

Resolution No.: 17-589  
Introduced: November 6, 2012  
Adopted: November 6, 2012

**COUNTY COUNCIL  
FOR MONTGOMERY COUNTY, MARYLAND**

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By: County Council

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**SUBJECT:** Approval of Executive Regulation 2-12, Group Residential Care Facilities  
(Department of Health and Human Services)

**Background**

1. On September 20, 2012, the County Council received proposed Regulation 2-12, Group Residential Care Facilities, from the County Executive.
2. The Council must review these regulations under method (2) of Section 2A-15 of the Code.
3. Under method (2), if the Council does not approve or disapprove a regulation within 60 calendar days after the Council receives the regulation, the regulation automatically takes effect.
4. The Health and Human Services Committee held a worksession on this proposed regulation on October 18, 2012. The Committee recommended approval.

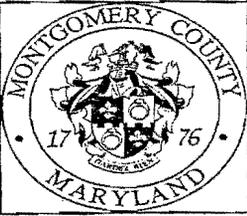
**Action**

The County Council for Montgomery County, Maryland, approves the following resolution:

Executive Regulation 2-12, Group Residential Care Facilities is approved.

This is a correct copy of Council action.

  
Linda M. Lauer, Clerk of the Council



# MONTGOMERY COUNTY EXECUTIVE REGULATION

Offices of the County Executive • 101 Monroe Street • Rockville, Maryland 20850

<b>Subject</b> Group Residential Care Facilities	<b>Number</b> 2-12
<b>Originating Department</b> Department of Health and Human Services	<b>Effective Date</b> December 6, 2012

Montgomery County regulation on:

## GROUP RESIDENTIAL CARE FACILITIES

Issued by: County Executive

Regulation No. 2-12

Authority: Montgomery County Code Section 23A-6  
Council Review: Method (2) under Code Section 2A-15  
Register Vol. 29, Issue 6

Sunset Date: None

**Summary:** This regulation supersedes Executive Regulation 59-91 in order to comply with Federal law and County Bill No. 40-11 which removed the county licensure requirement for group homes for developmentally disabled adults.

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**Background Information:** This regulation implements Chapter 23A, Montgomery County Code concerning operating standards for Group Residential Care Facilities in Montgomery County in order to protect the health and welfare of the residents.



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<b>Originating Department</b> Department of Health and Human Services	<b>Effective Date</b>

## Section 1. Definitions.

**Applicant** - A person applying for a group residential care facility license.

**Department** - The Department of Health and Human Services.

**Director** - The Director of the Department of Health and Human Services, or the Director's designee unless otherwise specified.

**Facility** - A group residential care home which houses three or more unrelated individuals located in a residential zone. It may accommodate a maximum of 16 residents, including supervisory staff. Facility does not include a bona fide foster home for children nor adult foster care or respite care homes for not more than three foster care or respite care clients certified or determined eligible for services by the Department of Health and Human Services, nor does it include group homes for developmentally disabled adults which are licensed by the Maryland Department of Health and Mental Hygiene, Developmental Disabilities Administration.

**Group residential care** - The provision of shelter, board, facilities, resources for daily living, personal guidance and direction, and related supportive activities within a residential home environment.

**Licensee** - Any person to whom a facility license has been issued in accordance with the provisions of Chapter 23A and these regulations.

**Person** - Any individual; partnership; firm; public, private, profit, or nonprofit corporation; association; governmental agency; or other legal entity.

**Resident** - Any individual who because of physical, emotional, mental, familial issues, or is under the jurisdiction of the Juvenile Court, and has a need for supervision or assisted living services.

**Staff Director** - The person who is legally responsible for the overall operation of the facility and is directly responsible for compliance with all applicable laws and regulations.

**Unrelated individuals** - Anyone who is not a son, daughter, grandson, granddaughter, father, mother, grandfather, grandmother, brother, sister, step-mother, step-father, step-son, step-daughter, husband, wife, or in-law of the licensee, owner, operator, or lessee of the group residential care facility.

## Section 2. Program and Administrative Requirements

All existing or new facilities must comply with the provisions of these regulations in order to secure and maintain program certification.

A. Applicable laws



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Any group residential facility licensed or regulated by the state and licensed by Montgomery County must comply with all applicable federal, state, and local laws and regulations.

B. **Staff Director:** The licensee, if not serving as the Staff Director of the facility, must appoint a responsible person of legal age as Staff Director. The licensee must furnish to the Department, in writing, the full name, age, home address, and telephone number of the appointee.

C. **Registry**

1. The licensee must maintain a permanent registry of the facility's residents. The registry must contain the following information on each resident:

- a. date of admission;
- b. registration or entry number;
- c. name of resident's physician; and
- d. name, address, and telephone number of the person to be contacted in case of emergency.

2. A separate registry may be kept by the licensee which must include the name of the resident which corresponds to the registration or entry number in the permanent registry.

D. **Restriction on Admission**

A licensee must admit to a facility only individuals who meet the definition of resident. Facilities licensed under these regulations must not admit a resident who requires nursing or domiciliary care, as defined in Chapter 25 of Montgomery County Code, 2004 as amended.

E. **Employee's Health Record**

The licensee must establish and maintain an individual health record on each staff member that must be retained with the staff member's employment record.

**Pre-employment Medical Examination.** Prior to being employed as a staff member in a licensed facility:

1. Each person must be examined by a licensed physician and must take either a chest x-ray or an intradermal tuberculin test (mantoux test). A chest x-ray is required for all positive reactions to intradermal tuberculin tests. Positive x-rays must be reported to the local health officer by the Staff Director of the facility.



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2. Each person must have a signed statement from a licensed physician indicating that he or she is free of tuberculosis in its communicable stage, free of all communicable diseases, and in good health.

F. Reports and Action Required

Any occurrence, such as fire, smoke, epidemic outbreaks, poisoning, or other unusual occurrences which threaten the welfare, safety, or health of any resident must be immediately reported to the Department of Health and Human Services. The licensee must furnish such information related to the occurrence as the Director may require.

G. Communicable Diseases

The licensee must provide for arrangements to transfer a resident suffering from active tuberculosis to an appropriate health care facility.

### Section 3. Program Certification Requirements

Program certification is the certificate issued annually by the Director for a program which is in compliance with these regulations. A program which is not in compliance with these regulations and cannot meet the minimum requirements for certification must be denied a certificate. In the case of denial of program certification, the Director must inform the applicant in writing of the reasons for denial. No facility may alter or change its scope of program from that certified unless it has prior written approval from the Director. All programs must meet the following requirements for certification:

A. Complaint Procedures

1. Complaint Procedure at the Facility

As part of the program statement, the licensee must develop and describe the mechanism(s) and procedure(s) whereby residents can have easy and convenient access to the person designated by the licensee with whom complaints or grievances must be filed. Any person registering a complaint or grievance must be advised by the licensee that attempts will be made at the facility to resolve those complaints or grievances communicated to the responsible facility staff person.

2. Complaint Procedure at the Department of Health and Human Services

The complainant must be advised by the licensee that if a grievance or complaint, whether originally filed in oral or written form, is not satisfactorily resolved at the facility, the grievance or complaint must then be forwarded to the Director for resolution or conciliation. The procedure for conciliation of the grievance or complaint before the Director is as follows:



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- a. All complaints or grievances must be in writing, signed by the complainant, and addressed to the Director. A copy of the written complaint must be sent to the licensee or Staff Director of the facility in question.
- b. The licensee or Staff Director must investigate the complaints or grievances described in the written complaint and must respond in writing to the Director within seven days of receipt of the complaint. A copy of the response must be sent to the complainant. The response must contain statements concerning the validity of the alleged complaint or grievance and any action or alternative solutions proposed by the licensee to alleviate such complaint or grievance.
- c. The complainant must respond to the answer of the licensee or Staff Director and indicate the acceptability of the response provided under subsection b. This response must be sent by the complainant to the Director in writing within seven days of receipt of the facility's answer. A copy of the response must be sent to the licensee or Staff Director of the facility.
- d. Any complainant who is dissatisfied with the licensee's response must receive notification of additional complaint procedures at either the County or State.

## B. Inspections of Facility Records

1. To fulfill the responsibilities of program certification, the Director may, at any reasonable time, with or without a complaint being filed, visit or inspect any facility licensed under Chapter 23A in order to determine whether such facility is in compliance with applicable requirements of the law and regulations relating to program certification, and to ensure that the facility meets current certification standards. This is accomplished by a continuing review, which includes a review of the facility's records, observation of the Staff Director's work with residents, and periodic evaluation of the program and service. The Director has full power to conduct investigations, including the right of entry into the facility at all reasonable times.
2. The facility must maintain records on each resident. Program reports must be available and open to inspections by the Director at any reasonable time. The licensee must keep such records by name, number or code so long as the licensee can properly identify each resident.
3. All records about residents maintained by licensees are confidential and must be properly secured. The licensee must comply with all laws and regulations that protect the privacy and security of records and information about residents. The licensee must have a policy and procedure on protecting the rights of privacy concerning the records of each resident. Such policy or procedure must be in writing, clearly stated, and must include guidelines for access to these records and procedures for use of these records.



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## Section 4. Program Certification Process

At the time an application for a license is submitted, the applicant must furnish to the Director a separate program statement in a format approved by the Director. The program statement must describe the following:

- A. The program purpose, goals, and objectives.
- B. The means to accomplish the goals and objectives.
- C. The needs and capabilities of the population served.
- D. The proposed budget, resources, and procedures to meet those needs.
- E. Proposed operating methods and procedures for medication management, transportation, social and recreational services, 24 hour supervision, personal care services, and food services.
- F. Client admission and retention criteria.
- G. Qualifications and experience of the applicant and personnel operating the group home.
- H. Emergency preparedness.

## Section 5. Safety Procedures

### A. Evacuation Plan

Each licensee must develop an evacuation plan for use in case of fire or other emergencies. Copies of this plan must be posted in conspicuous locations and all residents must be fully acquainted with the plan.

- 1. Fire drills must be held at least once a month. The Staff Director must keep a record of the drills.
- 2. The purpose of the fire drills must be to familiarize employees and residents with the evacuation plan.
- 3. The assistance of local fire officials should be sought in developing a satisfactory plan of fire drills.

### B. Communication

There must be a telephone in the building to summon help promptly in case of fire or other emergencies. Pay stations or locked telephones do not meet this requirement.



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C. Transportation.

For facilities served by private access roads, the licensee must be responsible for maintaining such roads in passable condition at all times.

## Section 6. Health and Sanitation Requirements

Facilities must be in conformance with all applicable provisions of the Montgomery County Code and Executive Regulations, including, but not limited to: housing, zoning, and permitting services.

## Section 7. Fire Safety Requirements

Every applicant must provide a statement from the County Fire Marshall that the home meets all appropriate *Life Safety Code* standards.

A. The following additional requirements are applicable to facilities housing 6 or fewer residents:

1. The facilities must comply with the National Fire Protection Association life safety requirements for one and two family dwellings as outlined in the National Fire Protection Association (NFPA) 101, *Life Safety Code*, 2009 Edition, as amended, unless otherwise required in this regulation; and
2. Household fire warning equipment must be provided as specified in the National Fire Protection Association (NFPA) 72, *National Fire Alarm Code*, 2007 Edition, Chapter 11, entitled Single-and Multiple-station Alarms and household Fire Alarm systems.

B. The following additional requirements are applicable to facilities housing more than 6 residents but not more than 16 total persons including staff:

1. The National Fire Protection Association life safety requirements for lodging and rooming houses as indicated in NFPA Standard No. 101, *Life Safety Code*, 2009 Edition as amended; and
2. Requirements for smoke detection equipment in accordance with NFPA 72, *National Fire Alarm Code*, 2007 Edition.

## Section 8. Severability

If a court holds that part of this regulation is invalid, the invalidity does not affect the other parts.



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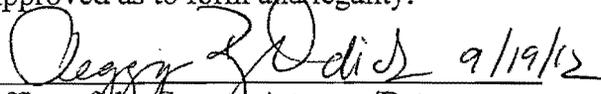
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## Section 9. Effective Date

This regulation takes effect 30 days after approval by the County Council

  
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Isiah Leggett  
County Executive

Approved as to form and legality:

  
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Office of the County Attorney/Date  
PEGGY R ODICK