SUBCHAPTER 23.  MANDATORY MEDICAL SERVICES

8:39-23.1  Mandatory structural organization for medical services

(a) Each facility shall have a medical director who is currently licensed to practice medicine by the New Jersey State Board of Medical Examiners.

1. The medical director shall coordinate medical care and direct the administrative aspects of medical care in the facility.

2. The medical director shall approve all medical care policies and procedures. These policies and procedures shall be followed.

3. The medical director shall participate in the facility's quality assurance program through attendance at meetings, or interviews, and/or preparation or review of reports.

4. The medical director shall be an active participant on the facility's infection control committee, pharmacy and therapeutics committee, and a committee that is responsible for developing policies and procedures for resident care.

5. The medical director shall ensure that for each resident there is a designated primary and an alternate physician who can be contacted when necessary.

6. The medical director shall review all reports of incidents that have been documented in accordance with N.J.A.C. 8:39-9.4(e)4.

7. The medical director, or physicians designated by the medical director, shall respond quickly and effectively to medical emergencies that are not handled by another attending physician, including inpatient admissions.

(b) In facilities providing pediatric care services, the medical director/attending physician shall be board certified, or eligible to be board certified, by the American Board of Pediatrics or American Board of Family Practice.

(c) Facilities with fewer than 60 beds may develop an alternate system of medical direction, if the facility can document that medical staff perform the requirements at (a)1 through 4 above.

8:39-23.2  Mandatory medical services

(a) Each physician or advanced practice nurse order shall be properly entered into the resident's medical record.

(b) Each resident's attending physician or advanced practice nurse shall review the resident's medical record on a scheduled basis to ensure that care plans and medical orders are properly followed.

(c) The facility shall maintain a list of consultant physicians who are available for referrals made by the attending physician and shall make arrangements for referrals to psychological services.

(d) A physician or advanced practice nurse shall visit each resident at least every 30 days unless the medical record contains an explicit justification for not doing so. Following the initial visit, alternate 30-day visits may be delegated by a physician to a New Jersey licensed physician assistant, in accordance with facility policies.
8:39-23.3 Defibrillator

(a) The facility shall maintain at least one defibrillator available to trained staff in a central location.

(b) The facility shall have a written protocol on the use of the defibrillator. The protocol shall address:

1. The testing and maintenance of the defibrillator according to the manufacturer's operational guidelines; and

2. The training of staff in the use of the defibrillator.

(c) The facility shall arrange and pay for the training of a sufficient number of direct-care staff in cardio-pulmonary resuscitation and the proper use of the defibrillator to ensure that at least one direct-care staff member on every shift holds a current certification from the American Red Cross, American Heart Association or other training program recognized by the Department in cardio-pulmonary resuscitation and the use of the defibrillator.

(d) The facility shall notify the appropriate first aid, ambulance or rescue squad or other appropriate emergency medical services provider of the type of defibrillator acquired and its location.
SUBCHAPTER 24. ADVISORY MEDICAL SERVICES

8:39-24.1 Advisory medical staff qualifications

The medical director is board-certified in a primary care specialty, such as family medicine, gerontology, or general internal medicine.

8:39-24.2 Advisory resident medical services

(a) The facility arranges for physician or advanced practice nurse visits in the facility on a scheduled appointment basis in an office provided for that purpose.

(b) The facility has a staff or consultant psychiatrist with admitting privileges to the inpatient psychiatric unit at a hospital.