

CHAPTER 44:04:06

NURSING AND RELATED CARE SERVICES

Section

44:04:06:01	Nursing service for hospitals and nursing facilities.
44:04:06:02	Organized nursing service.
44:04:06:03	Director of nursing service.
44:04:06:04	Nursing policies and procedures.
44:04:06:05	Patient or resident care plans and programs.
44:04:06:06 to 44:04:06:07	Repealed.
44:04:06:08	Nursing service staffing for hospitals.
44:04:06:09	Nursing service staffing for nursing facilities.
44:04:06:10	Repealed.
44:04:06:11	Resident care for assisted living center.
44:04:06:11.01	Intermittent nursing care.
44:04:06:12	Transferred.
44:04:06:13	Hospice services.
44:04:06:14	Repealed.
44:04:06:15	Resident assessments.
44:04:06:16	Resident assessment reviews.
44:04:06:17	Nursing service staffing for hospice facilities.

44:04:06:01. Nursing service for hospitals and nursing facilities. All hospitals and nursing facilities must comply with §§ 44:04:06:02 to 44:04:06:05, inclusive.

Source: SL 1975, ch 16, § 1; 6 SDR 93, effective July 1, 1980; 14 SDR 81, effective December 10, 1987; 22 SDR 70, effective November 19, 1995.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.

44:04:06:02. Organized nursing service. There shall be an organized nursing service with a written organizational plan that delineates its functional structure.

Source: SL 1975, ch 16, § 1; 6 SDR 93, effective July 1, 1980; 14 SDR 81, effective December 10, 1987; 22 SDR 70, effective November 19, 1995.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.

44:04:06:03. Director of nursing service. There must be a full-time registered nurse designated as the director of nursing service who is responsible for the organization of the total nursing service and who serves during the day shift. The director may not serve in a dual role as the administrator of the facility and the director of nursing.

Source: SL 1975, ch 16, § 1; 6 SDR 93, effective July 1, 1980; 14 SDR 81, effective December 10, 1987; 17 SDR 122, February 24, 1991; 22 SDR 70, effective November 22, 1995.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.

44:04:06:04. Nursing policies and procedures. Policies and procedures that provide the nursing staff with methods of meeting its administrative and technical responsibilities in providing care to patients or residents must be established and maintained. The policies must include at least the following:

- (1) The noting of diagnostic and therapeutic orders;
- (2) Assigning the nursing care of patients or residents;
- (3) Administration and control of medications;
- (4) Charting by nursing personnel;
- (5) Infection control;
- (6) Patient or resident safety; and
- (7) Delineation of orders from nonphysician practitioners.

Source: SL 1975, ch 16, § 1; 6 SDR 93, effective July 1, 1980; 14 SDR 81, effective December 10, 1987; 22 SDR 70, effective November 19, 1995; 30 SDR 84, effective December 4, 2003.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.

44:04:06:05. Patient or resident care plans and programs. The nursing service of a health care facility must provide safe and effective care from the day of admission through the ongoing development and implementation of written care plans for each patient or resident. The care plan must address medical, physical, mental, and emotional needs of the patient or resident. The health care facility must establish and implement procedures for assessment and management of symptoms including pain.

The care plan for nursing facility residents must be based on the resident assessments required in §§ 44:04:06:15 and 44:04:06:16 and must be developed and approved by the resident's physician; the resident, the resident's family, or the resident's legal representative; the interdisciplinary team consisting of at least a licensed nurse, the facility's social worker or social service designee, the dietary manager or dietitian, the activities coordinator, and other staff in disciplines determined by the resident's needs. The care plan shall describe the services necessary to meet the resident's medical, physical, mental or cognitive, nursing, and psychosocial needs and shall contain objectives and timetables to attain and maintain the highest level of functioning of the resident. The care plan must be completed within seven days after the completion of each resident assessment required in §§ 44:04:06:15 and 44:04:06:16.

Each nursing facility must provide restorative care services to meet resident needs.

Source: SL 1975, ch 16, § 1; 4 SDR 14, effective September 14, 1977; 6 SDR 93, effective July 1, 1980; 14 SDR 81, effective December 10, 1987; 17 SDR 122, effective February 24, 1991; 22 SDR 70, effective November 19, 1995; 26 SDR 96, effective January 23, 2000; 28 SDR 83, effective December 16, 2001.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.

Cross-Reference: Record content, § 44:04:09:05(4).

44:04:06:06. Nursing care quality assurance. Repealed.

Source: SL 1975, ch 16, § 1; 6 SDR 93, effective July 1, 1980; 14 SDR 81, effective December 10, 1987; 17 SDR 122, effective February 24, 1991; repealed, 22 SDR 70, effective November 19, 1995.

44:04:06:06.01. Nursing home quality assessment and assurance committee. Repealed.

Source: 17 SDR 122, effective February 24, 1991; repealed, 22 SDR 70, effective November 19, 1995.

44:04:06:07. Special duty nurses. Repealed.

Source: SL 1975, ch 16, § 1; 6 SDR 93, effective July 1, 1980; 14 SDR 81, effective December 10, 1987; repealed, 22 SDR 70, effective November 19, 1995.

44:04:06:08. Nursing service staffing for hospitals. All hospitals must maintain a sufficient number of registered nurses and other qualified nursing personnel on duty at all times to provide supervision of and nursing care for all patients. A registered nurse must be designated as charge nurse for each nursing care unit at all times except that a critical access hospital is required to staff with a registered nurse only when there are acute care patients present. A critical access hospital is required to staff with a licensed nurse when there are only swing bed patients present. Written staffing patterns must be developed for each patient care unit, including surgical and obstetrical suites, emergency services, special care units, and other services. Registered nurses must be in charge of the operating room, function as supervisory nurse in the operating room, be in attendance at all deliveries of obstetrical patients, supervise obstetrical nursing service, and supervise the nursing care of newborn infants.

Source: SL 1975, ch 16, § 1; 6 SDR 93, effective July 1, 1980; 14 SDR 81, effective December 10, 1987; 22 SDR 70, effective November 19, 1995; 26 SDR 96, effective January 23, 2000.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.

44:04:06:09. Nursing service staffing for nursing facilities. Each nursing facility must maintain a licensed nurse in charge of nursing activities during each tour of duty. The director of nursing may not serve as charge nurse in a nursing facility with an average daily occupancy of 60 or more residents. Adequate staff must be provided to meet the resident's total care needs at all times. The ratio of registered and licensed practical nurses to aides and orderlies must be sufficient to assure professional guidance and supervision in the nursing care of the patients.

Source: SL 1975, ch 16, § 1; 6 SDR 93, effective July 1, 1980; 14 SDR 81, effective December 10, 1987; 22 SDR 70, effective November 19, 1995; 31 SDR 62, effective November 7, 2004.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.

44:04:06:10. Nursing service staffing for intermediate care facilities. Repealed.

Source: SL 1975, ch 16, § 1; 4 SDR 14, effective September 14, 1977; 6 SDR 93, effective July 1, 1980; 14 SDR 81, effective December 10, 1987; repealed, 20 SDR 70, effective November 19, 1995.

44:04:06:11. Resident care for assisted living center. All assisted living centers must maintain one staff person on duty at all times and a minimum of 0.8 hours of direct resident care by personnel of the center for each resident for each 24-hour period. Each resident must receive daily care by facility personnel as needed to keep skin, nails, hair, mouth, clothing, and body clean and healthy. The facility must provide linens, equipment, and supplies for personal care and for other activities of daily living commensurate with the needs of the resident served. Outside services utilized by residents must comply with and complement facility care policies. The facility must have documentation that assures that the individual needs of residents are identified and addressed.

Source: SL 1975, ch 16, § 1; 6 SDR 93, effective July 1, 1980; 14 SDR 81, effective December 10, 1987; 22 SDR 70, effective November 19, 1995; 26 SDR 96, effective January 23, 2000.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.

44:04:06:11.01. Intermittent nursing care. Skilled nursing services or rehabilitation services provided to residents of assisted living centers must be limited to less than eight hours per day and 28 or fewer hours each week. The service providing the care must specify a planned completion date based on the assessments conducted. An unlicensed employee of a licensed facility may not accept any delegated skilled tasks from any nonemployed, noncontracted skilled nursing and therapy providers pursuant to SDCL chapters 36-9, 36-10, and 36-31.

Source: 26 SDR 96, effective January 23, 2000; 28 SDR 83, effective December 16, 2001.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.

44:04:06:12. Transferred to § 44:04:12:05.

44:04:06:13. Hospice services. Each facility offering hospice services must provide services to terminally ill individuals or arrange for such services by a hospice program under a written plan established and periodically reviewed by the individual's attending physician. The hospice agency must provide for care and services in the licensed facility, the individual's home, on an outpatient basis, or on a short-term inpatient basis. Personnel providing hospice care must include at least one physician, one registered nurse, and one social worker. An unlicensed employee of a licensed facility may not accept any delegated skilled tasks from any hospice providers pursuant to SDCL chapter 36-9.

Source: 14 SDR 81, effective December 10, 1987; 22 SDR 70, effective November 19, 1995; 26 SDR 96, effective January 23, 2000; 28 SDR 83, effective December 16, 2001.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.

44:04:06:14. Distinct part staff. Repealed.

Source: 14 SDR 81, effective December 10, 1987; 15 SDR 155, effective April 20, 1989; repealed, 22 SDR 70, effective November 19, 1995.

44:04:06:15. Resident assessments. Each nursing facility must make a comprehensive assessment of the functional, medical, mental, nursing, and psychosocial needs of each resident within 14 calendar days after the date of admission.

The facility must use the resident assessment instrument described in the Long Term Care Resident Assessment Instrument User's Manual or an instrument substantially equivalent as determined by the department.

The resident assessment must be completed with participation of the interdisciplinary team, the resident, and the resident's family or legal representative.

A registered nurse must conduct or coordinate the completion of the resident assessment process. The registered nurse must receive resident assessment instrument training provided or approved by the department and the Department of Social Services.

The facility must ensure that staff who participate in the assessment process are trained to complete an accurate and comprehensive assessment. Each individual who completes a portion of the resident assessment instrument must sign that portion of the assessment and certify to its accuracy.

Source: 17 SDR 122, effective February 24, 1991, and April 1, 1991; transferred from § 44:04:04:13, 22 SDR 70, effective November 19, 1995; 26 SDR 96, effective January 23, 2000; 29 SDR 81, effective December 11, 2002.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.

Reference: Long Term Care Resident Assessment Instrument User's Manual, Version 2.0, October 1995. Copies may be obtained from Briggs Corporation. Phone: 1-800-247-2243. Cost: \$29.95.

44:04:06:16. Resident assessment reviews. A nursing facility must periodically reassess each resident by conducting a resident assessment review that meets the requirements in § 44:04:06:15. Resident assessment reviews must be completed on the following schedule:

- (1) Every 90 days after the date of admission or significant change;
- (2) Within 14 days after the determination of a significant change by the interdisciplinary team. A significant change determination may be considered if there is a deterioration in physical functioning; in cognition, behavior, mood, or relationships; or other deterioration in health indicating an interdisciplinary review and revision of the care plan is necessary; and
- (3) Within 14 days after a marked or sudden improvement in the resident's health.

Source: 17 SDR 122, effective February 24, 1991; transferred from § 44:04:04:14, 22 SDR 70, effective November 19, 1995; 26 SDR 96, effective January 23, 2000; 30 SDR 84, effective December 4, 2003.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.

44:04:06:17. Nursing service staffing for hospice facilities. All licensed hospice facilities must maintain a sufficient number of registered nurses and other qualified personnel, directly or by contract, to provide supervision of care for all residents. A registered nurse must be designated as charge nurse and responsible for the overall care of the residents. Written staffing patterns must be developed including instructions for contacting support service personnel. All hospice staff must have been specifically trained to provide care for the terminally ill.

Source: 22 SDR 70, effective November 19, 1995; 26 SDR 96, effective January 23, 2000.

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13.