

33-07-03.2-26. Secured units.

Secured units, such as those designed for residents with Alzheimer's disease or other dementias, must comply with the following:

1. Prior to admission or within seven days of admission, a multidisciplinary team shall evaluate the appropriateness of a resident's placement in a secured unit. The multidisciplinary team shall, at a minimum, consist of a registered nurse and a licensed social worker who will be providing service to the resident in the secured unit, the resident's licensed health care practitioner, and the resident or the individual who has legal status to act on behalf of the resident;
2. Licensed health care practitioner orders for placement in a secured unit must be documented in the resident's record and must be reviewed during the licensed health care practitioner's regular visits;
3. Placement in a secured unit may not be used as a punishment or for the convenience of the staff; and
4. A resident in a secured unit shall have access to the same services as other residents in the facility including provisions for routine and ongoing access to the outdoors as appropriate based on the resident's past history, personal preferences, and current condition.

History: Effective July 1, 1996.

General Authority: NDCC 23-01-03, 28-32-02

Law Implemented: NDCC 23-16-01, 28-32-02