

.09 Resident Care Policies.

A. Written Policies. Comprehensive care facilities and extended care facilities shall develop written policies, consistent with these regulations, to govern the nursing care and related medical or other services they provide covering the following:

(1) Admission, transfer, and discharge policies including categories of patients accepted and not accepted by the facility, or those who are required to transfer to another level of care. The facility's admission policy shall include a statement as to whether or not medical assistance patients will be admitted and if admitted, under what circumstances.

(2) Physician services.

(3) Patients' rights.

(4) Nursing services.

(5) Dietetic services.

(6) Specialized rehabilitative services—occupational therapy services, physical therapy services, speech pathology and audiology services.

(7) Pharmaceutical services.

(8) Laboratory and radiologic services.

(9) Dental services.

(10) Social services.

(11) Patient activities.

(12) Clinical records.

(13) Reports and action required in unusual circumstances.

(14) Utilization review.

(15) Infection control.

(16) Tuberculosis Surveillance. All comprehensive care facilities and extended care facilities shall have written policies and procedures, acceptable to the Department, for tuberculosis surveillance of all residents. See Regulation .21G of this chapter for tuberculosis surveillance requirements.

(17) Disaster plan.

(18) Housekeeping services, pest control, and laundry.

(19) Patient care management.

B. The patient care policies shall be developed with the advice of the principal physician (or medical staff or medical director, if applicable), and at least one registered nurse. Policies shall be reviewed at least annually by a group of professional personnel including one or more physicians and one or more registered nurses. Written policies shall be kept current with the policies used to administer the facility. For reference purposes, copies of the patient care policies shall be readily available to all personnel responsible for patient care.

C. Policies and Procedures.

(1) Upon the request of the Secretary or the Secretary's designee, the facility's policies and procedures shall be made available to the Secretary for onsite review.

(2) The licensee shall submit to the Department any significant substantive changes to the policies and procedures which have occurred since review of the policies and procedures within 2 weeks of implementation of the changes.

D. Use of Protective Device or Devices.

(1) A written physician's order is required for the use of a protective device or devices. This order shall be in effect for a maximum of 60 days. If continuation of the use of a protective device or devices beyond 60 days is necessary, a new order shall be written by the physician and rewritten every 60 days.

(2) The physician's order shall contain the specific type of protective device or devices to be used.

(3) The physician's order shall reflect his or her reason for ordering a protective device or devices.

(4) A patient in a protective device or devices shall be observed periodically by personnel, to insure that the patient's health needs are met.

(5) A patient who is in a protective device or devices may not be left in the same postural position for more than 2 consecutive hours.