33-07-03.2-07. Governing body.

5. The governing body shall ensure the development and implementation of written resident care policies, procedures, and practices including:

a. Admission or retention policies which ensure:

... (2) Residents are admitted to the facility only by the order of a licensed health care practitioner.

(3) Resident information, including current medical findings, diagnosis, and orders from the licensed health care practitioner for immediate care of the resident are available to the facility prior to or at the time of admission.

(4) Other pertinent information including family history and past medical history is received from the licensed health care practitioner within forty-eight hours of admission.

(5) A physical examination of the resident is performed by the licensed health care practitioner within five days prior to admission or within forty-eight hours after admission, unless the licensed health care practitioner documents the current examination remains accurate.

(6) Each resident in the facility is under the supervision of a licensed health care practitioner.

(a) Licensed health care practitioners shall visit residents as often as medically indicated, but no less frequently than annually.

(b) Orders must be signed by the licensed health care practitioner at the time of each visit.

(c) Progress notes must be written or dictated at the time of each visit and signed within a timeframe as determined by the facility, not to exceed thirty days.

33-07-03.2-13. Medical services.

1. The facility shall have a licensed physician who is specified as the medical director or a medical staff organized under bylaws and rules approved by and responsible to the governing body. The medical director or medical staff shall be responsible for the quality of all
medical care provided to residents and for the ethical and professional practices of its members.

2. The duties and responsibilities of the medical director or medical staff must be delineated in a formal agreement with the governing body.

3. The medical director or medical staff shall be involved in the development of written medical staff policies which are approved by the governing body, which delineate the responsibilities of licensed health care practitioners.

4. The medical director or a member of the medical staff shall participate in the quality improvement and infection control program meetings.

History: Effective July 1, 1996.

General Authority: NDCC 23-01-03, 28-32-02

Law Implemented: NDCC 23-16-01, 28-32-02