481—58.20(135C) Duties of health service supervisor. Every nursing facility shall have a health service supervisor who shall:

58.20(1) Direct the implementation of the physician’s orders; (I, II)
58.20(2) Plan for and direct the nursing care, services, treatments, procedures, and other services in order that each resident’s needs and choices, where practicable, are met; (II, III)
58.20(3) Review the health care needs and choices, where practicable, of each resident admitted to the facility and assist the attending physician in planning for the resident’s care; (II, III)
58.20(4) Develop and implement a written health care plan in cooperation with, to the extent practicable, the resident, the resident’s family or the resident’s legal representative, and others in accordance with instructions of the attending physician as follows:
   a. The written health care plan, based on the assessment and reassessment of the resident’s health needs and choices, where practicable, is personalized for the individual resident and indicates care to be given, goals to be accomplished, and methods, approaches, and modifications necessary to achieve best results; (III)
   b. The health service supervisor is responsible for preparing, reviewing, supervising the implementation, and revising the written health care plan; (III)
   c. The health care plan is readily available for use by all personnel caring for the resident; (III)
58.20(5) Initiate preventative and restorative nursing procedures for each resident so as to achieve and maintain the highest possible degree of function, self-care, and independence based on resident choice, where practicable; (II, III)
58.20(6) Supervise health services personnel to ensure they perform the following restorative measures in their daily care of residents:
   a. Maintaining good bodily alignment and proper positioning; (II, III)
   b. Making every effort to keep the resident active except when contraindicated by physician’s orders, and encouraging residents to achieve independence in activities of daily living by teaching self-care, transfer, and ambulation activities; (III)
   c. Assisting residents to adjust to their disabilities, to use their prosthetic devices, and to redirect their interests as necessary; (III)
   d. Assisting residents to carry out prescribed therapy exercises between visits of the therapist; (III)
   e. Assisting residents with routine range of motion exercises; (III)
58.20(7) Plan and conduct nursing staff orientation and in-service programs and provide for training of nurse’s aides; (III)
58.20(8) Plan with the resident and the resident’s physician and family and health-related agencies for the care of the resident upon discharge; (III)
58.20(9) Designate a responsible person to be in charge during absences; (III)
58.20(10) Be responsible for all assignments and work schedules for all health services personnel to ensure that the health needs of the residents are met; (III)
58.20(11) Ensure that all nurse’s notes are descriptive of the care rendered including the resident’s response; (III)
58.20(12) Visit each resident routinely to be knowledgeable of the resident’s current condition; (III)
58.20(13) Evaluate in writing the performance of each individual on the health care staff on at least an annual basis. This evaluation shall be available for review in the facility to the department; (III)
58.20(14) Keep the administrator informed of the resident’s status; (III)
58.20(15) Teach and coordinate rehabilitative health care including activities of daily living, promotion and maintenance of optimal physical and mental functioning; (III)
58.20(16) Supervise serving of meals to ensure that individuals unable to assist themselves are promptly fed and that special eating adaptive devices are available as needed; (II, III)
58.20(17) Make available a nursing procedure manual which shall include all procedures practiced in the facility; (III)
58.20(18) Participate with the administrator in the formulation of written policies and procedures for resident services; (III)
58.20(19) The person in charge shall immediately notify the family of any accident, injury, or adverse change in the resident’s condition requiring physician’s notification. (III)