Uniform Chart of Accounts
The following account definitions will be used to classify the dollar amounts on the Nursing Facility Financial Statement (NFFS). The account balance is to be reported in whole dollars under the facility gross column on the NFFS and referenced by the providers' chart of accounts number. It is the provider's responsibility to ensure that the balances reported reconcile to their fiscal year statements and general ledger balances with any differences explained on Schedule A to Form SPD 35 or SPD 35A. The provider is responsible for making adjustments to these accounts for non-allowable items and amounts using the adjustment column to arrive at the net allowable balance.
Each adjustment is to be explained on Schedule A to Form SPD 35 or SPD 35A.

(13) DIRECT CARE COMPENSATION -- These accounts include compensation used in providing direct resident services.
(1) 662 -- Compensation -- Social Workers -- This account is for reporting all compensation of social workers and assistants employed to provide social service activities.

Qualifications for Personnel Performing Admission Assessments
(1) Except as provided in section (2) of this rule, all persons performing admission assessments shall meet one of the following criteria:
(a) Be a registered nurse licensed by the State of Oregon;
(b) Have a master of social work degree from an accredited institution of higher education; or
(c) Have a bachelor's degree from an accredited institution of higher education and have experience in gerontology, health care, long-term care, or other relevant human services.

Definitions
(53) "Public or Private Official" means:
(g) Licensed clinical social worker, psychologist, licensed professional counselor, or licensed marriage and family therapist;

Abuse
(2) REPORTERS AND MANDATORY REPORTERS. All persons are encouraged to report abuse and suspected abuse. The following persons are required to immediately report abuse and suspected abuse to The Department or law enforcement agency;
(g) Licensed social worker;

Facility Policies
(1) POLICIES REQUIRED. A Quality Assessment and Assurance Committee must develop and adopt facility policies. The policies must be followed by the facility staff and evaluated annually by the Quality Assessment and Assurance Committee and rewritten as needed. Policies must be adopted regarding:
(j) Social services;

Admission of Residents
(2) Admission Status, Preliminary Care Plan, Preliminary Nursing Assessment:
(c) Social services shall be provided to the resident in accordance with the preliminary resident care plan not later than three days after admission;

411-086-0060

Comprehensive Assessment and Care Plan

(1) Comprehensive Assessment:

(b) Social services, activities and dietary personnel shall complete an assessment within 14 days of admission.

(d) The plan shall be reviewed and completed at an interdisciplinary care planning conference with participation from the resident's RN care manager and personnel from dietary, activities and social services. The resident's attending physician will participate in the development and any revision of the care plan. Physician participation may be in person, through communication with the DNS or RN Care Manager, or via telephone conference;

411-086-0240 Social Services

(Effective 10/01/1993)

(1) SOCIAL SERVICES PROGRAM. A social services program shall be provided which identifies, attains and maintains the highest practicable physical, mental and psychosocial well-being of each resident.

(a) The program shall assist facility staff, family and friends of the resident to help meet the resident's personal and emotional needs.

(b) The facility shall provide space and furnishings for social services which are readily accessible and assure privacy for interviewing, counseling and telephone conversations.

(2) SOCIAL SERVICES DIRECTOR. The facility shall employ a Social Services Director. The Director shall have a written job description which identifies the duties and responsibilities of the position and includes the requirements to be met by this rule.

(a) Qualifications. The Social Services Director shall:

(A) Have a bachelor's or master's degree in behavioral sciences (e.g., human development, psychology, sociology or counseling) with at least one year's experience in a health care setting; or

(B) An associate degree in behavioral sciences with two years' experience in a health care setting; or

(C) Receive regular on-site consultation, no less often than quarterly, from an individual who has a bachelor's or master's degree in social work or a related behavioral science, and one year's experience in a long term care setting working directly with individual residents, and have written procedures for referring residents in need of social services to appropriate resources.

(D) The Social Services Director of a facility with more than 120 beds shall be full-time and shall meet the requirements in either paragraph (2)(a)(A) or (2)(a)(B) of this rule.

(b) Responsibilities. The Social Services Director shall:

(A) Interview residents and family;

(B) Assess the psychosocial and emotional needs of the residents;

(C) Participate in resident care planning conferences and social service in services for facility staff;

(D) Identify and document changes in affect, behavior and personality;

(E) Maintain liaison with community agencies and ensure needed ancillary services are available and provided when requested;

(F) Help ensure that the resident's rights are provided and protected;

(G) Make referrals as needed and document outcomes;
(H) Plan and participate in facility inservice required by OAR 411-086-0310; and
(I) Prepare for resident's discharge as appropriate.
(i) The social services program staff shall educate the resident and the resident's significant others regarding the resident's rights, the resident's potential for discharge and the availability of alternate living services.
(ii) The social services staff shall assess the resident's potential for discharge and the availability of alternate living services no less often than quarterly.
(iii) The social services staff shall assist with the development and coordination of services required to affect the resident's discharge.
(J) Assist the resident in obtaining appropriate prosthetics that will allow for resident's optimal functioning and quality of life.

(3) STAFFING. The facility shall have adequate staffing to carry out the social services program in accordance with facility policy (OAR 411-085-0210).

(4) SOCIAL SERVICES PLAN. Each resident shall have a social services plan incorporated into the comprehensive care plan based on the psychosocial and comprehensive assessments. The social services plan shall be reviewed and updated as frequently as the resident's condition changes, but no less often than quarterly.

(5) DOCUMENTATION. Progress notes relevant to the plan shall be documented in the clinical record as frequently as the resident's condition changes, but no less often than quarterly.

Stats. Implemented: ORS 441.055 & 441.615
411-086-0340 Pets
(Effective 10/01/1990)

(1) PETS ALLOWED. Household pets (dogs, cats, birds, fish, hamsters, etc.) are permitted in the nursing facility under the following conditions:
(a) Pets must be clean and disease-free;
(b) Immediate environment of pets must be kept clean;
(c) Small pets (e.g., birds, hamsters) must be kept in appropriate enclosures;
(d) Pets not confined in enclosures must be hand held, under leash control, or under voice control; and
(e) Pets that are kept at the facility (or are frequent visitors) shall have current vaccinations as recommended by a designated licensed veterinarian (including, but not limited to, rabies).

(2) AREAS PETS PROHIBITED. Pets are not permitted in food preparation or storage areas. Pets shall not be permitted in any area where their presence would create a significant risk or annoyance to residents.

(3) ADMINISTRATIVE CONTROL. The administrator or his/her designee shall determine which pets may be brought into the facility. Family members may bring resident's pets to visit provided they have approval from the administrator and offer reasonable assurance that the pets are clean, disease-free, and vaccinated as appropriate.

(4) OVERNIGHT STAY. Facilities with pets that are kept overnight shall have written policies and procedures for the care, feeding, and housing of such pets and for the proper storage of pet food and supplies.

(5) BIRDS. Facilities with birds shall have procedures which protect residents, staff, and visitors from psittacosis. Procedures should ensure minimum handling of droppings. Droppings shall be placed in a plastic bag for disposal. Persons caring for the bird(s) shall not have nursing care or food handling responsibilities.
(6) EXOTIC PETS PROHIBITED. Exotic pets (i.e., iguanas, snakes, other reptiles, monkeys, ferrets) shall not be kept at the facility. If exotic pets are brought in for a visit, they must be attended at all times by their owners. Skunks, foxes, and raccoons are not permitted in nursing facilities.
Stat. Auth: ORS 410 & 441
Stats. Implemented: ORS 441.055 & 441.615
411-087-0110
Administrative Area

(2) Interview Space. Interview space(s) shall be provided for private interviews relating to social service, credit, and admissions.
853-010-0065
Standards for Nursing Home Administrators
The Board adopts the following standards of practice for nursing home administrators:
(2) Resident Care:
(e) Ensure that the following services are planned, implemented, and evaluated to maximize resident quality of life and quality of care: social services, dietary services, activities, clinical records program, pharmaceutical program, rehabilitation services, auxiliary services, and environmental services.