

State of Maine

Department of Professional and Financial Regulation (PFR)

Office of Professional and Occupational Regulation (OPOR)

02-371

**Rules of the
Nursing Home Administrators Licensing Board**

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Summary: This chapter defines specialized terms used in the Board’s rules.

1. Definitions

Unless the context otherwise indicates, the following terms have the following meanings:

1. **Accredited educational institution.** “Accredited educational institution” means a college or university that has been accredited by an accrediting agency recognized by the U.S. Department of Education or an accrediting agency of similar stature in a foreign country.
2. **Acting Administrator.** “Acting Administrator” means an Acting Administrator as defined by and subject to 10-144 C.M.R. ch. 110, § 4.A (effective Aug. 1, 2020); 10-144 C.M.R. ch. 113, § 10 (eff. Aug. 20, 2008); and 10-144 C.M.R. ch. 118, § 4 (eff. Jan. 1, 2009); who holds a valid license issued by the board.
3. **Administrator.** “Administrator” means an individual licensed by the board who is charged with, and has responsibility for, the general administration of a Nursing Home, Multi-Level Long Term Care Facility, and/or Residential Care Facility, whether or not such individual has an ownership interest in such home, and whether or not the individual’s functions and duties are shared with one or more other individuals.
4. **Administrator-in-Training or AIT.** “Administrator-in-Training” or “AIT” means an individual approved by the board to participate in an AIT program.
5. **Administrator-in-Training Program or AIT Program.** “Administrator-in-Training Program” or “AIT Program” means a formal, individualized, educational program approved by the board and designed to prepare an individual for the role of an Administrator in the type of facility in which they are being trained.
6. **Consultation.** “Consultation” means an Administrator providing guidance and advice to a Temporary Administrator, including advising as to issues related to adherence to applicable state and federal laws and rules.
7. **Field directly related to health care or social services.** “Field directly related to health care or social services” includes, but is not limited to, gerontology, medicine, mental health and human services, nursing, occupational therapy, physical therapy, psychology, public health, speech-language pathology, social work, and sociology.
8. **Licensed Administrator Consultant or LAC.** “Licensed Administrator Consultant” or “LAC” means an administrator, in good standing, authorized by the board to provide supervision and consultation to a temporary license holder.

9. **Long Term Care Facility** “Long Term Care Facility” means a facility in which custodial, assistive or supervisory care is provided to persons over a period of time.
10. **Multi-Level Long Term Care Facility.** “Multi-Level Long Term Care Facility” means a medical care facility other than a hospital that provides more than one level of long term care, including care levels normally associated with Nursing Homes and those associated with residential care/assisted living.
11. **Multi-Level Long Term Care Facility Administrator.** “Multi-Level Long Term Care Facility Administrator” means an individual licensed by the board who is charged with, and has responsibility for, the general administration of a Multi-Level Long Term Care Facility, a Nursing Home or a Residential Care Facility.
12. **NAB.** “NAB” means the National Association of Long Term Care Administrator Boards or its successor.
13. **Nursing Home.** “Nursing Home” means any medical care facility, other than a hospital, providing, in addition to lodging and board, medical care or nursing supervision to sick, invalid, infirm, disabled or convalescent persons; or any skilled nursing facility (SNF); intermediate care facility (ICF); or intermediate care facilities for individuals with intellectual disabilities (ICF/IID).
14. **Nursing Home Administrator or NHA.** “Nursing Home Administrator” or “NHA” means an individual licensed by the Board who is charged with, and has responsibility for the general administration of a Nursing Home, as defined by these rules.
15. **Preceptor.** “Preceptor” means an individual who meets the qualifications established by the board to provide training and supervision to an Administrator-in-Training.
16. **Residential Care Facility.** “Residential Care Facility” means a Level IV Residential Care Facility (licensed capacity of more than 7 residents) as defined by and subject to 10-144 C.M.R. ch. 113 (eff.Aug. 20, 2008).
17. **Residential Care Facility Administrator.** “Residential Care Facility Administrator” means an individual licensed by the board who is charged with, and has responsibility for, the general administration of a Residential Care Facility.
18. **Supervision.** “Supervision” means the establishment and monitoring of a prescribed work schedule, oversight of performance, and ensuring timely completion of the reports required by the board’s rules.
19. **Temporary Administrator.** “Temporary Administrator” means an individual licensed on a temporary basis by the board to perform the duties of an administrator.

STATUTORY AUTHORITY: 32 M.R.S. § 63-B(2)

EFFECTIVE DATE:

Summary: This chapter provides for the discretionary issuance of advisory rulings by the board.

1. Request and Consideration

Upon written request of any interested person, the board may issue an advisory ruling pursuant to 5 M.R.S. § 9001 with respect to the applicability of any statute or rule it administers. Requests for advisory rulings must set forth in detail all facts pertinent to the question. The board may decline to issue an advisory ruling if the question is hypothetical, if there is insufficient information upon which to base a ruling, or for any other reason the board deems proper.

2. Response

The board shall acknowledge receipt of a request for an advisory ruling within 15 days after receipt. The board shall respond to every written request for an advisory ruling within 90 days of its receipt of the request, indicating whether or not a ruling will be issued by the board.

STATUTORY AUTHORITY: 5 M.R.S. § 9001; 32 M.R.S. § 63-B(2)

EFFECTIVE DATE:

02 DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION
371 NURSING HOME ADMINISTRATORS LICENSING BOARD
Chapter 22: ADMINISTRATOR-IN-TRAINING PROGRAM FOR MULTI-LEVEL LONG TERM CARE FACILITY ADMINISTRATORS

Summary: This chapter describes the AIT Program that must be completed by individuals applying for licensure by examination as a multi-level long term care facility administrator.

1. Application for Licensure as Administrator-in-Training

An individual who wants to be licensed as an Administrator-in-Training and who has fully completed the educational requirement described in Chapter 23, Section 3(1) of the board's rules must apply for licensure as an Administrator-in-Training (AIT) by submitting an application provided by the board. The applicant must include with the application:

1. An official academic transcript demonstrating completion of the education required by Chapter 23, Section 3(1) of the board's rules;
2. Identification of the intended commencement date and the length of a training program that meets the requirements of this Chapter and at a minimum conforms to the National Administrator-in-Training Program as incorporated into Board rules as set forth in Section 9(1) of this Chapter. The applicant shall identify the training site(s) and the licensed administrator at those site(s);
3. Qualifications of the preceptor who will provide the supervision required by Section 8 of this chapter, including but not limited to their licensing and employment history and the preceptor training program they completed that complies with board rules;
4. Verification of licensure from each state in which the applicant at any time held an occupational or professional license;
5. The license fee required by Chapter 10 of the rules of the Office of Professional and Occupational Regulation; and
6. Such additional information as the board may require.

The applicant may not practice as an AIT until the board has approved the applicant's choice of preceptor and has issued a license to the applicant. Any training hours that occur prior to approval and licensure will not be recognized by the board.

The license is valid for a period of up to one (1) year. Once the AIT Program has been completed and approved, the AIT license will be terminated. The AIT license is not renewable. The board may renew the license for an applicant who demonstrates active duty military service as described in 37-B M.R.S. § 390-A, or due to unforeseeable circumstances of genuine hardship as determined by the board.

2. Waiver of Licensure and Training Program

Upon request, the board may waive the requirement for licensure as an AIT in whole or in part upon proof that the applicant completed an internship or practicum that was substantially equivalent to an AIT Program as an academic requirement for a degree program in which the applicant was enrolled. A waiver request shall be accompanied by an official academic transcript of the education required by Chapter 23, Section 3(1) of the board's rules and the license fee required by Chapter 10 of the rules of the Office of Professional and Occupational Regulation.

In deciding whether to grant a waiver, the board may consider the length and content of the internship or practicum, the extent of supervision received, the nature and variety of the training sites, the recommendation of the applicant's supervisor, and any other relevant factors.

3. Practice Areas Covered

The AIT Program must include the following practice areas: resident care management, personnel management, financial management, environmental management, organizational management, laws, regulations, codes and governing boards.

4. Program Length

The program length shall be 1000 hours devoted solely to the training of the AIT. An AIT shall complete the AIT Program in no less than 6 months and no more than 1 year. The board may extend this time upon request of the applicant due to active duty military service as described in 37-B M.R.S. § 390-A, or due to unforeseeable circumstances of genuine hardship as determined by the board.

A minimum of 40 hours and a maximum of 160 hours are to be served outside of the hours of 7:00 a.m. to 5:00 p.m.

5. Training Sites and Rotations

1. Primary and Secondary Sites

The AIT must select as the primary training site for the AIT Program either a Skilled Nursing Facility (SNF) or an Intermediate Care Facility for individuals with intellectual disabilities (ICF/IID).

For AITs selecting a Skilled Nursing Facility as a primary training site, at least one clinical rotation of at least 40 hours must be completed in each of the secondary training sites. For AITs selecting an ICF/IID Facility as a primary training site, a minimum of 480 hours must be completed at the Skilled Nursing Facility site as well as at least 40 hours completed at a Level IV Residential Care Facility.

2. Prior Experience and Training

The prior experience and training of the AIT may be considered in the development and duration and/or depth of training in certain domains. If the AIT is currently, or has been within the previous two (2) years, employed in a professional capacity in a Skilled Nursing Facility (SNF) or an Intermediate Care Facility for individuals with intellectual disabilities

(ICF/IID) a maximum of 40 hours of AIT work shall be devoted to that field in which the AIT was previously employed

6. Progress Reports and Change in Preceptor

1. **Progress Reports.** The AIT must sign a monthly progress report on a form provided by the board. The report must include a summary of the previous month's activities, including dates of the activities, and such additional information as the board may require. The AIT preceptor must review the report, comment on the progress of the AIT, identify any changes to the AIT program as necessary, and co-sign the report.

The AIT must submit the monthly report to the board no later than the 10th day of the following month.

2. **Change in Preceptor.** The AIT must notify the board if their preceptor is no longer able to fulfill the responsibilities of preceptorship. The AIT shall, as soon as practicable, submit another proposed preceptor for board approval.

7. Multiple Roles

An individual may not simultaneously be an AIT and a temporary administrator. An individual may not simultaneously be an AIT and serve as an acting administrator appointed by the Maine Department of Health and Human Services. During the identified training hours, an AIT may not serve in any other capacity at the training facility.

8. Qualifications of Preceptor; Limitation

The AIT must be supervised by a preceptor who satisfies the following requirements.

1. Licensure

A preceptor must have been continuously licensed by the board as a nursing home administrator or multi-level long term care facility administrator for the five (5) years immediately preceding the AIT application with no lapse of licensure. The preceptor must maintain an active license for the duration of the training program.

2. Employment

The preceptor needs to have been employed full-time in Maine at a licensed nursing facility in a supervisory capacity or as an executive with oversight responsibility in the field of long-term care for a minimum of three (3) years immediately preceding the AIT application.

3. Disciplinary Record

The preceptor must not have been disciplined by any professional or occupational regulatory authority in any jurisdiction during the five (5) years preceding the AIT application, and remain free from professional discipline for the duration of the training program. The board will consider complaint, survey, and disciplinary history when reviewing preceptor applications.

4. Preceptor Training

Has completed a preceptor training program approved by the board pursuant to Chapter 29 of the board's rules.

5. Limit on Number of AITs

The board may approve a maximum of two AITs per preceptor at any one time.

9. Responsibilities of Preceptor

The preceptor is responsible for:

1. Developing, in conjunction with the AIT, a personalized training program that meets the requirements of this chapter and conforms to the National Administrator-in-Training Program. The Board hereby incorporates all Modules of the National Administrator-in-Training Program Manual, issued by the American College of Health Care Administrators and the National Association of Long Term Care Administrators Board, copyright © 2021 by the National Association of Long Term Care Administrator Board, Inc. Copies are available at <https://www.nabweb.org>.
2. Advising the AIT in the selection of the primary and secondary training sites;
3. Developing specific assignments within the scope of the training program;
4. Communicating with the AIT on a weekly basis to review the previous week's activities, preparing the AIT for upcoming rotations and assignments, and mentoring the AIT's professional development. For the purpose of this section, "communicating" may be via live, audio and/or video synchronous technology;
5. Upon request by the AIT, reviewing and signing the AIT's monthly reports.
6. Providing the AIT with up-to-date copies of the materials described in the board's application packet;
7. Notifying the board if the preceptor is no longer able to fulfill the responsibilities of preceptorship; and
8. Making a final recommendation to the board as to the AIT's successful completion of the AIT Program.

10. Preceptor Compliance

Failure to comply with the supervision and reporting requirements of this chapter shall constitute grounds for discipline as misconduct of the preceptor as well as grounds for revision, suspension, or termination of the AIT program, as determined by the board or its designee.

STATUTORY AUTHORITY: 32 M.R.S. § 63-B(2)

EFFECTIVE DATE:

02 **DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION**
371 **NURSING HOME ADMINISTRATORS LICENSING BOARD**
Chapter 23: MULTI-LEVEL LONG TERM CARE FACILITY ADMINISTRATORS:
LICENSURE BY EXAMINATION

Summary: This chapter sets forth the requirements for licensure by examination as a multi-level long term care facility administrator.

1. Scope of Practice

The multi-level long-term care facility administrator license authorizes the licensee to serve as an administrator of a nursing home, multi-level long-term care facility or residential care facility.

2. Required Examinations

The board requires individuals applying for the multi-level long-term care facility administrator license to achieve passing scores on the CORE of Knowledge Exam for Long Term Care Administrators (CORE), the Nursing Home Administrators (NHA) Line of Service Exam (LOS), and the Residential Care/Assisted Living (RCAL) Line of Service (LOS) Exam developed by NAB. The passing score shall be determined by the board upon consideration of the recommended passing score established by NAB. A passing score will be recognized by the board for a period of two (2) years after the date of the examination on which the passing score was achieved.

3. Examination Approval

To qualify for the examination required by Section 2 of this Chapter, an individual seeking examination approval must submit a form provided by the board and submit evidence of:

1. Education.

a. A bachelor's degree or higher, from an accredited educational institution, in health care administration, long term care administration, business administration or a field directly related to health care or social services; or

b. A bachelor's degree or higher, from an accredited institution, in any field, plus proof of one of the following:

(1) A certificate in long term care administration from an accredited institution;

 or

(2) Twelve (12) semester hour credits from an accredited institution, with no fewer than six (6) in management and the balance in health care.

2. Training. Proof of successful completion of an AIT program described in Chapter 22 of the board's rules or meet the requirements of Chapter 22, Section 2 of the board's rules.

Once an individual receives approval to sit for the examinations administered by NAB, they must register with NAB and designate the board as a state licensing entity authorized to receive the candidate's examination scores.

Examination approvals are subject to any terms and conditions set by NAB. Any fees required for examinations are set by NAB and not the board.

4. Application for Licensure

1. Form of Application.

To apply for licensure as a multi-level long term care facility administrator by examination, an applicant must:

- a. Be at least 21 years old at the time of application;
- b. Ensure the board has received all documentation of education, training and passage of the required examinations;
- c. Submit any fee required by Chapter 10 of the rules of the Office of Professional and Occupational Regulation; and
- d. Submit any other information as the board may require.

2. Completeness

The board will not act on an application until the application is complete. If an applicant does not remedy the deficiencies described by the board within the time designated by the board, the application may be voided and the applicant would need to submit a new application and any required fee to reapply.

STATUTORY AUTHORITY: 32 M.R.S. § 63-B(2)

EFFECTIVE DATE:

Chapter 25: LICENSURE OF NURSING HOME ADMINISTRATORS

Summary: This chapter addresses the nursing home administrator license.

1. Scope of Practice

The nursing home administrator license authorizes the licensee to serve as administrator of a nursing home.

2. License Issuance and Renewal

As of the effective date of this rule, the board will no longer issue new nursing home administrator licenses.

An individual who holds a valid Maine nursing home administrator license may continue to renew that license, in accordance with 32 M.R.S. § 65 and Chapter 28 of the board's rules.

3. Multi-Level Long Term Care Facility Administrator Licenses for Nursing Home Administrators

An individual who holds a valid Maine nursing home administrator license may apply for a multi-level long term care facility administrator license. To be eligible to receive the multi-level long term care facility administrator license, the individual also must have passed the Residential Care/Assisted Living (RCAL) LOS Exam developed by NAB.

STATUTORY AUTHORITY: 32 M.R.S. §§ 63-B(2), 65

EFFECTIVE DATE:

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Chapter 26: LICENSURE OF RESIDENTIAL CARE FACILITY ADMINISTRATORS

Summary: This chapter sets forth the requirements for licensure of residential care facility administrators.

1. Scope of Practice

The residential care facility administrator license authorizes the licensee to serve as administrator of a licensed residential care facility of seven (7) beds or more.

2. Required Examinations

The board requires individuals applying for the residential care facility administrator license to achieve passing scores on the CORE of Knowledge Exam for Long Term Care Administrators (CORE) and the Line of Service Examination RC/AL for Residential Care/Assisted Living Administrators developed by NAB. The passing score shall be determined by the board upon consideration of the recommended passing score established by NAB. A passing score will be recognized by the board for a period of two (2) years after the date of the examination on which the passing score was achieved.

3. Examination Approval

To qualify for the examination required by Section 2 of this Chapter, an individual seeking examination approval must submit a form provided by the board and submit evidence of either:

1. an associate's degree in healthcare administration or health care related field,
- or
2. completion of five (5) years of experience working in a healthcare facility.

Once an individual receives approval to sit for the examinations administered by NAB, they must register with NAB and designate the board as a state licensing entity authorized to receive the candidate's examination scores.

Examination approvals are subject to any terms and conditions set by NAB. Any fees required for examinations are set by NAB and not the board.

4. Application for Licensure

1. Form of Application.

To apply for licensure as a residential care facility administrator by examination, an applicant must:

- a. Be at least 21 years old at the time of application;

- b. Ensure the board has received all documentation of education or experience and passage of the required examinations;
- c. Submit any fee required by Chapter 10 of the rules of the Office of Professional and Occupational Regulation; and
- d. Submit any other information as the board may require.

2. Completeness

The board will not act on an application until the application is complete. If an applicant does not remedy the deficiencies described by the board within the time designated by the board, the application may be voided and the applicant would need to submit a new application and any required fee to reapply.

STATUTORY AUTHORITY: 32 M.R.S. § 63-B(2)

EFFECTIVE DATE:

Chapter 27: TEMPORARY LICENSURE OF ADMINISTRATORS

Summary: This chapter sets forth the requirements for temporary licensure of multi-level long term care facility administrators.

1. Temporary License

1. Issuance

In order to fill a vacant administrator position in a multi-level long term care facility subject to these rules, the board may issue a temporary license to an applicant who meets the qualifications as outlined in subsection 2 below and is subject to supervision by a board-approved licensed administrative consultant.

2. Qualifications for Temporary Licensure

To qualify for temporary licensure, an applicant must:

- A. Be at least 21 years old;
- B. Provide evidence of a high school diploma or its equivalent; and
- C. Provide proof in the form of a current resume that the applicant either:
 - (1) Is the current director of nursing at the multi-level long term care facility and has held the position for a minimum of one (1) year; or
 - (2) Has a minimum of two (2) years of experience in a managerial position in a multi-level long term care facility within the five (5) years immediately preceding the application.

3. Application

An individual must apply for temporary licensure on an application provided by the board. The applicant must include with the application:

A. Written Statement

A written statement by the owner or representative of the governing body of the multi-level long term care facility for which temporary licensure is sought certifying that the facility's position of administrator has become vacant; that it plans to employ the applicant on a temporary basis if the applicant is issued a temporary license; and that it will retain a licensed administrative consultant as described in Section 1(6) of this chapter for the period in which the applicant renders services to it under a temporary license.

B. Fees

The license fee required in Chapter 10 of the rules of the Office of Professional and Occupational Regulation, entitled “Establishment of License Fees.”

C. Additional Information

Such other information as the board may require.

4. Terms of the Temporary License

A temporary license is valid only for the employment in the long term care facility specified in the application. A temporary license is non-transferable.

5. Duration

A temporary license may be issued for a period not to exceed one (1) year. The temporary license may not be further renewed or re-issued to the same candidate for the same facility, except in situations of demonstrated hardship and in the sole discretion of the board. Notwithstanding Chapter 28, there is no requirement to complete continuing education requirements if the board permits renewal.

6. Licensed Administrative Consultant (LAC)

A. Hiring of LAC

An LAC must be under contract for the duration of a temporary license to consult with the temporary licensee with regards to administration of the facility.

B. Qualifications of LAC

The temporary licensee must consult with an LAC who:

- (1) Has been continuously licensed by the board at a level of licensure that is equivalent to or higher than the level of permanent licensure required to administer the multi-level long term care facility for the five (5) years preceding commencement of the consulting relationship with no lapse of licensure, and maintains the license in effect for the duration of the consulting relationship;
- (2) Has a minimum of three (3) years of full-time experience as an administrator of a facility, in Maine or elsewhere, that is comparable to the facility for which consultation is sought; and
- (3) Has not been disciplined by any professional or occupational regulatory authority in any jurisdiction during the five (5) years preceding the temporary license application, and remains free from professional discipline during the term of the temporary license. The board will consider surveys conducted by the Maine Department of Health and Human Services and disciplinary history when reviewing applications.

C. Supervision by LAC

- (1) The LAC must provide direct supervision of the temporary licensee and shall provide for coverage in the event of a temporary absence. The LAC and temporary licensee may participate in supervisory meetings in person or via video conferencing, conference telephone, or similar communications equipment by means of which all persons participating in the meeting can hear each other and participate.
- (2) Should the approved LAC be unavailable to provide supervision to the temporary licensee for any portion of the one year timeframe specified in section 1(5) of this chapter, the board may issue a waiver for no more than thirty (30) days from the absence giving due consideration to public protection. A second request for another thirty (30) day waiver may be made. The temporary licensee must submit to the board a waiver request in writing as soon as practicable prior to the unavailability of the LAC or within 10 days of unavailability of the LAC and may propose a replacement LAC at that time. A replacement LAC must be appointed within thirty (30) days from the absence but in no event later than a maximum of sixty (60) days from the absence.
- (3) The LAC must submit a monthly evaluation report on the temporary licensee to the board. The report must contain the hours the LAC spent with the temporary licensee, the content of the supervision and the domains that were covered. The report must be received by the board no later than ten (10) days after the reporting period.

STATUTORY AUTHORITY: 32 M.R.S. §§ 63-B(2), (3)

EFFECTIVE DATE:

02 **DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION**

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Chapter 28: LICENSE RENEWAL, CONTINUING EDUCATION, AND INACTIVE STATUS

Summary: This chapter describes the license renewal process, the continuing education requirement, and inactive status licensure.

1. License Expiration

All licenses issued by the board, other than an AIT or temporary license, expire annually on June 30th.

2. Renewal Process

All licenses issued by the board that may be renewed require that a licensee:

1. Complete and submit the renewal application provided by the board;
2. Pay the license fee required by Chapter 10 of the rules of the Office of Professional and Occupational Regulation; and
3. Provide such other information as the board may require.

3. Continuing Education Requirement

Continuing education is required as a prerequisite to license renewal. An administrator must certify on the renewal application to completion of the requisite number of hours of continuing education during the preceding license term, as set forth in this section.

1. Required hours

- A. Nursing Home Administrators and Multi-Level Long Term Care Administrators must obtain twenty-four (24) hours of continuing education between July 1 and June 30 of each year.
- B. Residential Care Facility Administrators must obtain sixteen (16) hours of continuing education between July 1 and June 30 of each year.
- C. Continuing education units shall be based on a fifty-five (55) minute hour allowing for a fifteen (15) minute break for each three hour segment.

2. First Renewal

The continuing education requirement does not apply to an administrator's first license renewal.

3. Approved Continuing Education Activities

A. Content

Continuing education activities shall be relevant to the profession and relate to the domains of practice set by NAB or other nationally recognized organizations providing continuing education to nursing home administrators.

B. Type

Continuing education may consist of any of the following types of activities:

- (1) Live attendance at seminars, workshops, and training sessions. Continuing education credit may not be claimed more than once in a license cycle for the same seminar, workshop, or training session. Attendance must be documented by a certificate of completion or other reliable written evidence that is acceptable to the board. Licensees must also be able to provide course descriptions and/or agendas to substantiate the content to the board upon request.
- (2) Distance learning activities, such as online courses, workshops, and training, and home study courses. Continuing education credit may not be claimed more than once in a license cycle for the same online course, webinar, workshop, or training, home study course, or any other distance learning activity. Completion must be documented by a certificate of completion or other reliable written evidence that is acceptable to the board. Licensees must also be able to provide course descriptions and/or agendas to substantiate the content upon request.
- (3) Completion of a course that consists of three (3) semester hours, or the quarter-hour equivalent (quarter-hour equivalent means $\frac{2}{3}$ of a semester hour), in a related field at an accredited college or university for one academic semester, which will be considered twelve (12) hours of continuing education. Completion of the course must be documented by an official academic transcript.
- (4) An administrator may be credited for the following:
 - (a) Publication of an article related to long term care or health care in a professional journal. Publication is considered the equivalent of three (3) hours of continuing education.
 - (b) Publication of a contributed chapter in a book related to long term care or health care. Publication is considered the equivalent of three (3) hours of continuing education.
 - (c) Publication of a book related to long term care or health care. Publication is considered the equivalent of eight (8) hours of continuing education.

Continuing education hours under this subparagraph will be recognized only for the license cycle during which the article or book was accepted for publication. Publication and date of acceptance must be documented

by a copy of the article or title page of the book and a letter of acceptance or letter from the publisher.

4. Recognized Continuing Education Sponsors and Providers

The board may pre-approve upon request continuing professional education activities offered by sponsors and providers whose past offerings, in the judgment of the board, have consistently conformed to the approval criteria set forth in Section 3(3) of this chapter. The board shall publish a current list of pre-approved sponsors and providers from time to time and may update the list as necessary. All sponsors and providers must distribute an evaluation form for participants to comment on the quality of programs and the relevance of content to the profession and certificates of completion to attendees at the conclusion of the program. The sponsor and provider must retain completed evaluations for two (2) years following conclusion of the program and must promptly provide the evaluations to the board upon request.

5. Waiver or Deferment

In the event that an administrator is unable to satisfy the continuing education requirement due to health reasons or other unforeseeable circumstances of genuine hardship, the administrator may request, in writing, that the board waive or defer the continuing education requirement. The request shall be made prior to, or at the time of, license renewal. Waiver or deferment may be granted or denied at the discretion of the board.

6. Documentation and Audit

An administrator is responsible for maintaining records, certificates, or other written evidence of compliance with the continuing education requirement. Reporting, verification, and audit of continuing education is governed by Chapter 13 of the rules of the Department of Professional and Financial Regulation, Office of Professional and Occupational Regulation, entitled “Uniform Rule for the Substantiation of Continuing Education Requirements.”

7. Transition Period

An administrator renewing before one year after the effective date of this rule change may satisfy the continuing education obligation by either (a) meeting the requirements of this chapter, or (b) meeting the requirements of former Chapter 8 of the board’s rules as that chapter existed immediately prior to its repeal.

4. Inactive Status License

1. Application; Time Limit

An administrator may apply for an inactive status license, and may remain in inactive status for a maximum of five (5) consecutive years.

2. Prohibition on Practice

An administrator with an inactive status license shall not serve as an administrator of a nursing home, multi-level long term care facility, or residential care facility in the State of Maine.

3. Exemption from Continuing Education

An administrator with an inactive status license for more than one year need not comply with the annual continuing education requirement set forth in Section 3 of this chapter. However, in order to return to an active status license, an administrator must comply with the continuing education requirement set forth in subsection 5.

4. Renewal

Inactive status licenses expire annually. In order to renew an inactive status license, an administrator must:

- A. Complete and submit the renewal application provided by the board;
- B. Pay the license fee required by Chapter 10 of the rules of the Office of Professional and Occupational Regulation; and
- C. Provide such other information as the board may require.

5. Reinstatement to Active Status

An administrator with an inactive status license may return to active status upon application to the board, payment of the required license fee, and certification of completion of continuing education as follows:

- A. Nursing Home Administrators and Multi-level Long Term Care Administrators must obtain twenty-four (24) hours of continuing education during the one-year period prior to application for reinstatement, in accordance with the requirements for content and type of continuing education activities set forth in Section 3(3) of this chapter.
- B. Residential Care Facility Administrators must obtain sixteen (16) hours of continuing education during the one-year period prior to application for reinstatement, in accordance with the requirements for content and type of continuing education activities set forth in Section 3(3) of this chapter.

STATUTORY AUTHORITY: 32 M.R.S. §§ 63-B(2), 65, 10 M.R.S. § 80003(5-A)(D)(5)(inactive status)

EFFECTIVE DATE:

02 DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION

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Chapter 29: PRECEPTOR TRAINING

Summary: This chapter sets forth the requirements for preceptor training.

1. NAB Preceptor Training Modules

All licensees serving as preceptors must first complete the AIT Preceptor Module Course administered by NAB or its successor organization, available at www.nabweb.org.

2. Board-approved training course

All licensees serving as preceptors must also complete a board-approved training course that, at a minimum, provides instruction regarding:

1. Board laws and rules;
2. Any forms required to administer an AIT program; and
3. Long-Term Care state regulations, including but not limited to plan of correction requirements.

For the purposes of this section, the board approves the program administered through the Maine Health Care Association. The board reserves sole discretion to approve any additional training courses that will comply with the requirements of this section.

- 3. Documentation.** An individual who completes the training required by this section must maintain proof of completion of the training required by this chapter and produce documentation of completion to the board upon request, for so long as they maintain an active license.
- 4. Active License Required.** Any individual who has not had an active license within the past two (2) years must complete all requirements of this section, regardless if the individual had completed the training previously.

STATUTORY AUTHORITY: 32 M.R.S. § 63-B(2)

EFFECTIVE DATE:

02 DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION

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Chapter 30: CODE OF ETHICS

Summary: This chapter establishes a code of ethics for all licensees, a majority of which is adapted from the Code of Ethics of the American College of Health Care Administrators (ACHCA) (available at www.achca.org).

1. Code of Ethics

The board adopts the following code of ethics for all licensees of the board:

1. A licensee shall hold paramount the welfare of persons for whom care is provided by:
 - A. Striving to provide to all those entrusted to their care the highest quality of appropriate services possible in light of resources or other constraints.
 - B. Operating the facility consistent with laws, regulations, and standards of practice recognized in the field of health care administration.
 - C. Protecting the confidentiality of information regarding individual recipients of care, consistent with law and professional standards.
 - D. Performing administrative duties with honesty, integrity, respect, fairness and good faith.
 - E. Taking appropriate steps to avoid discrimination on the basis of race, color, religion, sex, pregnancy, sexual orientation, citizenship status, national origin, age, physical or mental disability, past, present or future status in the U.S. uniformed services, genetics or any other characteristic protected under applicable law.
 - F. Not disclosing professional or personal information regarding recipients of service to unauthorized personnel unless required by law or to protect the public welfare.
2. A licensee shall maintain high standards of professional competence by:
 - A. Possessing and maintaining the competencies necessary to effectively perform their responsibilities.
 - B. Practicing administration in accordance with accepted standards in the long-term care and assisted living profession and, when appropriate, seeking counsel from qualified others.
 - C. Actively striving to enhance knowledge of and expertise in long-term care administration through continuing education and professional development.
 - D. Not misrepresenting qualifications, education, experience, or affiliations.

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- E. Not providing services other than those for which they are prepared and qualified to perform.
 - F. Not conducting themselves in a manner detrimental to the best interest of the profession.
- 3. A licensee shall strive, in all matters relating to their professional functions, to maintain a professional posture that places paramount the interests of the facility and its residents by:
 - A. Avoiding partisanship and providing a forum for the fair resolution of any disputes which may arise in service delivery or facility management.
 - B. Disclosing to the governing body of the facility or state authority as may be appropriate, any actual or potential circumstance that might reasonably be thought to create a conflict of interest or have a substantial adverse impact on the facility or its residents.
 - C. Not participating in activities that reasonably may be thought to create a conflict of interest or have the potential to have a substantial adverse impact on the facility.
- 4. A licensee shall honor their responsibilities to the public, to the profession, and in relationships with colleagues and members of related professions by:
 - A. Fostering increased knowledge within the profession of health care administration and supporting research efforts toward this end.
 - B. Participating with others in the community to plan for and provide a full range of health care services.
 - C. Sharing areas of expertise with colleagues, students, and the general public to increase awareness and promote understanding of health care in general and the profession in particular.

2. Grounds for Discipline

Any violation of this code of ethics may subject a licensee to disciplinary action under 10 M.R.S. § 8003(5-A).

STATUTORY AUTHORITY: 32 M.R.S. § 63-B(2)

EFFECTIVE DATE: