

District of Columbia

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3229 SOCIAL SERVICES

3229.1 The facility shall provide social services to attain and maintain the highest practicable physical, mental, and psychosocial well-being of each resident.

3229.2 A nursing facility with more than 120 beds shall employ a full-time social worker who is licensed in the District of Columbia pursuant to the District of Columbia Health Occupations Revision Act of 1985, effective March 25, 1986, D.C. Law 6-99, D.C. Code § 2-3301 et seq.

3229.3 The facility shall meet the social services needs of its residents by either obtaining social services from an outside source or by furnishing the service directly.

3229.4 In conjunction with the resident's admission, stay, and discharge, the functions of the social services program shall include the following:

- (a) Direct service, including therapeutic interventions, casework and group work services to residents, families and other persons considered necessary by the social worker;
- (b) Advocacy on behalf of residents;
- (c) Discharge planning;
- (d) Community liaison and services;
- (e) Consultation with other members of the facility's Interdisciplinary Care Team;
- (f) Safeguarding the confidentiality of social service records; and
- (g) Annual in-service training to other staff of the facility on subjects including, but not limited to, resident's rights, psychosocial aspects of aging and confidentiality.

3229.5 The social assessment and evaluation, plan of care and progress notes, including changes in the resident's social condition, shall be incorporated in each resident's medical record, reviewed quarterly, and revised as necessary.

3229.6 Each facility shall provide space which ensures visual and auditory privacy for social service interviews with residents.

3299. DEFINITIONS.

Interdisciplinary care team - all facility personnel involved in the care of a resident, including medical, nursing, social services, dietary, therapeutic activities, rehabilitation services and others involved as necessary.