

MASSACHUSETTS

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150.006: OTHER PROFESSIONAL SERVICES AND DIAGNOSTIC SERVICES

...(C) Podiatric.

(1) All patients and residents shall have proper foot care and foot wear.

(2) When the services of a podiatrist are needed or requested, such services shall be rendered with the knowledge of the attending physician or physician-physician assistant team or physician-nurse practitioner team.

(3) All podiatric services shall be documented and recorded in the clinical record.

(D) Patients and residents shall be assisted to obtain other routine or special services as their needs may require, such as:

(1) Eye examinations and eye glasses.

(2) Auditory testing and hearing aids.

(E) Patients and residents shall be assisted to prepare for and meet appointments punctually at outpatient departments, clinics, physician's offices, etc., when these have been scheduled.

150.007 NURSING SERVICES

...(D) Nursing Care.

(1) Nursing care shall be an integral part of total health care and shall emphasize the promotion of health, the prevention and treatment of disease and disability, and the teaching counseling and emotional support of patients. ...(E) Restorative Nursing Care.

(1) All facilities that provide Level I, II or III care shall provide a program of restorative nursing care as an integral part of overall nursing care. Restorative nursing care shall be designed to assist each patient to achieve or maintain the highest possible degree of function, self-care and independence.

(2) Nursing personnel shall provide restorative nursing services in their daily care of patients.

(3) Restorative nursing services shall include such procedures as:

(a) Maintaining good body alignment, keeping range of motion of weak or paralyzed limbs, proper positioning and support with appropriate equipment -- particularly of bedfast or wheel

chair patients.

(b) Encouraging and assisting bedfast patients to change positions at least every two hours during waking hours (7:00 A.M. to 10:00 P.M.) in order to stimulate circulation, and prevent decubiti and contractures.

(c) Maintaining a program of preventive skin care.

(d) Assisting patients to keep active and out of bed for reasonable periods of time except when contraindicated by physician's or physician-physician assistant team's or physician-nurse practitioner team's orders or the patient's condition.

(e) Maintaining a bowel and bladder training program.

(f) Assisting patients to adjust to any disabilities and to redirect their interests if necessary.

(g) Assisting patients to carry out prescribed physical therapy, occupational therapy and speech, hearing and language therapy exercises between visits by the therapist.

(h) Assisting patients to maintain or restore function and activity through proper general exercises and activities appropriate to their condition.

(i) Assisting and teaching the activities of daily living (such as feeding, dressing, grooming and toilet activities).

(j) Coordinating restorative nursing services with restorative services, activity programs and other patient care services.

(F) Dietary Supervision.

(1) Nursing personnel shall have knowledge of the dietary needs, food and fluid intake and special dietary restrictions of patients and shall see that patients are served diets as prescribed. Patients' acceptance of food shall be observed, and any significant deviation from normal food or fluid intake or refusal of food shall be reported to the nurse in charge and the food service supervisor or dietitian.

(2) Patients requiring assistance in eating shall receive adequate assistance. Help shall be assigned promptly upon receipt of meals, and adaptive self-help devices shall be provided when necessary.

(G) Nursing and Supportive Routines and Practices.

(1) All facilities shall provide sufficient nursing care and supportive care so that each patient or resident:

(a) Receives treatments, medications, diet and other services as prescribed and planned in his medical, nursing, restorative, dietary, social and other care plans.

(b) Receives proper care to prevent decubiti, contractures and immobility.

(c) Is kept comfortable, clean and well groomed.

(d) Is protected from accident and injury through safety plans and measures.

(e) Is treated with kindness and respect.

(2) No medication, treatment or therapeutic diet shall be administered to a patient or resident except on written or oral order of a physician or physician assistant or nurse practitioner.

(3) Nursing personnel and responsible persons shall constantly be alert to the condition and health needs of patients and residents and shall promptly report to the nurse or person in charge any untoward patient conditions or symptomatology such as dehydration, fever, drug reaction or unresponsiveness.

(4) Nursing personnel and responsible persons shall assist patients or residents to dress and prepare for appointments, medical or other examinations, diagnostic tests, special activities and other events outside the facility.

(5) The following personal care routines shall be provided by all facilities as a part of the patient's or resident's general care and well-being.

(a) A tub bath, shower or full-bed bath as desired or required, but at least weekly. In a SNCFC or INCFC, a bath or shower daily.

(b) Bed linen changed as required, but at least weekly.

(c) Procedures to keep incontinent patients clean and dry.

(d) Frequent observation of bedfast patients for skin lesions and special care for all pressure areas.

(e) Daily ambulation or such movement as condition permits (as ordered by the physician or physician assistant or nurse practitioner).

(f) A range of recreational activities.

(g) Provision for daily shaving of men.

(h) Provision for haircuts for men at least monthly.

(i) Hair shampoos at least once every two weeks.

(j) Daily oral hygiene and dentures or teeth cleaned morning and night.

(k) Foot care sufficient to keep feet clean and nails trimmed.

(l) Appropriate, clean clothing that is properly mended, appropriate to the time of day and season, whether indoors or outdoors. No clothing of highly flammable fabrics shall be permitted.

(m) An attendant for walks and other such activities, when necessary, to safeguard ambulatory patients or residents.

(H) Nursing Review and Notes. Each patient's condition shall be reviewed with special notation of any untoward event, change in condition, nursing or other services provided and the patient's response or progress.

(1) In facilities that provide Level II care each patient shall be reviewed by the nursing personnel going off duty with the nursing personnel coming on duty at each change of shift. At minimum a weekly progress note shall be recorded in each patient's record unless the patient's condition warrants more frequent notations; the weekly progress note documentation shall be performed by a licensed nurse.

(2) In facilities that provide Level III care, each resident's general condition shall be reviewed each morning. Significant changes of findings shall be noted in the clinical record and the attending physician or physician-physician assistant team or physician-nurse practitioner team notified with a written notation or the time and date of notification. A note summarizing the resident's condition shall be written monthly in the clinical record.

150.008: PHARMACEUTICAL SERVICES AND MEDICATIONS

...(C) Supervision and administration of medication shall be as follows:

...(7) Medication errors and drug reactions shall be reported to the patient's or resident's physician and recorded in the clinical record.

150.015: PATIENT COMFORT, SAFETY, ACCOMMODATIONS AND EQUIPMENT

(A) All facilities shall provide for the comfort, safety and mental and physical well-being of patients or residents.

(1) The types and amounts of personal services, assistance in daily activities, protection and accommodations needed by each patient or resident shall be recorded and known to all staff attending that person.

(2) Patients' and residents' personal needs shall be evaluated periodically and appropriate modifications made in services, protective measures and accommodations.

(3) All facilities shall be prohibited from applying any Aversive Interventions to a patient or resident.

...(C) Safety and Personal Protection.

(1) At all times a responsible staff member shall be on duty and immediately accessible, to whom patients or residents can report injuries, symptoms of illness, emergencies, any other discomfort or complaint, and who is responsible for ensuring that prompt, appropriate action is taken.

...(3) There shall be a signal system or a hand bell at each patient's bedside, in sitting rooms, in bathrooms, in shower and tub rooms and in all other patient areas. The method used for signaling shall be approved by the Department.

(4) Grip bars, properly placed, shall be in all bathrooms, toilets, tub rooms and showers.

(5) Non-skid wax shall be used on all waxed floors. Throw rugs or scatter rugs shall not be used. Non-slip entrance mats may be used. Non-skid treads shall be used on stairs.

(6) Bedrails shall be provided as needed for restless patients.

... (8) Facilities that provide only Level IV care shall provide a first-aid kit in a convenient place. The contents of the kit shall be in accordance with the recommendations of the American Red Cross.

(9) A check-out system shall be maintained for patients or residents leaving the facility. The patient's or resident's name, the destination, the name of the person assuming responsibility, the time of departure, and the estimated time of return shall be recorded.

(10) There shall be at least one functioning telephone on each floor or in each unit where patients, residents or personnel reside. These telephones shall be free of locks and shall be available for use in emergency for both incoming and outgoing calls. In addition, all facilities shall provide at least one telephone for patient or resident use, which may be coin operated, that is located so as to assure privacy during use; is a single line without an extension; is placed and positioned at a height so that the equipment is fully accessible to individuals in wheelchairs; is equipped with sound amplification for those with hearing disabilities and so identified with instructions for use. For existing facilities, the Division may grant a waiver of 105 CMR 150.015(C)(10) if it is demonstrated that enforcement would result in unreasonable hardship upon the facility. All facilities shall comply with the provisions of 105 CMR 150.015(C)(10) by December 23, 1983 except that if the facility demonstrates that major structural changes are necessary, compliance shall be achieved by June 23, 1984.

(11) Light switches shall be located adjacent to doors of all patient or resident rooms and all bathrooms.

(12) All hospital beds shall have brakes set and all wheelchairs shall be equipped with brakes.

...(G) Patients' and Residents' Equipment and Supplies.

(1) Equipment and supplies appropriate in quantity and kind shall be provided for the routine care, comfort and special nursing care of patients or residents.

(2) All equipment and supplies shall be kept in good working condition and in a clean and sanitary manner.

(3) All facilities shall use techniques approved by the Department to autoclave, sterilize, disinfect or dispose of equipment and supplies.

(4) Every patient or resident shall be provided with the following basic equipment and supplies:

... tooth brush and dentifrice, containers for the care of patients' or residents' dentures, an individual comb and brush, soap dish, bar of soap, shaving equipment, individual sputum containers (when needed), and other equipment for personal care.

(5) Other Patient or Resident Equipment that shall be provided:

...(f) An adequate number of commode chairs, wheelchairs, walkers, foot soak basins, foot boards, cradles, armboards, and other such equipment to meet patient or resident needs.

(6) The following equipment and supplies shall be readily available as needed for the administration of medications, the performance of treatments, or other use. Items marked with an asterisk shall be disposable (single use) or sterilized by autoclave.

*Syringes and needles

*Instruments

Glassware

* Rubber goods

Thermometers (rectal and oral)

* Enema Equipment

Stethoscope

Blood pressure apparatus

Tourniquets

Flash Lights

Mouth bites

A standard scale for weighing

*Catheters and catheterization equipment

* Suction equipment

I.V. poles

Sand bags, wheelchairs, walkers, foot boards, cradles, armboards and other such equipment.

(7) All equipment used for personal care of more than one individual, such as electric shavers, shall be thoroughly cleaned after each use.

(8) All facilities shall provide adequate space, equipment and procedures for the proper disinfection of beds, springs, mattresses and bed pillows and for the proper sterilization of equipment as needed.