150.007 Nursing Services

(D) Nursing Care.

...(2) Nursing Care Plan: In facilities that provide Level I, II or III care, the nursing care shall include a comprehensive, nursing care plan for each patient developed by the nursing staff in relation to the patient’s total health needs.

(a) The nursing care plan shall be an organized, written daily plan of care for each patient. It shall include: diagnoses, significant conditions or impairments, medication, treatments, special orders, diet, safety measure, mental condition, bathing and grooming schedules, activities of daily living, the kind and amount of assistance needed, long-term and short-term goals, planned patient teaching programs, encouragement of patient’s interests and desirable activities. It shall indicate what nursing care is needed, how it can best be accomplished, and what methods and approaches are most successful. This information shall be summarized on a cardex and be available for use by all personnel involved in patient care.

(b) The nursing care plan shall be initiated on admission and shall be based on the physician’s or physician-physician assistant team’s or physician-nurse practitioner team’s medical care plan and the nursing assessment of patient needs.

(c) The plan shall be the responsibility of the director or supervisor of nurses and shall be developed in conjunction with the nursing staff and representatives of other health disciplines where appropriate.

(d) All personnel who provide care to a patient shall have a thorough knowledge of the patient’s condition and the nursing care plan.

(e) The plan shall specify priorities of nursing need, which shall be determined through communication with the patient, the physician or physician-physician assistant team or physician-nurse practitioner team, other staff and the family.

(f) The plan shall reflect the patient’s psycho-social needs and ethnic, religious, social, cultural or other preferences.

(g) Nursing care plans shall be reviewed, revised and kept current so that patient care constantly meets patient needs. Plans shall show written evidence of review and revision at least every 30 days in facilities that provide Level I or II care, and every 90 days in facilities that provide Level III care. Reviews of nursing care plans shall be performed in conjunction with reviews of other aspects of the patient’s total health care.

(h) For residents in certified facilities with MR or DD/ORC nursing care plans shall include the carry-over services that integrate all relevant specialized services contained in the resident’s DMR Rolland Integrated Services Plan and Specialized Services Provider plan. The plan shall be developed in conjunction with the resident,
and/or guardian, representatives of DMR or a case manager designated by DMR and the Specialized Service providers, reviewed not less frequently than every three months, annually and at the time of significant change.

(i) Relevant information from the nursing care plan shall be included with other health information when a patient is transferred or discharged.