NEW JERSEY

SUBCHAPTER 5. MANDATORY ACCESS TO CARE

8:39-5.1 Mandatory policies and procedures for access to care

(a) The facility shall comply with applicable Federal, State, and local laws, rules, and regulations.

8:39-9.2 Administrator

(a) The facility shall be directed by an individual who holds a current New Jersey license as a nursing home administrator. The administrator shall be administratively responsible for all aspects of the facility.

1. In a facility with more than 240 beds, in addition to the licensed administrator, there shall be a full-time administrative supervisor who is assigned the evening shift and reports directly to the licensed administrator.

2. In a facility with 100 beds or more, the administrator shall serve full-time in an administrative capacity within the facility.

3. In facilities with fewer than 100 beds, a licensed administrator shall serve at least half-time within the facility.

4. Two facilities may share a common administrator, if such facilities are within a 20-mile radius and if the total number of beds for which both facilities are licensed is no more than 120.

(b) A facility shall not retain in any administrative, managerial, supervisory, or similar position, a nursing home administrator whose license is either suspended or revoked, pursuant to N.J.S.A. 26:2H-27 and 26:2H-28 and N.J.A.C. 8:34-1.1.

(c) When a vacancy exists in the position of administrator for 48 hours or more, the facility shall arrange for licensed administrative supervision on a consultant basis, which shall continue until a new licensed administrator shall be appointed, which shall be within 90 days of the appointment of the consultant.

8:39-9.3 Mandatory policies and procedures for staff

(a) There shall be written policies and procedures for personnel that are reviewed annually, revised as needed, and implemented. They shall include at least:

1. A written job description for each category of personnel in the facility and distribution of a copy to each newly hired employee;

2. Personnel policies in compliance with Federal and State requirements;

3. A system to ensure that written, job-relevant criteria are used in making evaluation, hiring, and promotion decisions;

4. A system to ensure that employees meet ongoing requirements for credentials; and
5. Written criteria for personnel actions that require disciplinary action.

(b) The facility shall make reasonable efforts to ensure that staff providing direct care to residents in the facility are in good physical and mental health, emotionally stable, of good moral character, and are concerned for the safety and well-being of residents; and have not been convicted of a crime relating adversely to the person's ability to provide care, such as homicide, assault, kidnapping, sexual offenses, robbery, and crimes against the family, children or incompetents, except where the applicant or employee with a criminal history has demonstrated his rehabilitation in order to qualify for employment at the facility. ("Reasonable efforts" shall include an inquiry on the employment application, reference checks, and/or criminal background checks where indicated or necessary.)

(c) The facility shall ensure that all private duty nursing staff and contract personnel are monitored and those who do not meet the requirements at (b) above or facility policies and procedures are not permitted to perform services in the facility.

(d) The facility shall develop and implement a grievance procedure for all staff. The procedure shall include, at least, a system for receiving grievances, a specified response time, assurance that grievances are referred appropriately for review, development of resolutions, and follow-up action.

(e) Each staff member shall wear clean clothes and shall use good personal hygiene.

8:39-9.4 Mandatory notification

(a) The administrator shall provide to the owner and/or governing body of the facility a copy of the licensing survey report and any additional survey-related data sent by the Department to the administrator of the facility.

(b) Results of the most recent licensure survey, Federal standard certification conducted by the Department and any plan of correction shall be available for inspection by any resident or visitor, in a readily accessible place, at all times. A notice announcing the availability of those results and all other surveys conducted in the past 12 months shall be conspicuously posted in diverse readily accessible areas of the facility.

(c) The facility shall make all policy and procedure manuals available to residents, families, and guardians during normal business hours or by prior arrangement.

(d) A facility shall notify the Department immediately in writing at such time as it becomes financially insolvent and upon the filing of a voluntary or involuntary petition for bankruptcy under Title 11 of the United States Code.

(e) The facility shall notify the Department immediately by telephone (609-633-8981, or 1-800-7929770 after office hours), followed within 72 hours by written confirmation, of any of the following:

1. Interruption for three or more hours of physical plant services and/or other services essential to the health and safety of residents;

2. Termination of employment of the administrator or the director of nursing, and the name and qualifications of the proposed replacement;
3. All alleged or suspected crimes which endanger the life or safety of residents or employees, which are also reportable to the police department, and which result in an immediate on-site investigation by the police.

i. In addition, the State Office of the Ombudsman for the Institutionalized Elderly (1-877-5826995) shall be immediately notified of any suspected or reported resident abuse, neglect, or exploitation of residents aged 60 or older, pursuant to P.L. 1983 c.43, N.J.S.A. 52:27G-7.1, and the Department shall be immediately notified for residents under the age of 60; and

4. All fires, disasters, deaths, and imminent dangers to a resident's life or health resulting from accidents or incidents in the facility.

(f) The facility shall notify the Department of the admission of any resident under 18 years of age.

SUBCHAPTER 10. ADVISORY ADMINISTRATION

8:39-10.1 Advisory policies and procedures for administration

(a) The administrator monitors trends in staff turnover.

(b) Each of at least five service directors participates in facility planning through preparation of annual budgets and annual reports, and participates in annual budget conferences among all service directors and the administrators.

SUBCHAPTER 13. MANDATORY COMMUNICATION

8:39-13.1 Mandatory communication policies and procedures

(a) Each service shall maintain a current manual of policies and procedures for providing services.

(b) The administrative staff shall retain a written current manual of policies and procedures for the facility as a whole and for each individual service.

(c) The facility shall notify any family promptly of an emergency affecting the health or safety of a resident.

(d) The facility shall notify the attending physician or advanced practice nurse promptly of significant changes in the resident's medical condition.

(e) The facility shall promptly notify a family member, guardian or other designated person about a resident's death.

1. Notification shall be made at the time of the pronouncement of the resident's death, and the time between the pronouncement of the resident's death and notification shall not exceed one hour unless the family member, guardian or other designated person to be contacted provided other instructions as to when the required notification is to occur.

2. The facility shall enter any alternate instructions in the resident's record alongside the contact information.

3. The facility shall maintain confirmation and written documentation of that notification.
4. The facility shall adopt and maintain in its manual of policies and procedures a delineation of the responsibilities of the facility's staff in making such prompt notification regarding the death of a resident as required by this paragraph.

8:39-13.3 Mandatory staff communication qualifications

(a) Staff shall always communicate with residents and families in a respectful way, and shall introduce and identify themselves to residents as required and necessary.

(b) The facility shall ensure that all staff, including staff members not fluent in English, are able to communicate effectively with residents and families.

SUBCHAPTER 14. ADVISORY COMMUNICATION

8:39-14.1 Advisory resident services

...(d) A facility newsletter is provided to residents and families at least quarterly.

(e) Each staff member wears an easily readable name tag.

SUBCHAPTER 45. ALZHEIMER'S/DEMENTIA PROGRAMS

8:39-45.1 Scope and purpose

(a) Long-term care facilities may establish Department approved programs to meet the needs of residents with Alzheimer's disease or other dementias. In addition to meeting all mandatory requirements specified in this chapter, the program shall provide individualized care based upon assessment of the cognitive and functional abilities of Alzheimer's and dementia residents who have been admitted to the program.

(b) No facility shall advertise or hold itself out as providing an Alzheimer's/dementia program unless it meets the data reporting requirements of N.J.S.A. 8:39-45.2 and is recognized by the Department as meeting at least 65 percent of all current advisory standards in N.J.A.C. 8:39-46.

8:39-45.2 Mandatory data reporting requirements

(a) Each facility qualified pursuant to this subchapter to hold itself out as providing an Alzheimer's/dementia program, shall:

1. Compile and maintain daily records for each shift in the facility and provide to a member of the public, upon request, information that indicates for each shift, as appropriate:

   i. The number of nurses, including the aggregate total of registered nurses and licensed practical nurses and licensed practical nurses providing direct care to residents diagnosed with Alzheimer's disease and related disorders; and

   ii. The number of certified nurse aides providing direct care to residents diagnosed with Alzheimer's disease and related disorders; and

2. Provide a member of the public seeking placement of a person diagnosed with Alzheimer's disease and related disorders in the facility with a clear and concise written list that indicates:
i. The activities that are specifically directed towards residents diagnosed with Alzheimer’s disease and related disorders, including, but not limited to, those designed to maintain dignity and personal identity, enhance socialization and success, and accommodate the cognitive and functional ability of a resident;

ii. The frequency of the activities listed in (a)2 above; and

iii. The safety policies and procedures and any security monitoring system that is specific to residents diagnosed with Alzheimer's disease and related disorders.

(b) As used in this section, “Alzheimer’s disease and related disorders” means the conditions defined at N.J.S.A. 26:2M-10(b).

SUBCHAPTER 46. ALZHEIMER’S/DEMENTIA PROGRAMS – ADVISORY STANDARDS

8:39-46.1 Advisory Alzheimer's/dementia program policies and procedures

(a) The long-term care facility has written policies and procedures for the Alzheimer's/dementia program that are retained by the administrative staff and available to all staff and to members of the public, including those participating in the program.

(b) The facility has established criteria for admission to the program and criteria for discharge from the program when the resident's needs can no longer be met, based upon an interdisciplinary assessment of the resident's cognitive and functional status.

8:39-46.2 Advisory staffing

...(b) The facility has established criteria for the determination of each staff member's abilities and qualifications to provide care to residents in the program...