

## NEBRASKA

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**12-006.09** Care and Treatment: The facility is responsible for ensuring the physical, mental and psychosocial needs of all residents are met in accordance with each resident's individualized needs and physician orders.

...**12-006.09A2** Retention of Residents: The facility must continue to provide care and treatment to residents as long as the facility can continue to meet the identified needs for care, treatment, and supervision, and other issues related to providing care and treatment.

**12-006.09D** Provision of Care and Treatment: The facility must provide the necessary care and treatment to permit achievement and maintenance of optimal mental, physical, and psychosocial functional status and independence in accordance with the comprehensive assessment and plan of care for each resident.

**12-006.09D1** Resident Abilities: The facility must ensure care and treatment is provided to improve or maintain a resident's abilities when the resident is capable of some level of independence in performing these abilities. When the resident is not capable of independent functioning, the facility must be responsible for provision of these cares.

**12-006.09D1a** Diminished Abilities: The facility must ensure a resident receives the appropriate standards of care and treatment to prevent a diminution of the resident's abilities unless circumstances of the individual's medical condition demonstrates the diminution was unavoidable. This includes the resident's ability to:

1. Bathe, dress and groom;
2. Transfer and ambulate;
3. Toilet;
4. Eat; and
5. Use speech, language, or other functional communication systems.

**12-006.09D1b** Maintenance or Improvement in Abilities: The facility must ensure a resident is given the appropriate standards of care and treatment to maintain or improve his abilities as described in 006.09D1a.

**12-006.09D1c** Inability to Self-Perform: The facility must ensure a resident who is unable to carry out activities of daily living receives the appropriate standards of care and treatment to maintain good nutrition, grooming, and personal and oral hygiene.

**12-006.09D1d** Vision and Hearing: The facility must ensure that residents receive appropriate standards of care and treatment and assistive devices to maintain vision and hearing abilities. The facility must, if necessary, assist the resident in:

1. Making appointments, and
2. Arranging for transportation to and from the office of a practitioner/professional specializing in hearing and vision and/or provision of vision or hearing assistive devices.

**12-006.09D2** Skin Integrity: The facility must ensure that a resident receives appropriate standards of care and treatment to maintain or improve skin integrity.

**12-006.09D2a** Prevent Pressure Sores: The facility must identify and implement appropriate standards of care and treatment to prevent a resident who enters the facility without a pressure sore from developing pressure sores unless the individual's clinical condition demonstrates that they were unavoidable.

**12-006.09D2b** Promote Healing: The facility must identify and implement standards of care and treatment for each resident with a pressure sore to promote healing, prevent infection and prevent other areas from occurring.

**12-006.09D2c** Other Open Areas: The facility must identify and implement standards of care and treatment to prevent a resident from developing skin excoriation, skin tears, other open areas unless the individual's condition demonstrates that they were unavoidable.

**12-006.09D3** Urinary/Bowel Function: The facility must identify and implement standards of care and treatment for residents who have or are at risk for elimination problems. Care and treatment must be provided to:

1. Prevent urinary tract infection;
2. Restore bladder/bowel function unless the resident's condition demonstrates that the loss in bladder/bowel function is unavoidable;
3. Keep residents free of odors not caused by a clinical condition;
4. Keep residents free from skin breakdown related to bladder or bowel incontinence;
5. Keep residents free of fecal impactions and signs of discomfort from bowel constipation; and
6. Ensure a resident who enters the facility without an indwelling catheter does not receive an indwelling catheter unless the resident's clinical condition demonstrates that catheterization was necessary.

**12-006.09D4** Range of Motion: The facility must identify and implement standards of care and treatment to improve or maintain each resident's range of motion unless the resident's clinical condition demonstrates a decline in range of motion was unavoidable.

**12-006.09D5** Mental and Psychosocial Functioning: The facility must identify and implement appropriate standards of care and treatment to promote each resident's mental and psychosocial functioning.

**12-006.09D5a** Social Service Support: The facility must identify and implement methods to assist the resident in meeting treatment goals, address resident needs, and provide social service support in meeting each resident's needs and individuality including but not limited to:

1. Decreased social interaction; or
2. Increased withdrawn, angry or depressive behaviors.

**12-006.09D5b** Provision of Activities: The facility must identify and provide for daily activities to stimulate and promote the physical, spiritual, social, emotional, and intellectual well-being of each resident.

The activity program must promote the resident's self-respect, self-expression, and choice.

**12-006.09D6** Special Needs: The facility must identify and implement standards of care and treatment to prevent complications, infections, discomfort, and skin excoriations to residents receiving the following special services:

1. Gastric tubes;
2. Colostomy, ureterostomy, or ileostomy care;
3. Parenteral and enteral fluids;
4. Injections;
5. Tracheostomy care;
6. Tracheal suctioning;
7. Respiratory care;
8. Foot care; and
9. Prostheses.

**12-006.09D7** Accidents: The facility must identify and implement standards of care and treatment to prevent resident accidents.

12-006.09D7a The facility's environment must be free from hazards over which the facility has control.

**12-006.09D7b** The facility must establish and implement policies and procedures which address:

1. Investigation, including documentation of the accidents to include identification and evaluation of individual resident causal factors;
2. Method for tracking and identification of trends;
3. Development of interventions to prevent the accident from recurring; and,
4. Reevaluation of the effectiveness of the interventions.

**12-006.09D8 Nutrition:** The facility must identify and implement standards of care and treatment to maintain nutritional status of each resident. This includes:

**12-006.09D8a Food Service:** The facility must provide each resident with a nourishing, palatable, well-balanced diet that meets the daily nutritional and special dietary needs of each resident. In the event that a facility contracts for the services of an outside food service management company, the facility remains responsible for compliance with the applicable regulations.

**12-006.09D8b Unplanned Weight Loss:** The facility must ensure that residents do not incur an unplanned significant weight loss or other indicator of malnourishment unless the resident's clinical condition demonstrates that this is not possible.

**12-006.09D8b1** The facility must evaluate current height and weight status. Each resident must have a recorded weight no less than monthly with follow-up on unexplained gains and losses.

Alternative methods of anthropometric assessment may be used.

**12-006.09D8c Assistive Devices:** The facility must provide special eating equipment and utensils for residents who need them.

**12-006.09D9 Hydration:** The facility must provide each resident with sufficient fluid intake to maintain proper hydration and health.

**...12-006.10D Medication Errors:** The facility must ensure that it is free of medication error rates of 5% or greater, and residents are free of any significant medication errors.

**12-006.10D1** The facility must have a method of recording, reporting, and reviewing medication administration errors. All medication administration errors must be reported to the prescribing medical practitioner in accordance with standards of care.

**12-006.10E** The facility must have policies and procedures for reporting any adverse reaction to a medication as in accordance with standards of care, to the resident's medical practitioner and for documenting such event in the resident's medical record.

**12-006.18B1 Equipment:** The facility must provide equipment adequate for meeting resident needs as specified in each resident's care plan.