i	eturn	ed to t	he C	City (	Council	or-Com	miagia			top / tols tols for end out one					em em em
					Mayo	or-Com.	missio.	ner				Date			
Readopted															
		D	ate												
hereby certify tha	t this	regula	tion	is tru	are and adopted (or	reado	pted)	as s	tated	therein.	Me				
P-251								an en estata	Se	cretary of the City	Cou	neil			ES ES ES

Certified copies are available.

#### \_\_2.of\_13

and stabilize rents in the District of Columbia.

NOW, THEREFORE, BE IT ENACTED by the District of Columbia Council that:

Section 1. The regulations set forth are hereby adopted, and shall be so compiled and published as is deemed appropriate for their orderly arrangement within the D. C. Rules and Regulations.

Section 2. Legislative Findings and Intent - The District of Columbia Council hereby finds that there is a serious shortage of rental units in the District of Columbia; that this shortage is particularly critical for households of low and moderate income; that escalating rent increases have been prevalent throughout the District of Columbia since the termination of Federal Rent Controls, on January 11, 1973; that, while most landlords have acted responsibly, there has been a significant minority of excessive increases in rents and/or decreases in services; that rent increases have been significantly higher and more prevalent on moderate priced rental units than on high priced rental units; that the protection of the health and welfare of the residents of the District of Columbia requires enactment of rent controls which protect the rights of tenants and assure landlords a fair rate of return.

It is the intent of this regulation to protect tenants from excessive rent increases, unjustified reduction of services, harassment and unreasonable eviction; to protect the right of landlords to a reasonable return on their investments; to encourage stability of ownership and tenancy and improve landlord/tenant relations; and to foster the maintenance of the existing housing stock through compliance by both landlords and tenants with the District of Columbia Housing Code and through provision of incentives to upkeep and reasonable renovation.

#### Section 3. Definitions - As used in this regulation -

- (a) The term "Act" means the District of Columbia Rent Control Act of 1973 (87 Stat. 623; P. L. 93-157).
- (b) The term "base rent" means the rent charged (converted to a monthly basis) for a housing accommodation on February 1, 1973. If such an accommodation was not rented on that date, base rent shall mean the amount of rent last charged or allowed on the accommodation between January 1, 1972 and February 1, 1973. In the event that the accommodation was not rented during that period, or the landlord can establish to the satisfaction of the Commission that the rent charged on or before February 1, 1973 cannot be determined, the base rent will be the amount of rent appropriate for that accommodation on February 1, 1973, as determined by the Commission.
- (c) The term "capital improvement" means a permanent improvement or renovation other than ordinary repair, replacement or maintenance, the use of which will continue beyond a twelve month period beginning with the completion of the improvement.
- (d) The term "Commission" means the District of Columbia Housing Rent Commission.
- (e) The term "Commissioner" means the Commissioner of the District of Columbia, or his designated agent.
- (f) The term "Council" means the District of Columbia Council established under Reorganization Plan Number 3 of 1967.
  - (g) The term "housing accommodation" means any building, structure,

#### \_\_3.of\_<u>13</u>

residence, or any part thereof, and land appurtenant thereto, which is rented, leased or offered for rent or lease for dwelling purposes, including a single family residence or a room, apartment, efficiency, or group of rooms in a building, structure of residence. The term shall not include (1) any hotel, motel, or other structure used primarily for transient occupancy in which more than 60 percent of the units devoted to living quarters for tenants and guests are normally used for transient occupancy; or (2) any room or space normally rented, leased or offered for rent or lease for transient occupancy. The term "unit" of a housing accommodation shall mean any room, apartment, efficiency, or group of rooms rented or leased or offered for rent or lease within such an accommodation.

(h) The term "housing regulations" means the Housing Regulations of the District of Columbia (1971 ed.).

(i) The term "initial leasing period" shall mean that period of time during which the first tenant of a new housing accommodation or one substantially rehabilitated, occupies or rents such accommodation.

(j) The term "landlord" means an owner, lessor, sublessor, assignee, agent, or other person receiving or entitled to receive the rents or benefits for the use or occupancy of a housing accommodation as herein defined.

(k) The term "optional facilities" means any facilities or equipment made available by a landlord to a tenant at the option of the tenant and in exchange for payment of a rental fee over and above the rental fee for occupancy of the accommodation.

(1) The term "person" means an individual, corporation, partnership association, joint venture, or any organized group of individuals or the legal successor or assigns of representatives of the foregoing.

(m) The term "related facilities" means any facilities or equipment made available by a landlord to a tenant, the use of which is included upon payment of the rental fee for the housing accommodation.

(n) The term "related services" means services provided by a landlord or required by law or by the terms of a rental agreement to be provided by a landlord to a tenant in connection with the use and occupancy of any housing accommodation, including but not limited to: repairs; decorating and maintenance; furnishings and furniture; provision of light, heat, hot water, cold water, telephone answering and elevator services; kitchen, bath, and laundry facilities and privileges; use of halls, corridors, stairs, common rooms, yard, and other common areas; janitor service; and removal of trash and refuse.

(o) The term "rent" means the entire amount of money, money's worth, bonus, benefit, or gratuity demanded, received, or charged by the lessor landlord to a lessee tenant as a condition of occupancy and use of a housing accommodation, its related services, and its related facilities including, but not limited to, charges for parking and utilities and the use of recreational facilities if provided.

(p) The term "rent ceiling" means the maximum allowable amount of rent to which the base rent for any housing accommodation within the scope of this regulation may be elevated, in keeping with the provisions of this regulation.

(q) The term "substantial rehabilitation" means any improvement to or renovation of a housing accommodation for which the capital expenditure totals fifty percent or more of the estimated market price of the accommodation prior to rehabilitation, provided a building permit has been issued for such rehabilitation on or after February 1, 1973. For the purposes of this subsection, "estimated market price" shall mean one of the following, whichever us higher: (1) total

#### \_4\_\_of\_\_13

purchase price paid by the landlord for the accommodation; or (2) the estimated market value for property assessment purposes as determined by the Commissioner. Where the improvement or renovation is made to only a portion of the housing accommodation, the capital expenditure thereon should be pro rated at the percentage of the estimated market price of the whole unit which the portion bears to the whole.

(r) The term "tenant" means a tenant, subtenant, lessee, sublessee, or other person entitled to the possession, occupancy, or the benefits thereof of any housing accommodation as herein defined.

Section 4. Rent Control Coverage - The system of rent control provided in this regulation shall be applicable to all housing accommodations in the District of Columbia with the following exceptions:

(a) Any establishments which have as their primary purpose the providing of diagnosis, cure, and treatment of illness of residents, including but not limited to hospitals, convalescent homes and nursing homes, and personal care homes.

(b) Any publicly owned housing accommodations which are managed by the National Capital Housing Authority or any successor thereto; and any housing accommodation which is Federally owned or for which the mortgage or rents are Federally subsidized.

(c) Any new housing accommodation created by new construction and offered for rent or lease on or after February 2, 1973, during the initial leasing period of such accommodation, or during the first year of tenancy, whichever is shorter. For the purposes of this subsection, a new housing accommodation is an accommodation for which the initial Certificate of Occupancy was issued on or after February 1, 1973.

(d) Any dormitory operated by an institution of higher learning or private school, in which rooms are provided for its students.

(e) Any rooming house or boarding house as defined in Section 1102 of the housing regulations of the District of Columbia.

 (f) A room rented by the occupant of a housing accommodation, whether such occupant is the owner of the accommodation or a tenant who leases or rents the accommodation.

#### Section 5. Stabilization of Rents

 (a) Subject to such adjustments as are authorized in this Section and in Section 6 of this regulation, no landlord shall charge a rent for a housing accommodation in excess of the base rent as defined in Section 3(b) or, when applicable, the rent ceiling provided in subsection (f) herein.

(b) Upon the effective date of this regulation, and subject to the provisions of paragraph (i) herein, a landlord who is renting or leasing any housing accommodation within the scope of this regulation shall be entitled to charge an amount of rent for such accommodation which shall not exceed the rent ceiling computed according to the following formula:

(1) Step 1: Adding to the base rent an amount equal to four percent (4%) of base rent to allow for increased costs incurred by the landlord during calendar year 1973 after February 1, 1973; and

(2) Step 2: Adding to the figure computed in Step 1 an amount equal to eight percent (8%) of this figure to allow for increased costs incurred by the

REGULA'	דא 🦳 דיד	71 20	
RECTILA	1 1 ( ) ( )	/4-/11	

#### \_5\_of\_\_13

landlord during calendar year 1974.

- (c) When a landlord has initiated or completed capital improvements on an accommodation between February 1, 1973 and the effective date of this regulation, the rent ceiling for such accommodation shall be computed to make allowance for such capital improvements provided that (1) the cost of such capital improvement equals at least 25% of the estimated market value for the accommodation (or the appropriate percentage of the estimated market value when the improvement applies only to a unit of such accommodation); (2) the landlord has obtained, and made available to the tenant and the Commission the appropriate contract plans, specifications, and building permits; (3) the cost of the improvement is amortized according to the formula provided in Section 6(b)(5) of this regulation and the rent increase, notwithstanding such formula, is no more than 4% of the allowable rent ceiling for such accommodation.
- (d) When, upon effective date of this regulation, the rent being charged for any housing accommodation exceeds the allowable rent ceiling as computed according to the formula provided in (b) herein, the rent for such accommodation shall be reduced to the allowable rent ceiling, effective on the next date when rent is normally due. It shall be the responsibility of the landlord to notify the tenant in writing of the required decrease at least one week prior to effective date of such decrease.
- (e) Whenever the Commission finds that past or forthcoming decreases or increases in taxes, operating costs or maintenance costs may justify a change in the rent ceiling provided in this Section or additional provisions to allow for increased costs incurred by landlords, it shall present its findings and appropriate recommendations to the Council.
- (f) The rent ceiling for a substantially rehabilitated housing unit as defined in Section 3(q) of this regulation, shall be computed by increasing by 125% the allowable rent ceiling for 1974 as provided in paragraph (b) of this Section.
- (g) The rent ceiling for a newly constructed housing accommodation which becomes subject to this regulation after initial exemption as provided in Section 4(c) shall be the initial rent charged during the initial leasing period.
- (h) Where the Commission determines that the related services and/or facilities supplied by a landlord are substantially reduced as compared to services and/or facilities previously provided, the rent ceiling shall be lowered accordingly by the Commission on its own initiative or upon petition by the tenant, in accordance with the provisions of Section 7.
- (i) The Commission may (1) refuse to allow any upward adjustment of the base rent of any housing accommodation or (2) decrease the rent ceiling on such accommodation, pursuant to the procedures provided in Sections 6 and 7 of this regulation, if it determines that the accommodation does not substantially comply with the housing regulations and such lack of compliance is not caused by the tenant's neglect or misconduct.
- (j) When, after effective date of this regulation, a housing accommodation becomes vacant, the rent ceiling for such accommodation shall be increased to the highest rent ceiling applicable to any substantially identical accommodation within the same rental facility, provided the tenant has vacated voluntarily or as a result of notice to quit or eviction for one of the following causes: (l) nonpayment of rent; (2) violation of an obligation to his tenancy, as provided in Section 10(b)(l) of this regulation; or (3) use of the accommodation for illegal purposes, as provided in Section 10(b)(2) of this regulation. For the purpose of this subsection, accommodations shall be defined as "substantially identical" when they contain essentially the same square footage, the same floor plan, comparable amenities and equipment, comparable

#### 6 of 13

locations with respect to exposure and height (if exposure and height have previously been factors in amount of rent charged), and are in substantially comparable physical condition.

(k) The rent ceiling for any housing accommodation which (l) was purchased by the present landlord from the Federal Government on or after February 1, 1973 and (2) for which the mortgage and/or rents were Federally subsidized immediately prior to purchase shall be the rent charged on effective date of this regulation, plus 4% of the rent ceiling on that date.

(1) No rent increase authorized under these regulations shall be put into effect unless the tenant has been given written notice thirty days prior thereto. Any notice of increase of rent shall be signed by the landlord and shall contain:

(1) The amount of rent for the rent payment interval immediately preceding the proposed increase and that for the rent payment interval in which the increase becomes effective.

(2) The percentage increase and the dollar amount of the proposed increase.

(3) The effective date of the proposed increase.

(4) A statement that the unit is in substantial compliance with the housing regulations.

(5) The base rent and explanation of the manner by which the increase has been computed, when such increase is pursuant to Section 5 of this regulation.

(6) The exact method of computation of the increase, including itemization of the cost factors to which the increase is attributable, when such increase is pursuant to Sections 6 and 7 of this regulation.

(7) A statement of certification by the landlord that the increase is in compliance with all the provisions of the District of Columbia Rent Control regulation.

(8) Statement of penalties as described in Section 14(c) of this regulation.

#### Section 6. Adjustment in Rent Ceiling Because of Hardship

(a) In addition to those procedures for adjustments allowed under Section 5, the Commission may make such individual adjustments, either upward or downward, of the maximum rent ceilings as may be necessary to correct hardships of other inequities, and in so doing, shall observe the principle of maintaining maximum rents for housing accommodations at levels which will yield to the landlords a reasonable return from such housing accommodations.

(b) In determining whether to make an individual adjustment in the rent ceiling because of hardship, the Commission shall consider the following among other relevant factors:

(1) Increases or decreases in property taxes, provided the Commission determines that such increases or decreases reflect (i) a general tax increase or decrease; (ii) that portion of an upward assessment due to capital improvement approved by the Commission, as provided in paragraph 5; and/or (iii) a correction of a prior overevaluation or underevaluation, due to error, by the Department of Finance and Revenue.

REGULATION 74-20

#### \_\_7\_of\_13\_

- (2) Unavoidable increases or any decreases in operating costs and maintenance expenses.
- (3) Increases or decreases in living space or related services, provided that the Commission has approved any increases in space or services as being reasonable and in the interest of the affected tenants.
- (4) Substantial deterioration of the housing accommodation, other than ordinary wear and tear, or failure to perform ordinary repairs, replacement or maintenance.
- (5) Capital improvement of the housing accommodation as defined in Section 3(c) of this regulation provided that (i) the necessary permits for such improvements have been issued by the Commissioner and (ii) the Commission has determined that said improvements are reasonable and that the interests of the tenant have been protected. The cost of a capital improvement shall be amortized over the projected useful life of the improvement, as determined by the Commission. Based on such amortization, the cost of such capital improvement may be used to justify an upward adjustment in the rent ceiling, provided the monthly rent increase attributable to such improvement is not more than 11/2% of the share of the amortized cost attributable to any benefitted unit.

#### Section 7. Procedure for Adjustment of Rent Ceiling or Advance Ruling

- (a) The Commission shall consider an upward or downward adjustment of the rent ceiling for any individual housing accommodation upon receipt of a petition for adjustment filed under oath by the landlord or tenant of such housing accommodation or upon action on its own initiative. Such petition shall be made on a form approved by the Commission. The Commission may consolidate petitions and actions relating to housing accommodations in the same building, and all such petitions and actions may be considered in a single hearing. Any finding by the Commission on a petition shall be based on the record pertaining to such petition. The Commission shall act by approving or denying each petition filed with it no later than 60 days after the filing of the petition unless extended by written consent of the parties.
- (b) Upon receipt of such petition, the Commission shall notify the landlord or tenant, whichever is appropriate, by U. S. Certified Mail, or any other form of service which assures delivery, of the receipt of such petition and of the right of either party to request a hearing in writing within fifteen days of the receipt of such notice. A copy of the appropriate petition shall accompany such notification. If a hearing is timely requested by either party, or if the action is undertaken on the initiative of the Commission, notice of the time and place of the hearing shall be furnished the parties by U. S. Certified Mail at least fifteen days prior to the commencement of such hearing. Such notice shall inform the landlord or tenant, whichever is appropriate, of his right to retain legal counsel to represent him at the hearing. All hearings shall be conducted pursuant to Title 5DD of the District of Columbia Rules and Regulations and shall be consistent with the provision of the D. C. Administrative Procedure Act (D. C. Code, Sec. 1-1501 et. seq.).
- (c) When a petition for adjustment is filed with the Commission or upon action initiated by the Commission, the landlord of the particular accommodation shall furnish the Commission, within fifteen (15) days after the Commission's written demand therefor, an information statement approved by the Commission, and containing such information as it may request. Such information requirements shall include but not be limited to an itemization of the actual income and operating expenses for a two-year period, ending no more than four months prior to the date of the petition for adjustment.
  - (d) Pursuant to receipt of a petition for adjustment or to initiation of action

#### 8 of 13

by the Commission under this Section, the Commission shall notify the landlord and/or tenant, whichever is appropriate, of his right to inspect and copy all documents, records, reports and other written materials or evidence that will be used by the opposing party in support of his petition or by the Commission in support of its proposed action.

- (e) When a landlord plans a capital improvement or an increase in space or related services in a housing accommodation he may, upon submission of appropriate contract plans and specifications, building permits, or in the case of increased related services, other proof of his intentions, file a petition for an advance ruling for future adjustment of the rent ceiling for such accommodation. Such petition shall be filed under oath upon a form approved by the Commission and may reflect the projected cost of the planned improvements or added related services at the time of their completion and/or implementation. The considerations and procedures governing such advance rulings shall be consistent with Section 6(b)(3) and (5) and Section 7(a), (b), (d), and (f). Any adjustment in rent ceiling conditionally approved by such advance ruling shall become effective upon submission of proof, to the satisfaction of the Commission, of fulfillment of the projected plans for improvements or added related services, as described in the petition and of the total costs thereof. Preliminary approval of a petition for advance ruling shall be subject
- (f) Notwithstanding any other provision of this Section, the Commission may, without holding a hearing, refuse to adjust the rent ceiling for any individual accommodations under this Section and may dismiss any petition for adjustment if a hearing has been held under this Section for such housing accommodation within six months prior to the filing of the said petition.

to such subsequent review and final approval as the Commission determines as

#### Section 8. Housing Rent Commission

necessary and appropriate.

- (a) Establishment and Functions. There is hereby established for the District of Columbia a temporary Commission to stabilize and regulate rents and to carry out and enforce the provisions of the Act, these regulations and any rules or orders promulgated and adopted by the Commission pursuant to the Act and those regulations. Members of the Commission shall be appointed within thirty days after the effective date of this regulation. The establishment, duties, powers, appointments of members, membership, compensation, and termination of the Commission shall be in accordance with the Act. Five members of the Commission shall constitute a quorum for the transaction of the business of the Commission: Provided, that at least two of the five members present shall be representatives of the interests of landlords.
- (b) <u>Election of Vice Chairman</u>. Within 30 days after appointment and approval of each of the nine members of the Commission, a Vice-Chairman shall be elected by the Commission from among its members.
- (c) <u>Selection and Appointment of Commission Employees</u>. The Commission shall appoint an Executive Director, legal counsel, and such other staff as it may deem necessary. The Commission may also appoint mediators, who shall be authorized to conciliate disputes between landlord and tenants which may arise under the provisions of the Act, these regulations, or any rules or orders promulgated and adopted by the Commission pursuant to the Act and these regulations.
- (d) Adoption of Rules of Procedure. The Commission is hereby authorized to adopt additional rules of procedure as it may deem necessary. In so doing, the Commission shall comply with the rule making procedures contained in the District of Columbia Administrative Procedures Act 1-1501 et. seq. D. C. Code, (1973 ed.).

I	REGULATION	74-20	

#### \_\_9 of 13

(e) Complaints. The Commission shall be authorized to receive and review complaints by tenants and landlords in the District of Columbia with respect to any violation of these regulations or of any rule or order of the Commission with respect to the enforcement and the administration of such rules.

#### Section 9. Lease and Registration Requirements

- (a) Every new tenant of a housing accommodation not excluded from coverage of this regulation by Section 4 shall be given by the landlord a written lease for the initial period of tenancy.
- (b) On or before the 60th day following the appointment and confirmation of a quorum of the Commission members, every landlord of a housing accommodation not excluded from coverage of this regulation by Section 4 shall file with the Commission, on forms approved by the Commission, a registration statement for each such accommodation or group of accommodations in one building.
- (c) The registration form shall contain such information as the Commission may require, including but not limited to:
- (1) A description of the property, including address, number of apartments, number of stories, approximate age, type of construction, and date and number of license issued by the District of Columbia Government.
- (2) A description of the utilities and air conditioning provided by the landlord and type of heating fuel used.
- (3) Rental information on each unit for base rent date: total occupancy fee charged, amount of security deposit, related services included, related facilities and charges therefor on February 1, 1973, or the appropriate base rent date as provided in Section 3(b) of this regulation.
  - (4) Current rent information on each unit: (Same as above).
- (5)(i) When an accommodation has been substantially rehabilitated, as provided in Section 3(q), the estimated market price of such unit prior to rehabilitation, a description of the rehabilitation, and the itemized costs of such rehabilitation; (ii) when an accommodation is planned to be substantially rehabilitated or in the process of being substantially rehabilitated on the effective date of this regulation, the estimated market price of such unit prior to rehabilitation, the method of computing the estimated market price, a description of the proposed rehabilitation, and the itemized estimated costs of such rehabilitation.
- (6) When the rent for an accommodation has been increased to allow for capital improvements as provided in Section 5(c), the estimated market value of such accommodation prior to capital improvement, a list of all such improvements allowed for pursuant to Section 5(c), and the itemized costs of such improvements.
- (7) Itemization of any outstanding violations of the housing regulations.
- (8) Name and address of owner and, when applicable, resident agent.
- (d) In the event that any information provided on the registration form becomes invalid or obsolete, it shall be the responsibility of the landlord to correct such information within thirty days.
  - (e) No petition for the upward adjustment of rent ceilings shall be granted

#### \_10\_of\_13\_

by the Commission for any accommodation not registered in accordance with the provisions of this Section; nor shall the landlord of any accommodation not so registered be eligible for any rent increase adjustment provided in Section 5 and applicable to that accommodation on or after the 60th day following confirmation of the Commission members.

(f) Each registration form shall be filed and available for public inspection in the Commission Office. Each landlord shall keep a duplicate of each such form and make it available upon request to the appropriate tenant or prospective tenant.

#### Section 10. Eviction

- (a) No tenant shall be evicted from his housing accommodation for any reason other than nonpayment of rent, unless he has been served with a notice to vacate specifying therein the reason for his eviction, and a copy of such notice has been served upon the Commission.
- (b) No tenant shall be evicted from his housing accommodation, notwithstanding the expiration of his lease, so long as the tenant continues to pay rent to which the landlord is entitled, unless:
- (1) The tenant is violating an obligation of his tenancy, and fails, within thirty days after receiving notice thereof from the landlord, to correct such violation.
- (2) An illegal act has been performed in the accommodation as determined by a court of competent jurisdiction.
- (3) The landlord seeks in good faith to recover possession of the housing accommodation for his immediate and personal use and occupancy. It shall be unlawful for the owner of such premises or his agent to demand or receive rent for the premises for at least six months after recovering; or
- (4) The landlord has in good faith contracted in writing to sell the accommodation for immediate and personal use and occupancy as a dwelling by the purchaser for at least six months after recovery, during which period it shall be unlawful for the purchaser of such premises or his agent to demand or receive any rent therefor. The landlord, at the time he offers the accommodation for sale, shall so notify the tenant in writing.
- immediate purpose of making alterations or renovations which cannot safely or reasonably be accomplished while the accommodation is occupied or for the immediate purpose of demolishing the accommodation and replacing it with new construction, provided that the plans for the alteration or new construction have been filed with and approved by the Commissioner of the District of Columbia or his appropriate agent. When the landlord seeks to recover repossession under this subsection for the purpose of initiating substantial rehabilitation of the accommodation, he shall be subject to the provisions of Section 12(b) of this regulation. If, however, the landlord seeks to recover possession in order to make repairs which are necessary to bring the premises into compliance with District of Columbia Housing Regulations, the tenant shall have an absolute right to repossession immediately upon completion of the repairs, at the same rent and under the same obligations; or
- (6) The landlord seeks in good faith to recover possession for the immediate purpose of discontinuing the housing use and occupancy for a continuous period of not less than six months, during which period, commencing on the date possession is recovered under this subsection, it shall be unlawful for the landlord of such housing accommodation or his agent to demand or receive rent for the same.

#### 

Where the landlord seeks to recover repossession under this subsection for the purpose of initiating substantial rehabilitation of the accommodation, he shall be subject to the provisions and requirements of Section 12(b) of this regulation.

#### Section 11. Retaliatory Action

- (a) No landlord shall take any retaliatory action against any tenant who exercises any right conferred upon him by the Act or by this regulation, or by any rule or order issued pursuant thereto. For purposes of this Section, retaliatory action shall include, but not be limited to, any action or proceeding to recover possession of a housing accommodation or action which would increase rent, decrease services, increase the obligations of a tenant or constitute an undue or unusual inconvenience, violation of privacy, harassment, or reduction in the quality or quantity of services or be any form of threat of coercion.
- (b) In determining whether an action taken by a landlord against a tenant is a retaliatory action as defined in (a) above, the Commission shall take into consideration whether, within the last six months preceding such landlord's action:
- (1) The tenant has made an oral or written request to the landlord or his agent to effect repairs which are necessary to bring the housing accommodation into compliance with the housing regulations; or
- (2) The tenant has, either orally or in writing, contacted appropriate officials of the District of Columbia about existing violations of the housing regulations in the accommodation which he occupies or reported suspected violations which, if confirmed, render the accommodation in substantial noncompliance with the housing regulations.
- (3) The tenant has, after having given reasonable notice to the landlord or his agent, either orally or in writing, of violations of the housing regulations, withheld his rent, all or in part.
- (4) The tenant has organized, been a member of, or been involved in any lawful activities of a tenant organization; or
- (5) The tenant has made efforts to secure or enforce any rights under his lease or contract with the landlord.
- (6) The tenant has brought legal action against the landlord based on this regulation.
- (c) Notwithstanding the provisions of (b) above, the landlord may maintain his action if he can show that his predominant reason in seeking eviction is one or more of the just causes for eviction provided in Section 10.

# Section 12. Conversion of Housing Through Condominium Conversion, Cooperative Ownership, or Substantial Rehabilitation

(a) Every tenant of a housing accommodation which the landlord seeks to convert from a rental basis to a condominium or cooperative, shall be notified in writing 180 days prior to the conversion thereof. The landlord of such a housing accommodation shall make to each tenant a bona fide offer of sale of the unit which said tenant occupies, and the tenant shall be afforded 60 days within which to accept. No tenant shall be served with a 30-day notice to vacate until 150 days after he first received notice of the landlord's intention to convert, nor shall the notice to vacate be served prior to the expiration of the aforesaid 60-day period or receipt of the tenant's written rejection of the bona fide offer of sale of the unit which he occupies, whichever occurs first.

REGULATION 74-	-20
----------------	-----

#### \_12\_of\_13\_

(b) The tenant of every housing accommodation which the landlord seeks to substantially rehabilitate shall be notified in writing 120 days prior to commencement of rehabilitation. No tenant shall be served with a 30-day notice to vacate until 90 days after he first received notice of the landlord's intention to rehabilitate. The 120-day written notice shall include the information required under Section 9(c)(5), and information indicating tenant may obtain a copy of the registration form at the office of the Commission, and its address.

#### Section 13. Prohibited Acts

- (a) It shall be unlawful, regardless of any agreement, lease or other obligation heretofore or hereafter entered into, for any landlord to demand or receive any rent in excess of the rent ceiling established for any housing accommodation, or to do or omit any act in violation of any provisions of the Act, this regulation, or any rules or orders promulgated and adopted pursuant to the Act and these regulations.
- (b) It shall be unlawful for any person required by these regulations, or any rules or orders promulgated and adopted pursuant to the Act and these regulations, to make a written registration statement or other statement and willfully include therein any false, misleading, or untrue information.
- (c) It shall be unlawful for any landlord of a housing accommodation within the scope of this regulation knowingly to reduce or eliminate related services previously provided in relation to the rent or lease of such accommodation without a proportionate decrease in rent.
- (d) It shall be unlawful for any landlord of a housing accommodation within the scope of this regulation to increase charges for related facilities as defined in Section 3 unless such increase in charges maintains the rent level for such accommodation within the allowable rent ceiling, as provided in Section 5.
- (e) It shall be unlawful for any landlord to charge a tenant, who on effective date of this regulation, occupies a housing accommodation subject to this regulation, any security deposit not previously required by the landlord for occupancy of said housing accommodation.
- (f) It shall be unlawful for a tenant to withhold his rent in whole or in part unless such rent withheld from the landlord is deposited in an escrow account established for that purpose.
- (g) It shall be unlawful for any landlord to increase the rent for any accommodation above the base rent as defined in Section 3(b) of this regulation if (1) the landlord of such accommodation is not properly licensed pursuant to Section 3102 of the Housing Regulations of the District of Columbia and (2) the manager of such accommodation, when other than the landlord, is not properly registered pursuant to Section 3106 of the Housing Regulations of the District of Columbia.

#### Section 14. Miscellaneous Provisions

- (a) Effective date: These regulations become effective immediately upon enactment.
- (b) Severability. If any provision of this regulation, or any Section, sentence, clause, phrase, or word or the application thereof, in any circumstances if held invalid, the validity of the remainder of this regulation, and of the application of any such provision, section, sentence, clause, phrase, or word in any other circumstances shall not be affected. Thereby and to this end, the provisions of this regulation are declared severable.

11

12

13

14

15

21

22

28

29

35

36

42

43

49 50 51

57

58

59

#### \_13\_of\_13\_

- (c) <u>Penalties</u>. Any person who willfully violates any provision of this Act or any rules or order of the Commission shall be fined no more than \$5,000 for each such violation.
- (d) Nothing herein shall prohibit any landlord or tenant from bringing a civil course of action in a court of competent jurisdiction to enforce any right conferred upon said landlord or tenant pursuant to this regulation.
- (e) <u>Termination</u>. The provisions of this regulation shall terminate as provided by the Act.

14-20

Regulation No. -----

5



August 1, 1974
Enactment Date

## Regulation

of the

#### District of Columbia

TITLE RENT CONTROL REGULATION FOR THE DISTRICT OF COLUMBIA

--- Vice Chairman Sterling Tucker Presents the following regulation:

WHEREAS, a critical situation exists in the District of Columbia by reason of the acute shortage of leased or rented rooms, apartments, houses, and other housing accommodations, resulting in increased rents and serious overcrowding and causing severe threats to the public health, safety, and welfare; and

WHEREAS, unless rents and rental services for these leased or rental dwellings are regulated and controlled, unreasonable, unjust, and exorbitant rents and rental agreements will cause disruptive and abnormal conditions in the leased or rental accommodation market, which will produce serious threats to the orderly functioning of the housing market and the economy of the District of Columbia; and

WHEREAS, upon the imposition of rent control in the District, unless occupants of rented or leased housing accommodations in the District are entitled to a reasonable advance notice of the intention of their landlords to convert from a rental basis to condominium or cooperative units, mass evictions of substantial numbers of apartment dwellers, on short notice, will cause disruptive and abnormal conditions in the leased or rental dwelling market, which will further produce serious threats to the orderly functioning of the housing market and the economy of the District of Columbia; and

WHEREAS, pursuant to the District of Columbia Rent Control Act of 1973 (87 Stat. 623 P. L. 93-157), the District of Columbia Council is authorized to make such rules and regulations as it determines necessary and appropriate to regulate

RECORD OF COUNCIL VOTE																	
COUNCILMAN	AYE	NAY	N.V.	A.B.	R.A.	COUNCILMAN	AYE	NAY	N.V.	A.B.	R.A.	COUNCILMAN	AYE	NAY	N.V.	A.B.	R.A.
NEVIUS		X				FOSTER	X					PARKER	$\mathbf{X}$				
TUCKER	X					MEYERS	IX					ROBINSON	X				
FORD	X					MOORE	X					SELDEN				X	
X—Indicates Vote A. B.—Absent N. V. Not Voting R. A.—Readopted																	

FORD IN I I WOOKE IN I BEEDEN	
X—Indicates Vote A. B.—Absent N. V. Not Voting R. A.—Readopt	ed
Submitted on first reading at a meeting of the District of Columbia City Council on	ly 18, 1974
Adopted on second and final reading July 26, 1974	
Presented to the Mayor primissioner July 26, 1974	S. Wohl h
Secretary of the	e City Council
Approved Meldi Att	1 AUG 1974
Mayor-Commissioner	Date
Enacted W/O signature of the Mayor according to ten day limitation rule:	
;	Date
Disapproved and returned to the City Council	
Mayor-Commissioner	Date
Readopted Date	ſ
Date	, , 1
hereby certify that this regulation is true and adopted (or readopted) as stated therein.	
I licitaly certary that this regulation as the despete (or research as the desired)	( aleli / _
AN COTA	+
P-251 Secretary of the	ne City Council \

Certified copies are available.

#### \_\_2.of\_13

and stabilize rents in the District of Columbia.

1 2

NOW, THEREFORE, BE IT ENACTED by the District of Columbia Council that:

Section 1. The regulations set forth are hereby adopted, and shall be so compiled and published as is deemed appropriate for their orderly arrangement within the D. C. Rules and Regulations.

.16

Section 2. Legislative Findings and Intent - The District of Columbia Council hereby finds that there is a serious shortage of rental units in the District of Columbia; that this shortage is particularly critical for households of low and moderate income; that escalating rent increases have been prevalent throughout the District of Columbia since the termination of Federal Rent Controls, on January 11, 1973; that, while most landlords have acted responsibly, there has been a significant minority of excessive increases in rents and/or decreases in services; that rent increases have been significantly higher and more prevalent on moderate priced rental units than on high priced rental units; that the protection of the health and welfare of the residents of the District of Columbia requires enactment of rent controls which protect the rights of tenants and assure landlords a fair rate of return.

It is the intent of this regulation to protect tenants from excessive rent increases, unjustified reduction of services, harassment and unreasonable eviction; to protect the right of landlords to a reasonable return on their investments; to encourage stability of ownership and tenancy and improve landlord/tenant relations; and to foster the maintenance of the existing housing stock through compliance by both landlords and tenants with the District of Columbia Housing Code and through provision of incentives to upkeep and reasonable renovation.

## Section 3. Definitions - As used in this regulation -

(a) The term "Act" means the District of Columbia Rent Control Act of 1973 (87 Stat. 623; P. L. 93-157).

(b) The term "base rent" means the rent charged (converted to a monthly basis) for a housing accommodation on February 1, 1973. If such an accommodation was not rented on that date, base rent shall mean the amount of rent last charged or allowed on the accommodation between January 1, 1972 and February 1, 1973. In the event that the accommodation was not rented during that period, or the landlord can establish to the satisfaction of the Commission that the rent charged on or before February 1, 1973 cannot be determined, the base rent will be the amount of rent appropriate for that accommodation on February 1, 1973, as determined by the Commission.

(c) The term "capital improvement" means a permanent improvement or renovation other than ordinary repair, replacement or maintenance, the use of which will continue beyond a twelve month period beginning with the completion of the improvement.

(d) The term "Commission" means the District of Columbia Housing Rent Commission.

(e) The term "Commissioner" means the Commissioner of the District of Columbia, or his designated agent.

(f) The term "Council" means the District of Columbia Council established under Reorganization Plan Number 3 of 1967.

(g) The term "housing accommodation" means any building, structure,

4.

#### \_\_3.of\_<u>13</u>

residence, or any part thereof, and land appurtenant thereto, which is rented, leased or offered for rent or lease for dwelling purposes, including a single family residence or a room, apartment, efficiency, or group of rooms in a building, structure of residence. The term shall not include (1) any hotel, motel, or other structure used primarily for transient occupancy in which more than 60 percent of the units devoted to living quarters for tenants and guests are normally used for transient occupancy; or (2) any room or space normally rented, leased or offered for rent or lease for transient occupancy. The term "unit" of a housing accommodation shall mean any room, apartment, efficiency, or group of rooms rented or leased or offered for rent or lease within such an accommodation.

- (h) The term "housing regulations" means the Housing Regulations of the District of Columbia (1971 ed.).
- (i) The term "initial leasing period" shall mean that period of time during which the first tenant of a new housing accommodation or one substantially rehabilitated, occupies or rents such accommodation.
- (j) The term "landlord" means an owner, lessor, sublessor, assignee, agent, or other person receiving or entitled to receive the rents or benefits for the use or occupancy of a housing accommodation as herein defined.
- (k) The term "optional facilities" means any facilities or equipment made available by a landlord to a tenant at the option of the tenant and in exchange for payment of a rental fee over and above the rental fee for occupancy of the accommodation.
- (1) The term "person" means an individual, corporation, partnership association, joint venture, or any organized group of individuals or the legal successor or assigns of representatives of the foregoing.
- (m) The term "related facilities" means any facilities or equipment made available by a landlord to a tenant, the use of which is included upon payment of the rental fee for the housing accommodation.
- (n) The term "related services" means services provided by a landlord or required by law or by the terms of a rental agreement to be provided by a landlord to a tenant in connection with the use and occupancy of any housing accommodation, including but not limited to: repairs; decorating and maintenance; furnishings and furniture; provision of light, heat, hot water, cold water, telephone answering and elevator services; kitchen, bath, and laundry facilities and privileges; use of halls, corridors, stairs, common rooms, yard, and other common areas; janitor service; and removal of trash and refuse.
- (o) The term "rent" means the entire amount of money, money's worth, bonus, benefit, or gratuity demanded, received, or charged by the lessor landlord to a lessee tenant as a condition of occupancy and use of a housing accommodation, its related services, and its related facilities including, but not limited to, charges for parking and utilities and the use of recreational facilities if provided.
- (p) The term "rent ceiling" means the maximum allowable amount of rent to which the base rent for any housing accommodation within the scope of this regulation may be elevated, in keeping with the provisions of this regulation.
- (q) The term "substantial rehabilitation" means any improvement to or renovation of a housing accommodation for which the capital expenditure totals fifty percent or more of the estimated market price of the accommodation prior to rehabilitation, provided a building permit has been issued for such rehabilitation on or after February 1, 1973. For the purposes of this subsection, "estimated market price" shall mean one of the following, whichever us higher: (1) total "....

.16 

10 -

. 16

4.9

۲.

#### \_4\_\_of\_\_13

purchase price paid by the landlord for the accommodation; or (2) the estimated market value for property assessment purposes as determined by the Commissioner. Where the improvement or renovation is made to only a portion of the housing accommodation, the capital expenditure thereon should be pro rated at the percentage of the estimated market price of the whole unit which the portion bears to the whole.

- (r) The term "tenant" means a tenant, subtenant, lessee, sublessee, or other person entitled to the possession, occupancy, or the benefits thereof of any housing accommodation as herein defined.
- Section 4. Rent Control Coverage The system of rent control provided in this regulation shall be applicable to all housing accommodations in the District of Columbia with the following exceptions:
- (a) Any establishments which have as their primary purpose the providing of diagnosis, cure, and treatment of illness of residents, including but not limited to hospitals, convalescent homes and nursing homes, and personal care homes.
- (b) Any publicly owned housing accommodations which are managed by the National Capital Housing Authority or any successor thereto; and any housing accommodation which is Federally owned or for which the mortgage or rents are Federally subsidized.
- (c) Any new housing accommodation created by new construction and offered for rent or lease on or after February 2, 1973, during the initial leasing period of such accommodation, or during the first year of tenancy, whichever is shorter. For the purposes of this subsection, a new housing accommodation is an accommodation for which the initial Certificate of Occupancy was issued on or after February 1, 1973.
- (d) Any dormitory operated by an institution of higher learning or private school, in which rooms are provided for its students.
- (e) Any rooming house or boarding house as defined in Section 1102 of the housing regulations of the District of Columbia.
- (f) A room rented by the occupant of a housing accommodation, whether such occupant is the owner of the accommodation or a tenant who leases or rents the accommodation.

#### Section 5. Stabilization of Rents

- (a) Subject to such adjustments as are authorized in this Section and in Section 6 of this regulation, no landlord shall charge a rent for a housing accommodation in excess of the base rent as defined in Section 3(b) or, when applicable, the rent ceiling provided in subsection (f) herein.
- (b) Upon the effective date of this regulation, and subject to the provisions of paragraph (i) herein, a landlord who is renting or leasing any housing accommodation within the scope of this regulation shall be entitled to charge an amount of rent for such accommodation which shall not exceed the rent ceiling computed according to the following formula:
- (1) Step 1: Adding to the base rent an amount equal to four percent (4%) of base rent to allow for increased costs incurred by the landlord during calendar year 1973 after February 1, 1973; and
- (2) Step 2: Adding to the figure computed in Step 1 an amount equal to eight percent (8%) of this figure to allow for increased costs incurred by the ....

#### \_5\_of\_\_13

landlord during calendar year 1974.

- (c) When a landlord has initiated or completed capital improvements on an accommodation between February 1, 1973 and the effective date of this regulation, the rent ceiling for such accommodation shall be computed to make allowance for such capital improvements provided that (l) the cost of such capital improvement equals at least 25% of the estimated market value for the accommodation (or the appropriate percentage of the estimated market value when the improvement applies only to a unit of such accommodation); (2) the landlord has obtained, and made available to the tenant and the Commission the appropriate contract plans, specifications, and building permits; (3) the cost of the improvement is amortized according to the formula provided in Section 6(b)(5) of this regulation and the rent increase, notwithstanding such formula, is no more than 4% of the allowable rent ceiling for such accommodation.
- (d) When, upon effective date of this regulation, the rent being charged for any housing accommodation exceeds the allowable rent ceiling as computed according to the formula provided in (b) herein, the rent for such accommodation shall be reduced to the allowable rent ceiling, effective on the next date when rent is normally due. It shall be the responsibility of the landlord to notify the tenant in writing of the required decrease at least one week prior to effective date of such decrease.
- (e) Whenever the Commission finds that past or forthcoming decreases or increases in taxes, operating costs or maintenance costs may justify a change in the rent ceiling provided in this Section or additional provisions to allow for increased costs incurred by landlords, it shall present its findings and appropriate recommendations to the Council.
- (f) The rent ceiling for a substantially rehabilitated housing unit as defined in Section 3(q) of this regulation, shall be computed by increasing by 125% the allowable rent ceiling for 1974 as provided in paragraph (b) of this Section.
- (g) The rent ceiling for a newly constructed housing accommodation which becomes subject to this regulation after initial exemption as provided in Section 4(c) shall be the initial rent charged during the initial leasing period.
- (h) Where the Commission determines that the related services and/or facilities supplied by a landlord are substantially reduced as compared to services and/or facilities previously provided, the rent ceiling shall be lowered accordingly by the Commission on its own initiative or upon petition by the tenant, in accordance with the provisions of Section 7.
- (i) The Commission may (1) refuse to allow any upward adjustment of the base rent of any housing accommodation or (2) decrease the rent ceiling on such accommodation, pursuant to the procedures provided in Sections 6 and / of this regulation, if it determines that the accommodation does not substantially comply with the housing regulations and such lack of compliance is not caused by the tenant's neglect or misconduct.
- (j) When, after effective date of this regulation, a housing accommodation becomes vacant, the rent ceiling for such accommodation shall be increased to the highest rent ceiling applicable to any substantially identical accommodation within the same rental facility, provided the tenant has vacated voluntarily or as a result of notice to quit or eviction for one of the following causes: (l) nonpayment of rent; (2) violation of an obligation to his tenancy, as provided in Section 10(b)(l) of this regulation; or (3) use of the accommodation for illegal purposes, as provided in Section 10(b)(2) of this regulation. For the purpose of this subsection, accommodations shall be defined as "substantially identical" when they contain essentially the same square footage, the same floor plan, comparable amenities and equipment, comparable

#### 6 of 13

locations with respect to exposure and height (if exposure and height have previously been factors in amount of rent charged), and are in substantially comparable physical condition.

(k) The rent ceiling for any housing accommodation which (l) was purchased by the present landlord from the Federal Government on or after February 1, 1973 and (2) for which the mortgage and/or rents were Federally subsidized immediately prior to purchase shall be the rent charged on effective date of this regulation, plus 4% of the rent ceiling on that date.

(1) No rent increase authorized under these regulations shall be put into effect unless the tenant has been given written notice thirty days prior thereto. Any notice of increase of rent shall be signed by the landlord and shall contain:

(1) The amount of rent for the rent payment interval immediately preceding the proposed increase and that for the rent payment interval in which the increase becomes effective.

(2) The percentage increase and the dollar amount of the proposed increase.

(3) The effective date of the proposed increase.

• (4) A statement that the unit is in substantial compliance with the housing regulations.

(5) The base rent and explanation of the manner by which the increase has been computed, when such increase is pursuant to Section 5 of this regulation.

(6) The exact method of computation of the increase, including itemization of the cost factors to which the increase is attributable, when such increase is pursuant to Sections 6 and 7 of this regulation.

(7) A statement of certification by the landlord that the increase is in compliance with all the provisions of the District of Columbia Rent Control regulation.

(8) Statement of penalties as described in Section 14(c) of this regulation.

#### Section 6. Adjustment in Rent Ceiling Because of Hardship

(a) In addition to those procedures for adjustments allowed under Section 5, the Commission may make such individual adjustments, either upward or downward, of the maximum rent ceilings as may be necessary to correct hardships of other inequities, and in so doing, shall observe the principle of maintaining maximum rents for housing accommodations at levels which will yield to the landlords a reasonable return from such housing accommodations.

(b) In determining whether to make an individual adjustment in the rent ceiling because of hardship, the Commission shall consider the following among other relevant factors:

(1) Increases or decreases in property taxes, provided the .

Commission determines that such increases or decreases reflect (i) a general tax increase or decrease; (ii) that portion of an upward assessment due to capital improvement approved by the Commission, as provided in paragraph 5; and/or (iii) a correction of a prior overevaluation or underevaluation, due to error, by the Department of Finance and Revenue.

\_\_7\_of\_13\_

(2) Unavoidable increases or any decreases in operating costs and maintenance expenses.

(3) Increases or decreases in living space or related services, provided that the Commission has approved any increases in space or services as being reasonable and in the interest of the affected tenants.

(4) Substantial deterioration of the housing accommodation, other than ordinary wear and tear, or failure to perform ordinary repairs, replacement or maintenance.

(5) Capital improvement of the housing accommodation as defined in Section 3(c) of this regulation provided that (i) the necessary permits for such improvements have been issued by the Commissioner and (ii) the Commission has determined that said improvements are reasonable and that the interests of the tenant have been protected. The cost of a capital improvement shall be amortized over the projected useful life of the improvement, as determined by the Commission. Based on such amortization, the cost of such capital improvement may be used to justify an upward adjustment in the rent ceiling, provided the monthly rent increase attributable to such improvement is not more than 1 1/2% of the share of the amortized cost attributable to any benefitted unit.

# Section 7. Procedure for Adjustment of Rent Ceiling or Advance Ruling

(a) The Commission shall consider an upward or downward adjustment of the rent ceiling for any individual housing accommodation upon receipt of a petition for adjustment filed under oath by the landlord or tenant of such housing accommodation or upon action on its own initiative. Such petition shall be made on a form approved by the Commission. The Commission may consolidate petitions and actions relating to housing accommodations in the same building, and all such petitions and actions may be considered in a single hearing. Any finding by the Commission on a petition shall be based on the record pertaining to such petition. The Commission shall act by approving or denying each petition filed with it no later than 60 days after the filing of the petition unless extended by written consent of the parties.

(b) Upon receipt of such petition, the Commission shall notify the landlord or tenant, whichever is appropriate, by U. S. Certified Mail, or any other form of service which assures delivery, of the receipt of such petition and of the right of either party to request a hearing in writing within fifteen days of the receipt of such notice. A copy of the appropriate petition shall accompany such notification. If a hearing is timely requested by either party, or if the action is undertaken on the initiative of the Commission, notice of the time and place of the hearing shall be furnished the parties by U. S. Certified Mail at least fifteen days prior to the commencement of such hearing. Such notice shall inform the landlord or tenant, whichever is appropriate, of his right to retain legal counsel to represent him at the hearing. All hearings shall be conducted pursuant to Title 5DD of the District of Columbia Rules and Regulations and shall be consistent with the provision of the D. C. Administrative Procedure Act (D. C. Code, Sec. 1-1501 et. seq.).

(c) When a petition for adjustment is filed with the Commission r upon action initiated by the Commission, the landlord of the particular accommodation shall furnish the Commission, within fifteen (15) days after the Commission's written demand therefor, an information statement approved by the Commission, and containing such information as it may request. Such information requirements shall include but not be limited to an itemization of the actual income and operating expenses for a two-year period, ending no more than four months prior to the date of the petition for adjustment.

(d) Pursuant to receipt of a petition for adjustment or to initiation of action

#### 8 of 13

by the Commission under this Section, the Commission shall notify the landlord and/or tenant, whichever is appropriate, of his right to inspect and copy all documents, records, reports and other written materials or evidence that will be used by the opposing party in support of his petition or by the Commission in support of its proposed action.

5 6 7

8.

9

10

11

12

13

14

15

16

17

18

19

20

21

1

2

3

4

(e) When a landlord plans a capital improvement or an increase in space or related services in a housing accommodation he may, upon submission of appropriate contract plans and specifications, building permits, or in the case of increased related services, other proof of his intentions, file a petition for an advance ruling for future adjustment of the rent ceiling for such accommodation. Such petition shall be filed under oath upon a form approved by the Commission and may reflect the projected cost of the planned improvements or added related services at the time of their completion and/or implementation. The considerations and procedures governing such advance rulings shall be consistent with Section 6(b)(3) and (5) and Section 7(a), (b), (d), and (f). Any adjustment in rent ceiling conditionally approved by such advance ruling shall become effective upon submission of proof, to the satisfaction of the Commission, of fulfillment of the projected plans for improvements or added related services, as described in the petition and of the total costs thereof. Preliminary approval of a petition for advance ruling shall be subject to such subsequent review and final approval as the Commission determines as necessary and appropriate.

22 23 24

25

26

27 28

(f) Notwithstanding any other provision of this Section, the Commission may, without holding a hearing, refuse to adjust the rent ceiling for any individual accommodations under this Section and may dismiss any petition for adjustment if a hearing has been held under this Section for such housing accommodation within six months prior to the filing of the said petition.

29 30 31

32

#### Section 8. Housing Rent Commission

34 35 36

37

38

39

40

41

(a) Establishment and Functions. There is hereby established for the District 33 \_\_\_ of Columbia a temporary Commission to stabilize and regulate rents and to carry out and enforce the provisions of the Act, these regulations and any rules or orders promulgated and adopted by the Commission pursuant to the Act and those regulations. Members of the Commission shall be appointed within thirty days after the effective date of this regulation. The establishment, duties, powers, appointments of members, membership, compensation, and termination of the Commission shall be in accordance with the Act. Five members of the Commission shall constitute a quorum for the transaction of the business of the Commission: Provided, that at least two of the five members present shall be representatives of the interests of the tenants and two shall be representatives of the interests of landlords.

42 43 44

45

(b) Election of Vice Chairman. Within 30 days after appointment and approval of each of the nine members of the Commission, a Vice-Chairman shall be elected by the Commission from among its members.

46 47 48

49

50

51

52

(c) Selection and Appointment of Commission Employees. The Commission shall appoint an Executive Director, legal counsel, and such other staff as it may deem necessary. The Commission may also appoint mediators, who shall be authorized to conciliate disputes between landlord and tenants which may arise under the provisions of the Act, these regulations, or any rules or orders promulgated and adopted by the Commission pursuant to the Act and these regulations.

53 54 55

56

57

(d) Adoption of Rules of Procedure. The Commission is hereby authorized to adopt additional rules of procedure as it may deem necessary. In so doing, the Commission shall comply with the rule making procedures contained in the District of Columbia Administrative Procedures Act 1-1501 et. seq. D. C. Code. (1973 ed.).

#### 9 of 13

(e) Complaints. The Commission shall be authorized to receive and review complaints by tenants and landlords in the District of Columbia with respect to any violation of these regulations or of any rule or order of the Commission with respect to the enforcement and the administration of such rules.

### Section 9. Lease and Registration Requirements

- (a) Every new tenant of a housing accommodation not excluded from coverage of this regulation by Section 4 shall be given by the landlord a written lease for the initial period of tenancy.
- (b) On or before the 60th day following the appointment and confirmation of a quorum of the Commission members, every landlord of a housing accommodation not excluded from coverage of this regulation by Section 4 shall file with the Commission, on forms approved by the Commission, a registration statement for each such accommodation or group of accommodations in one building.
- (c) The registration form shall contain such information as the Commission may require, including but not limited to:
- (1) A description of the property, including address, number of apartments, number of stories, approximate age, type of construction, and date and number of license issued by the District of Columbia Government.
- (2) A description of the utilities and air conditioning provided by the landlord and type of heating fuel used.
- (3) Rental information on each unit for base rent date: total occupancy fee charged, amount of security deposit, related services included, related facilities and charges therefor on February 1, 1973, or the appropriate base rent date as provided in Section 3(b) of this regulation.
  - (4) Current rent information on each unit: (Same as above).
- (5)(i) When an accommodation has been substantially rehabilitated, as provided in Section 3(q), the estimated market price of such unit prior to rehabilitation, a description of the rehabilitation, and the itemized costs of such rehabilitation; (ii) when an accommodation is planned to be substantially rehabilitated or in the process of being substantially rehabilitated on the effective date of this regulation, the estimated market price of such unit prior to rehabilitation, the method of computing the estimated market price, a description of the proposed rehabilitation, and the itemized estimated costs of such rehabilitation.
- (6) When the rent for an accommodation has been increased to allow for capital improvements as provided in Section 5(c), the estimated market value of such accommodation prior to capital improvement, a list of all such improvements allowed for pursuant to Section 5(c), and the itemized costs of such improvements.
- (7) Itemization of any outstanding violations of the housing regulations.
- (8) Name and address of owner and, when applicable, resident agent.
- (d) In the event that any information provided on the registration form becomes invalid or obsolete, it shall be the responsibility of the landlord to correct such information within thirty days.
  - (e) No petition for the upward adjustment of rent ceilings shall be granted

#### \_10\_of\_13\_

by the Commission for any accommodation not registered in accordance with the provisions of this Section; nor shall the landlord of any accommodation not so registered be eligible for any rent increase adjustment provided in Section 5 and applicable to that accommodation on or after the 60th day following confirmation of the Commission members.

(f) Each registration form shall be filed and available for public inspection in the Commission Office. Each landlord shall keep a duplicate of each such form and make it available upon request to the appropriate tenant or prospective tenant.

#### Section 10. Eviction

- (a) No tenant shall be evicted from his housing accommodation for any reason other than nonpayment of rent, unless he has been served with a notice to vacate specifying therein the reason for his eviction, and a copy of such notice has been served upon the Commission.
- (b) No tenant shall be evicted from his housing accommodation, notwithstanding the expiration of his lease, so long as the tenant continues to pay rent to which the landlord is entitled, unless:
- (1) The tenant is violating an obligation of his tenancy, and fails, within thirty days after receiving notice thereof from the landlord, to correct such violation.
- (2) An illegal act has been performed in the accommodation as determined by a court of competent jurisdiction.
- (3) The landlord seeks in good faith to recover possession of the housing accommodation for his immediate and personal use and occupancy. It shall be unlawful for the owner of such premises or his agent to demand or receive rent for the premises for at least six months after recovering; or
- (4) The landlord has in good faith contracted in writing to sell the accommodation for immediate and personal use and occupancy as a dwelling by the purchaser for at least six months after recovery, during which period it shall be unlawful for the purchaser of such premises or his agent to demand or receive any rent therefor. The landlord, at the time he offers the accommodation for sale, shall so notify the tenant in writing.
- (5) The landlord seeks in good faith to recover possession for the immediate purpose of making alterations or renovations which cannot safely or reasonably be accomplished while the accommodation is occupied or for the immediate purpose of demolishing the accommodation and replacing it with new construction, provided that the plans for the alteration or new construction have been filed with and approved by the Commissioner of the District of Columbia or his appropriate agent. When the landlord seeks to recover repossession under this subsection for the purpose of initiating substantial rehabilitation of the accommodation, he shall be subject to the provisions of Section 12(b) of this regulation. If, however, the landlord seeks to recover possession in order to make repairs which are necessary to bring the premises into compliance with District of Columbia Housing Regulations, the tenant shall have an absolute right to repossession immediately upon completion of the repairs, at the same rent and under the same obligations; or
- (6) The landlord seeks in good faith to recover possession for the immediate purpose of discontinuing the housing use and occupancy for a continuous period of not less than six months, during which period, commencing on the date possession is recovered under this subsection, it shall be unlawful for the landlord of such housing accommodation or his agent to demand or receive rent for the same.

8.

#### \_\_\_\_\_\_13

Where the landlord seeks to recover repossession under this subsection for the purpose of initiating substantial rehabilitation of the accommodation, he shall be subject to the provisions and requirements of Section 12(b) of this regulation.

#### Section 11. Retaliatory Action

- exercises any right conferred upon him by the Act or by this regulation, or by any rule or order issued pursuant thereto. For purposes of this Section, retaliatory action shall include, but not be limited to, any action or proceeding to recover possession of a housing accommodation or action which would increase rent, decrease services, increase the obligations of a tenant or constitute an undue or unusual inconvenience, violation of privacy, harassment, or reduction in the quality or quantity of services or be any form of threat of coercion.
- (b) In determining whether an action taken by a landlord against a tenant is a retaliatory action as defined in (a) above, the Commission shall take into consideration whether, within the last six months preceding such landlord's action:
- (1) The tenant has made an oral or written request to the landlord or his agent to effect repairs which are necessary to bring the housing accommodation into compliance with the housing regulations; or
- (2) The tenant has, either orally or in writing, contacted appropriate officials of the District of Columbia about existing violations of the housing regulations in the accommodation which he occupies or reported suspected violations which, if confirmed, render the accommodation in substantial noncompliance with the housing regulations.
- (3) The tenant has, after having given reasonable notice to the landlord or his agent, either orally or in writing, of violations of the housing regulations, withheld his rent, all or in part.
- (4) The tenant has organized, been a member of, or been involved in any lawful activities of a tenant organization; or
- (5) The tenant has made efforts to secure or enforce any rights under his lease or contract with the landlord.
- (6) The tenant has brought legal action against the landlord based on this regulation.
- (c) Notwithstanding the provisions of (b) above, the landlord may maintain his action if he can show that his predominant reason in seeking eviction is one or more of the just causes for eviction provided in Section 10.

# Section 12. Conversion of Housing Through Condominium Conversion, Cooperative Ownership, or Substantial Rehabilitation

(a) Every tenant of a housing accommodation which the landlord seeks to convert from a rental basis to a condominium or cooperative, shall be notified in writing 180 days prior to the conversion thereof. The landlord of such a housing accommodation shall make to each tenant a bona fide offer of sale of the unit which said tenant occupies, and the tenant shall be afforded 60 days within which to accept. No tenant shall be served with a 30-day notice to vacate until 150 days after he first received notice of the landlord's intention to convert, nor shall the notice to vacate be served prior to the expiration of the aforesaid 60-day period or receipt of the tenant's written rejection of the bona fide offer of sale of the unit which he occupies, whichever occurs first.

8.

•51 

#### 12 of 13

(b) The tenant of every housing accommodation which the landlord seeks to substantially rehabilitate shall be notified in writing 120 days prior to commencement of rehabilitation. No tenant shall be served with a 30-day notice to vacate until 90 days after he first received notice of the landlord's intention to rehabilitate. The 120-day written notice shall include the information required under Section 9(c)(5), and information indicating tenant may obtain a copy of the registration form at the office of the Commission, and its address.

#### Section 13. Prohibited Acts

- (a) It shall be unlawful, regardless of any agreement, lease or other obligation heretofore or hereafter entered into, for any landlord to demand or receive any rent in excess of the rent ceiling established for any housing accommodation, or to do or omit any act in violation of any provisions of the Act, this regulation, or any rules or orders promulgated and adopted pursuant to the Act and these regulations.
- (b) It shall be unlawful for any person required by these regulations, or any rules or orders promulgated and adopted pursuant to the Act and these regulations, to make a written registration statement or other statement and willfully include therein any false, misleading, or untrue information.
- (c) It shall be unlawful for any landlord of a housing accommodation within the scope of this regulation knowingly to reduce or eliminate related services previously provided in relation to the rent or lease of such accommodation without a proportionate decrease in rent.
- (d) It shall be unlawful for any landlord of a housing accommodation within the scope of this regulation to increase charges for related facilities as defined in Section 3 unless such increase in charges maintains the rent level for such accommodation within the allowable rent ceiling, as provided in Section 5.
- (e) It shall be unlawful for any landlord to charge a tenant, who on effective date of this regulation, occupies a housing accommodation subject to this regulation, any security deposit not previously required by the landlord for occupancy of said housing accommodation.
- (f) It shall be unlawful for a tenant to withhold his rent in whole or in part unless such rent withheld from the landlord is deposited in an escrow account established for that purpose.
- (g) It shall be unlawful for any landlord to increase the rent for any accommodation above the base rent as defined in Section 3(b) of this regulation if (l) the landlord of such accommodation is not properly licensed pursuant to Section 3102 of the Housing Regulations of the District of Columbia and (2) the manager of such accommodation, when other than the landlord, is not properly registered pursuant to Section 3106 of the Housing Regulations of the District of Columbia.

# Section 14. Miscellaneous Provisions

- (a)  $\underline{\text{Effective date}}$ : These regulations become effective immediately upon enactment.
- (b) Severability. If any provision of this regulation, or any Section, sentence, clause, phrase, or word or the application thereof, in any circumstances if held invalid, the validity of the remainder of this regulation, and of the application of any such provision, section, sentence, clause, phrase, or word in any other circumstances shall not be affected. Thereby and to this end, the

## REGULATION 74-20

### \_13\_of\_13\_

- (c) <u>Penalties</u>. Any person who willfully violates any provision of this Act or any rules or order of the Commission shall be fined no more than \$5,000 for each such violation.
- (d) Nothing herein shall prohibit any landlord or tenant from bring ig a civil course of action in a court of competent jurisdiction to enforce any right conferred upon said landlord or tenant pursuant to this regulation.
- (e) <u>Termination</u>. The provisions of this regulation shall terminate as provided by the Act.

DISTRICT OF COLUMBIA
HOUSING RENT COMMISSION

October 3, 1974

Honorable Sterling Tucker Chairman Housing and Urban Development Committee City Council, District of Columbia District Building, Room 500 Washington, D. C. 20004

Dear Mr. Tucker:

In light of certain unforeseen and inexplicable <u>delays in</u> obtaining administrative and budgetary support for the legislatively mandated activities of the Housing Rent Commission from the Government of the District of Columbia, the Commission is now faced with a crisis which threatens the effective implementation of the Rent Control regulation which became effective on August 1, 1974.

Section 9 of this regulation requires that landlords submit property registration statements on forms approved by the Commission within sixty days of the appointment and confirmation of a quorum of the Commission members. This sixty-day period expires on October 21, 1974, after which period landlords who have not filed will be in violation of Section 9 and will be subject to a penalty of up to \$5,000 under Section 14(c) of the regulation.

Because of the unforeseen and inexplicable delays to which I alluded above, the Commission has been unable to prepare the necessary landlord registration forms, despite the fact that we have worked days, nights, and even on weekends to produce such forms. The perfection of that form was especially tedious because we had no typing help, we had delays in having items reproduced, and formal minutes couldn't be kept because we were forced to operate without a secretary or even a tape recorder throughout. And when we did struggle through with the form, we got after-the-fact technical advice on its layout and style which required its major re-design and further delay in spite of the fact that we had originally requested such assistance from the beginning. Then, when we received the first batch of ten thousand or more late and

19/3/74

Honorable Sterling Tucker October 3, 1974 Page 2

without a prior proof as had been stipulated, we found spelling errors, inconsistencies with our formally voted instructions and obvious oversights affecting the convenience with which landlords could fill it out. Even as of this letter, not even as many as twenty thousand corrected forms are available to the public for the two hundred thousand rental units that must be registered in less than thirty days.

It is rather obvious to me that because of the delay in preparing the landlord registration form and having it available for filing by landlords, few, if any landlords can reasonably be expected to have them submitted to the Commission by the October 21st deadline. We are thus confronted with the dilemma of finding virtually every landlord in the city in violation of Section 9 of the regulation through no fault of his own, or having the Commission itself in violation of the regulation for failing to enforce Section 9.

Therefore, on behalf of the Commission, I must request that the provision in Section 9(b) of the regulation requiring that landlords submit registration statements to the Commission within sixty days of the appointment and confirmation of a quorum of the Commission members be amended by the Council so as to extend the deadline for filing another thirty days. This is a matter of utmost importance which affects the very credibility and viability of the Commission.

Sincerely yours,

Timothy L. Jenkins, Chairman

Housing Rent Commission

b t

bı

I

to

JACK POLLIN 3851 Calvert St., N. W. Washington, D. C. 20007

CERTIFIED MAIL
RETURN RECEIPT REQUIRED

October 15, 1974

Housing Rent Commission Government of the District of Columbia Munsey Building, Suite 600 1329 E Street, N. W. Washington, D. C. 20004

Attention: Mr. William Bodwitch

Gentlemen:

When the Rent Control Regulation for the District of Columbia became law on August 1, 1974, we adjusted our rents according to the law and waited patiently for the Housing Rent Commission to be formed.

Now, over two months have passed and the mechanics for "Adjustment in Rent Ceiling Because of Hardship" (Sections 6 and 7) have not been put together.

Section 7 of the law provides for an upward or downward adjustment of the rent ceiling upon submittal by the landlord (and favorable review by the Commission) of a petition prepared by the landlord on a form approved by the Commission.

A discussion by my representative (Mr. Albert Pollin) with your Mr. Bodwitch on October 2, 1974 revealed that these forms are not available and may be available by October 21, 1974. Since we are suffering extreme financial hardships daily, we are requesting that you review the attached request for adjustment as soon as possible.

We have noted that there are landlords that have not rolled back their rents as required by the law. If the Commission fails to develop adjustment procedures, landlords have no alternative but to take appropriate measures to avoid financial disaster.

Please feel free to contact any of the following in regard to this request:

Mr. Jack Pollin 3851 Calvert St., N. W. Washington, D. C. 20007 FE. 7-7182

Mr. Albert Pollin 8809 Walnut Hill Road Chevy Chase, Md. 20015 657-8952 293-5752

Mr. Charles Hurwitz 1609 Connecticut Ave., N. W. Washington, D. C. 20009 AD. 4-4724

In the event you insist that we apply on the required forms, we are enclosing a self addressed stamped envelope so that you can forward these forms to us when they are available.

Your prompt action will be appreciated.

Yours very truly,

JACK POLLIN

cc: Mr. Charles Hurwitz w/encl. Miss M. A. Beller, Esq. w/encl.

Mr. Sterling Tucker

Mayor Walter Washington
Office of Consumer Affairs- Mrs. Barbara Crawford Washington Board of Realtors

not bee The Washington Post - Mr. William Rasberry

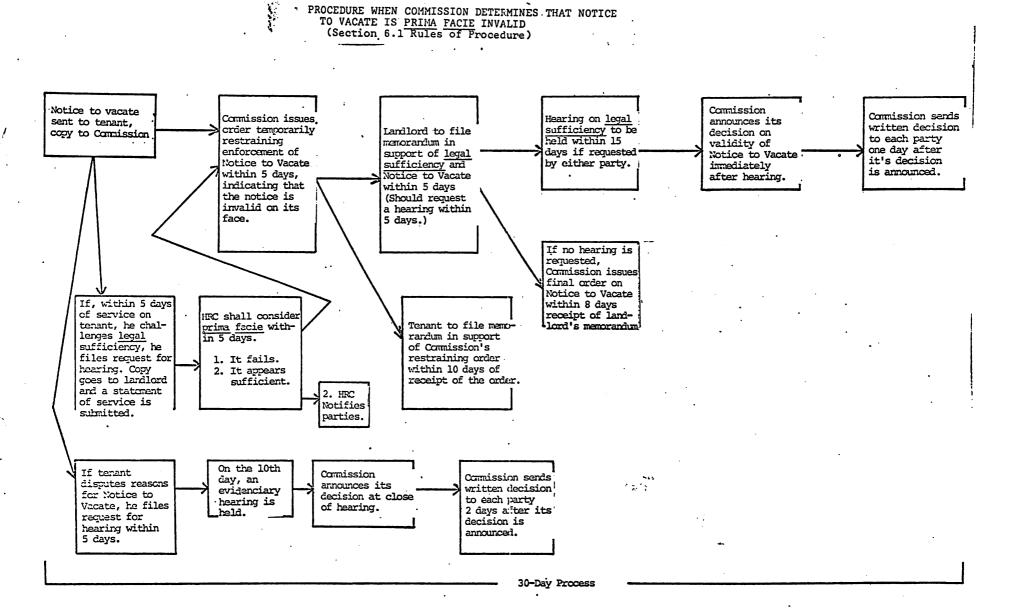
Section Torange de la mercial de la maior by the land sit they feel as

A disclosion of the first term pour your Mr. Books the classic terms of the contract of the co possible,

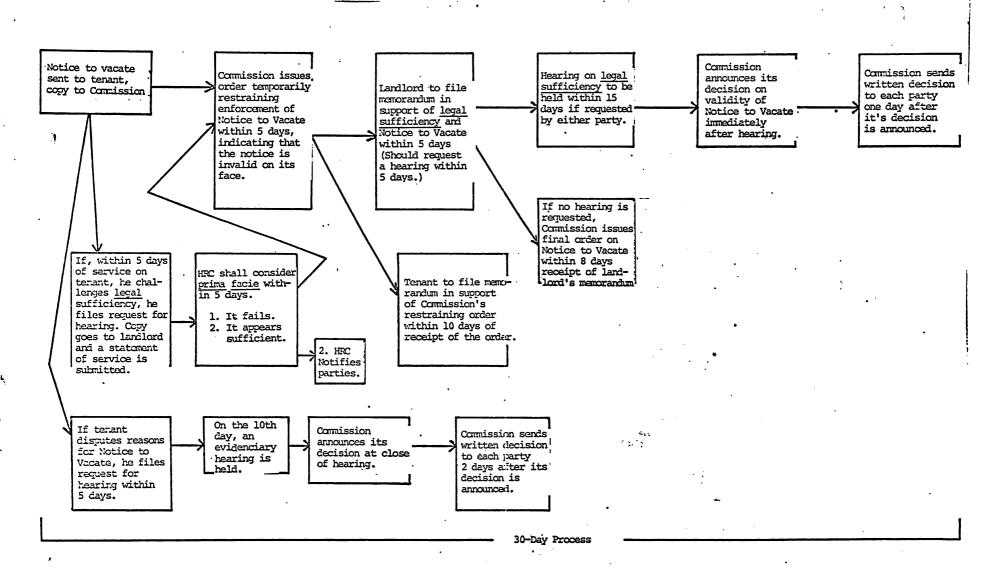
We have the object of the Lacir their reliable to gold or a deli No contrate de la contrate del contrate del contrate de la contrate del contrate del la contrate del la contrate del la contrate de la contrate de la contrate de la contrate de la contrate del la contrate de la contrate de la contrate de la contrate de la contrate del la contrate del

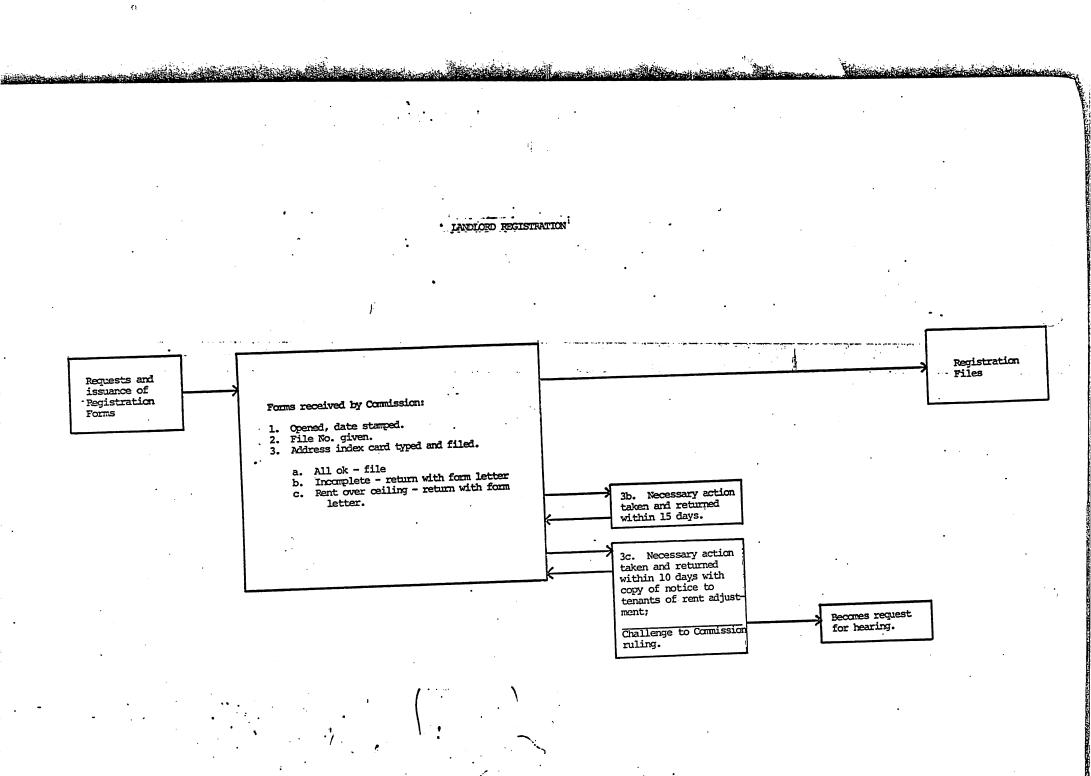
พินิยลระ วัดความสะหาวอยู่ เกตุลายลาย (ช่ว Terminis reduces

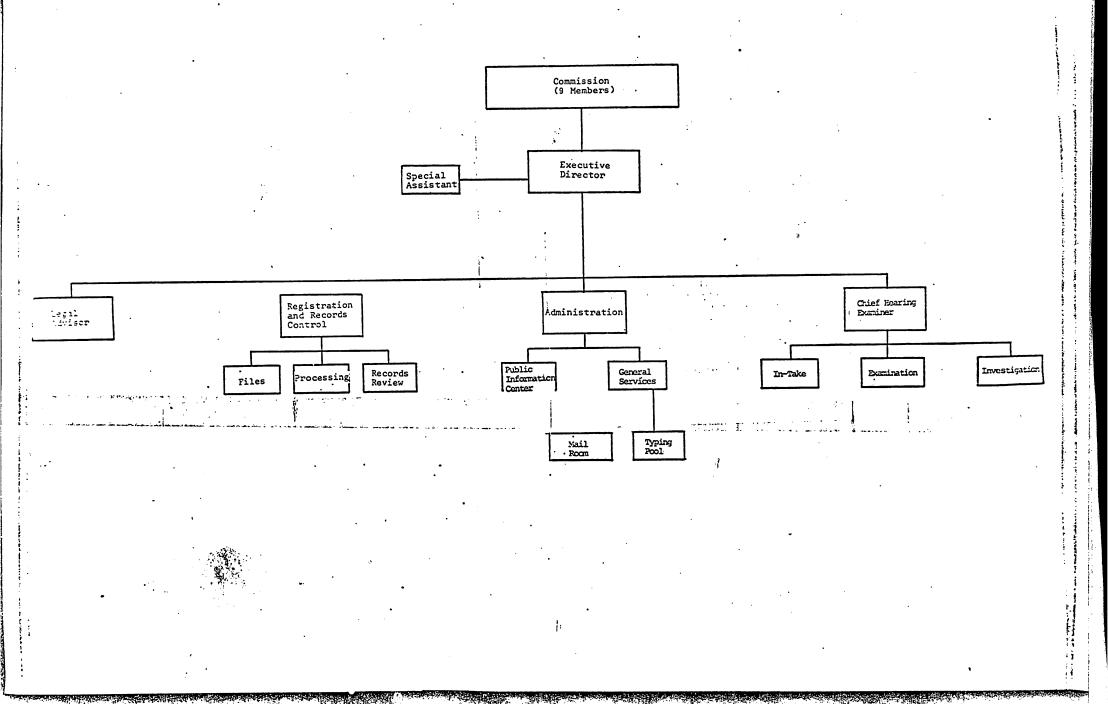
> Ar. Jack Color 12: 3652 Color 12: 24: Wash E. 7-72



# PROCEDURE WHEN COMMISSION DETERMINES THAT NOTICE TO VACATE IS PRIMA FACIE INVALID (Section 6.1 Rules of Procedure)







APPOINTED COUNCIL IDISTRICT OF COLUMBIA 1967-1974 Marie 1974 DCSTAT REG 181 (Apt. \$28 Address) APT. BLDG. 9200 Cathedral Avenue, N.W. Petition For Adjustment To Rent Ceiling Request is hereby made for adjustment in the rent ceiling applicable to the above-captioned housing accommodation by reason of hardship. see attached list per month. The present rent ceiling is \$ COLUMN B (\$ 54,612.) The adjusted rent ceiling prayed for is \$ COLUMN A effective November 1, 1974, or sooner if possible. The name (s) of the tenant (s) of the said housing accommodation is/are Furnished upon request The reason(s) for the adjustment prayed for is/are: Increase in property taxes 1:17 Unavoidable increases in operating costs and maintenance expenses since February, 1973 Increases in living space or related services nchaltiliasios) as defined by the Internal Revenue Code. Inability to earn a reasonable return on investment. Rents substantially below market for comparable accommodations. Losses incurred direct June the three June the transfer of the territory and the ter to inability to pass through increases in operating costs during the Rent Increase Moratorium. [Specity] Petitioner respectfully requests that the Commission promptly notify the aforesaid tenant of the filing of this Petition pursuant to § 7(b) of Regulation No. 74-20. Petitioner respectfully requests that a hearing on this matter be held promptly and that all petitions filed simultaneously herewith for adjustments to the rent ceiling for housing accommodations located in this same building be consolidated for hearing. zsignature RAYMOND J. HOWAR Name

		<b>-</b>
	420	O CATHEDRAL AVE #21
		Proposed lind B
		4/ 3/1/74
pt#	TENANT 2/1/73	NEW TENANT RENT 2/1/73 9/1/14 RENT
06	PUIOHTURA, QUORARIO	330. 267.00 300.00 305-
07	COHEN, JUNE	285 229.00 25721 262-
p8	KAMATH, MADHAU	235 190.00 213- 214-
09	KRICK ROSE	235 185.00 206.1 210
10	MACMULLEN, URBAN	298 229.00 257 265- 41174 335 246 00 27/2 335
///	WINEBURG, ARTHUR.	
2	HARPER JOEL	315: 251.00 23/22 25
12 - A .	CONSTANTINOPLE PAT	
114	DEANE, MIRIAM	375 302.00 359 . 540-
15	BEST, CARCL	290 23400 263 265-
?¢6	REBERTSON, NELSE	
rö7	NOONE ARTHUR	295 23400 263- 265-
१०इ	BURTON, JUNE	235 190.00 213.
909	KAUTZMAN, EUKICE	235 190.00 213 - 216
10	DARGLIESH, ALBERTI	2.0
211	MILLER, LORING	300 239.00 268- 275-
12	MITCLER, ERNESTINE	355 287.00 322 - 320 - ·
12-A	WOLF MARTIN	380 318.20 357 4 343-
14	RES MANAGE _	
15	POTTS FOSEPH	310 244.00 274- 286-
16	SAID, LUCILLE	310 244.00 274-286-
C6	HALL GARTEN, KITHAR	375 297.00 35% 540 -
<u>رَه</u>	LAVERINE, JOHU	300 239.00 218 - 275-
08	WATT, MILDRED	245 195,60 219.12:220-
έ <b>વ</b>	MORAN, MARY	245 174.00 195.42 190-
10	TESCHOE WILLIAM	310 261.00 273 - 280-
и	PERKEY JOHN	330 261.00 293 5 3000
ĺŹ	HINCKLEY ROCERT	300 - 267.60 300- 305-
12-A	SCHOTT, STEVEN	350 297.50 3344 346-
	1	

	•	·			
		A		B	
	, IE	Mariaal .		9/1/24 SEN	
Pri -	1 TENANT 2/1/73TENA	7NTR	ENT-2/1/73	SEN	T 3/1/73
3 14	0/11/1/200		313.00 _	352-	⇒56
315	SACCAROI, MILDRED	305	249.00		256 <u>-</u>
16.	HARRIS, HARRY	31\$	249.60	5.1.85	3次
8,7.	HATT, ROBERT		270.60	3036	305-
402	SOUTHERLAND, DEROTHY	235	190,00_	213	216-
103	CHISM, JCAN	4/1/345		219:	
404 .	WEBBER CATHARINE	250	200.00	225	227-
105	JENNINGS, THOMAS	340	277.00	371	3037
406·	SHELDON, CLIFFORD	3.75_			
υ7	DONAHUE, MARY	300	244.00_	27:1	<u>-7</u> 26-
1	GUIGON, HILDA	270	220.00	247	542-
109	STEVOUICH, VLASTOVIC	2.50	200.00	225	<u> </u>
110	BRECK EVELYN	315	249,00 _	259i7	_ = _ 366
411	MCELWEE, PHUCKNEY	11174339	249.00 _	2790	33011
413	SHUBAILAT, CAITH	7/1175 5445 <b>35</b> 0	302.60_	337,	315-
412-A		4/1/74 _FEL>400	523.00 _	3621	4/6-
414	DECKER CHARLES	399	318.00	3577	556-
415_		320	254.00	2724	232-
H/G	RUPP CHARLES		254.00		
<i>41</i> 7	HOSKINSON, GENEVIEVE	320	254.00	28274	292-
<i>5</i>	0.10.1.00.15.0	72-0	17900	2⊴ !≥<	21:0-
	NANUES, CASPER.	3,40	270.60	BAR!	36-
<i>(= 0 =</i>	FU 1 000 1001	1:1111 TOO	200.60	んむかって	メンコー・・
503	MOFFETT, BERNARD	9/1/73 -116H_260	_ 200.80.	2254	23:5-1
	CASTORO, ELSA		_ 205.0°6.	2305	
~~~	20.00	255	287.00	323:	_ <del>3</del> 70 -
506	GUADRING, GECRGE.	SIN 4300	308.5	346:4	390-
507		4 751773 4 751723710	1287.00.	3222	296-
á	MCOONIB, ARCHIBALD		205.00	230:	232-
509					
	1		J 1.	•	

C

•	$(\mathbf{C}^{*})_{i} = \{(\mathbf{C}^{*})_{i} \in \mathcal{C}_{i} \mid \mathbf{C}^{*}\} $		• • •
	A sp.	B	
	Juant New ment Rent 2/1/13	9/1/24	New 8/1/79-
Jit#	50,000,000	285	392-
510		285	292-
511	2011/10/02,0000		325-
512	Second 7	3461	351-
512-A	ME ACUAL DIESELLA	363.1	367-
514	Prior, mail	290.	29.2-
515	DEGIONO, CEONGE	291	212-
514	CHEN, THERITA	. સ્ત્રિષ્	202-
517 .		2305	232-
518 <sub>.</sub>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	31774	508-
519	STODARD, ELEANOR 340 282.00	303.	308-
601	MILLER, ISIOORE 340 270.60	2:30/	232-
602	JOYCE, MITZI 260 205.00.		227-
603	Ilgu, Leine 260 200.00_	2394 2304	232-
604	ONE, ELEANOR 265 205.00	3674	320-
605	KING MALIRICE 360 282.00	34k	551-
600	BELE, 4 U. VACA368 6305.00		•
607	FINLEY, ELIZABETH 335 249.60	2807	35= 3=
608	SMITH, JOHN 255 205.60	230 <sub></sub>	
609	GREGORY, DCRIS 255 205.00	23.Q	200
610	JULINDUCK APPORT	Z859,	292-
611	SANDWINGE, WILLIAM & CO.		<u> </u>
612	HANLEIN, GUSSIE 360 277.00		320-
1-12-9	HEMB, PAUL 390 308.86	34:44	351-
.614	SWANSON, CA 525 420.00	4772	4757
615	FORD, KATHRYN 265 210.00		235-
616	WILLIAS, MAGARET 335 256.00	-	<u> </u>
617	HOLLERMAN, CLUSTANCE 35 292.00	•	305
. 618	WENLEY ELISE 265 205.00	_ 2:3:25	232-
619	HOBSON, KATHARINE 340 270.00	_ 3-0.3	-30E
701	ROUSE, ECROON 340 270.00	303	<i>308</i> .

	A A	B	•
	Arigan		<b>/.</b> 67.
a . ++		2/1/29/1	Lent
2pt #		113	
252		n. 5.5	227-
703	3/37/74	00 253 00 00 00 00 00 00 00 00 00 00 00 00 00	_
754	PAWSON, MARY Brawill 207.	00 91901	2751
705	KINNEY, C.C. 6/16/74 355 282.8	31714	920- 362-
706	GREENBERG, PAUL TICKE 390 328.0		
707	HAWFIELD, ANNE 375 246.0		•
708	POULOS, ACHILLES 255 205.80		333-
709	SALEM, ALVA 255 205.80	2301	-333-
710	CLANCEY MARTIN _ 3/10/74 350 254.00	2834	37/2-
י אור	LOWMAN, HAROLD Jan 350 254.00	28534	_350-
712	CARTER, ALBERT 4/25/73	351.24	232-
712-A	MARTIN, EARL Swit 390. 318.60	33/72	345-
714:	CADALYN, JANE 525. 411.60	462.	475-
715	POLI, JOSETTE 265 220.00_	247.	245-
716	HODGE, MARGEGRITE 259.00_	2910_	300-
7/7	HALPERT, STEWART MARRY 335. 282,00	3/7:4	_305 <u>-</u>
718	TREMEARNE, THOMAS 265 205.00_	230.	<u> </u>
719	KIRLIN, FLORENCE 340. 270.60	3236	30'5
801	HINES, REDRCE 345 272.00	300	36-
802	CALE, MARY . 260 205.00	2305	23.2'-
r'03	260 300 4	225V	227
804	RON HOVOE, ERIK HE275210.00	2361	3351
505	117,00, LORETTA 355 282.00	31724	3.26-
806	SOBERNHEIM, RUDOLF 390 328.00	3685	3/2-1
.807.	CHUMBRIS PETER 325 249.60	280/7	356-
ह0 <i>ह</i> ं	CHUMBRIS, PETER JULY 249.60 JIMMINK, MARY LOTTO 226.00	25424	245
809	ELORED, EPPA_ 255 205.00	2305	233-
810	HAMILTON, FRANCIS 320. 256.00	28853.	292-
811	SACEARDI, WILLAAM 350 297.00	3349	321-
513	CRENSHAW, HILDA NIERDIN 277.00	3.172	3/5 1
•	· Cherosity w, mixon	. o . p	
		~	