Section 24.0 Nursing Service

24.1 Each facility shall have a formally organized nursing service with an organization chart reflecting the lines of communication. The authority, responsibilities and duties for each nursing service position and/or category shall be clearly delineated in writing through job descriptions.

24.2 The nursing service shall be under the direction of a Director of Nurses who shall be a registered nurse employed full-time. A relief registered nurse shall be employed to insure full-time coverage in the absence (including vacation, sick time, days off, or other) of the designated registered nurse.

a) The Director of Nurses employed full-time in accordance with section 24.2 above shall not be the administrator nor the assistant administrator and shall: (1) have at least two years experience in nursing supervision or, by training and experience, shall have demonstrated competency in nursing service management; (2) be employed by only one facility in said capacity; and (3) be responsible for the total nursing service which shall include no less than:

i. development, maintenance and evaluation of standards of nursing practice;

ii. development and periodic revision of nursing policies and procedure manuals;

iii. recommendation to the facility’s administration of the number and categories of nursing personnel required to provide resident care;

iv. training, assignment, supervision and evaluation of personnel;

v. coordination of nursing care services with other services, e.g., medical, nutrition, etc.; and

vi. all other functions and activities related to nursing service management.

24.3 Each facility shall have a registered nurse on the premises twenty-four (24) hours a day. In addition, the necessary nursing service personnel (licensed and non-licensed) shall be in sufficient numbers on a 24 hour basis, to assess the needs of resident, to develop and implement resident care plans, to provide direct resident care services, and to perform other related activities to maintain the health, safety and welfare of residents.

a) There shall be a master plan of the staffing pattern for providing 24 hour nursing service; for the distribution of nursing personnel for each floor and/or residential area; for the replacement of nursing personnel; and for forecasting future needs. The staffing pattern shall include provisions for nurses, aides, orderlies and other personnel as required.
b) The number and type of nursing personnel shall be based on resident care needs and classifications as determined for each residential area. Each nursing facility shall be responsible to have sufficient qualified staff to meet the needs of the residents.

c) At least one individual who is certified in Basic Life Support must be available twenty-four hours a day (24 hrs./day) within the facility.

Nursing Staff Posting Requirements

24.4 Each facility shall post its daily direct care nurse staff levels by shift in a public place within the facility. The posting shall be accurate to the actual number of direct care nursing staff on duty for each shift per day. The posting shall be in a format similar to that found in Appendix “A” herein to include:

a) the number of registered nurses, licensed practical nurses, nursing assistants, and medication technicians who are not also nursing assistants; b) the number of temporary, outside agency nursing staff; c) the resident census as of 12:00 a.m. d) documentation of the use of unpaid eating assistants (if utilized by the facility on that date).

24.5 The posting information shall be maintained on file by the nursing facility for no less than three (3) years and shall be made available to the public upon request.

24.6 The nursing facility shall prepare an annual report showing the average daily direct care nurse staffing level for the facility by shift and by category of nurse to include registered nurses, licensed practical nurses, nursing assistants and medication technicians; the use of nurse and nursing assistant staff from temporary placement agencies; and the nurse and nurse assistant turnover rates.

24.6.1 The annual report shall be submitted with the facility’s renewal application and provide data for the previous twelve (12) months and ending no earlier than September 30th, for the year preceding the license renewal year or for the partial year available for the 2007 renewal applications. Annual reports shall be submitted in a format similar to that found in Appendix “F” herein.

24.7 The information on nurse staffing shall be reviewed as part of the nursing facility’s annual licensing survey and shall be available to the public, both in printed form and on the Department’s website, by facility.

24.8 The Director of Nurses may act as a charge nurse only when the facility is licensed for 30 beds or less.

24.9 Whenever the licensing agency determines, in the course of inspecting a facility, that additional staffing is necessary on any residential area to provide adequate nursing care and treatment or to ensure the safety of residents, the licensing agency may require the facility to provide such additional staffing and any or all of the following actions shall be taken to enforce compliance with the determination of the licensing agency.
a) The facility shall be cited for a deficiency and shall be required to augment its staff within 10 days in accordance with the determination of the licensing agency.

b) If failure to augment staffing is cited, the facility shall be required to curtail admission to the facility.

c) If a continued failure to augment staffing is cited, the facility shall be subjected to an immediate compliance order to increase the staffing, in accordance with section 23-1-21 of the General Laws of Rhode Island as amended.

d) The sequence and inclusion or non-inclusion of the specific sanctions enumerated in sections above may be modified in accordance with the severity of the deficiency in terms of its impact on the quality of resident care.

24.10 No nursing staff of any facility shall be regularly scheduled for double shifts.