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Topic R432@ Health

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Title R432-150@ Health Care Facility Licensing

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Section R432-150-15@ Quality of Care

## **R432-150-15 Quality of Care**

### **(1)**

The facility must provide to each resident, the necessary care and services to attain or maintain the highest practicable physical, mental, and psycho-social well-being, in accordance with the comprehensive assessment and care plan. (a) Necessary care and services include the resident's ability to: (i) bathe, dress, and groom; (ii) transfer and ambulate; (iii) use the toilet; (iv) eat; and (v) use speech, language, or other functional communication systems. (b) Based on the resident's comprehensive assessment, the facility must ensure that: (i) each resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition demonstrates that diminution was unavoidable; (ii) each resident is given the treatment and services to maintain or improve his abilities; and (iii) a resident who is unable to carry out these functions receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene.

#### **(a)**

Necessary care and services include the resident's ability to: (i) bathe, dress, and groom; (ii) transfer and ambulate; (iii) use the toilet; (iv) eat; and (v) use speech, language, or other functional communication systems.

#### **(i)**

bathe, dress, and groom;

**(ii)**

transfer and ambulate;

**(iii)**

use the toilet;

**(iv)**

eat; and

**(v)**

use speech, language, or other functional communication systems.

**(b)**

Based on the resident's comprehensive assessment, the facility must ensure that: (i) each resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition demonstrates that diminution was unavoidable; (ii) each resident is given the treatment and services to maintain or improve his abilities; and (iii) a resident who is unable to carry out these functions receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene.

**(i)**

each resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition demonstrates that diminution was unavoidable;

**(ii)**

each resident is given the treatment and services to maintain or improve his abilities; and

**(iii)**

a resident who is unable to carry out these functions receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene.

**(2)**

The facility must assist residents in scheduling appointments and arranging transportation for vision and hearing care as needed.

**(3)**

The facility's comprehensive assessment of a resident must include an assessment of pressure sores. The facility must ensure that: (a) a resident who enters the facility without pressure sores does not develop pressure sores unless the individual's clinical condition demonstrates that they were unavoidable; and (b) a resident having pressure sores receives the necessary treatment and services to promote healing, prevent infection, and prevent new sores from developing.

**(a)**

a resident who enters the facility without pressure sores does not develop pressure sores unless the individual's clinical condition demonstrates that they were unavoidable; and

**(b)**

a resident having pressure sores receives the necessary treatment and services to promote healing, prevent infection, and prevent new sores from developing.

**(4)**

The facility's comprehensive assessment of the resident must include an assessment of incontinence. The facility must ensure that: (a) a resident who is incontinent of either bowel or bladder, or both, receives the treatment and services to restore as much normal functioning as possible; (b) a resident who enters the facility without an indwelling catheter is not catheterized unless the resident's clinical condition demonstrates that catheterization is necessary; (c) a resident who is incontinent of bladder receives appropriate treatment and services to prevent urinary tract infections; and (d) a licensed nurse must complete a written assessment to determine the resident's ability to participate in a bowel and bladder management program.

**(a)**

a resident who is incontinent of either bowel or bladder, or both, receives the treatment and services to restore as much normal functioning as possible;

**(b)**

a resident who enters the facility without an indwelling catheter is not catheterized unless the resident's clinical condition demonstrates that catheterization is necessary;

**(c)**

a resident who is incontinent of bladder receives appropriate treatment and services to prevent urinary tract infections; and

**(d)**

a licensed nurse must complete a written assessment to determine the resident's ability to participate in a bowel and bladder management program.

**(5)**

The facility must assess each resident to ensure that: (a) a resident who enters the facility without a limited range of motion does not experience reduction in range of motion unless the resident's clinical condition demonstrates that a reduction in range of motion is unavoidable; and (b) a resident with a limited range of motion receives treatment and services to increase range of motion or to prevent further decrease in range of motion.

**(a)**

a resident who enters the facility without a limited range of motion does not experience reduction in range of motion unless the resident's clinical condition demonstrates that a reduction in range of motion is unavoidable; and

**(b)**

a resident with a limited range of motion receives treatment and services to increase range of motion or to prevent further decrease in range of motion.

**(6)**

The facility must ensure that the psycho-social function of the resident remains at or above the level at the time of admission, unless the individual's clinical condition demonstrates that a reduction in psycho-social function was unavoidable. The facility shall ensure that: (a) a resident who displays psycho-social adjustment difficulty receives treatment and services to achieve as much re-motivation and reorientation as possible; and (b) a resident whose assessment does not reveal a psycho-social adjustment difficulty does not display a pattern of decreased social interaction, increased withdrawn anger, or depressive behaviors, unless the resident's clinical condition demonstrates that such a pattern is unavoidable.

**(a)**

a resident who displays psycho-social adjustment difficulty receives treatment and services to achieve as much re-motivation and reorientation as possible; and

**(b)**

a resident whose assessment does not reveal a psycho-social adjustment difficulty does not display a pattern of decreased social interaction, increased withdrawn anger, or depressive behaviors, unless the resident's clinical condition demonstrates that such a pattern is unavoidable.

**(7)**

The facility must assess alternative feeding methods to ensure that: (a) a resident who has been able to eat enough alone or with assistance is not fed by naso-gastric tube unless the resident's clinical condition demonstrates that use of a naso-gastric tube is unavoidable; and (b) a resident who is fed by a naso-gastric or gastrostomy tube receives the treatment and services to prevent aspiration pneumonia, diarrhea, vomiting, dehydration, metabolic abnormalities, and nasal-pharyngeal ulcers and to restore, if possible, normal feeding function.

**(a)**

a resident who has been able to eat enough alone or with assistance is not fed by naso-gastric tube unless the resident's clinical condition demonstrates that use of a naso-gastric tube is unavoidable; and

**(b)**

a resident who is fed by a naso-gastric or gastrostomy tube receives the treatment and services to prevent aspiration pneumonia, diarrhea, vomiting, dehydration, metabolic abnormalities, and nasal-pharyngeal ulcers and to restore, if possible, normal feeding function.

**(8)**

The facility must maintain the resident environment to be as free of accident hazards as is possible.

**(9)**

The facility must provide each resident with adequate supervision and assistive devices to prevent accidents.

**(10)**

Each resident's comprehensive assessment must include an assessment on nutritional status. The facility must ensure that each resident: (a) maintains acceptable nutritional status parameters, such as body weight and protein levels, unless the resident's clinical condition demonstrates that this is not possible; and (b) receives a therapeutic diet when there is a nutritional problem.

**(a)**

maintains acceptable nutritional status parameters, such as body weight and protein levels, unless the resident's clinical condition demonstrates that this is not possible; and

**(b)**

receives a therapeutic diet when there is a nutritional problem.

**(11)**

The facility must provide each resident with sufficient fluid intake to maintain proper hydration and health.

**(12)**

The facility must ensure that residents receive proper treatment and care for the following special services: (a) injections; (b) parenteral and enteral fluids; (c) colostomy, ureterostomy, or ileostomy care; (d) tracheostomy care; (e) tracheal suctioning; (f) respiratory care; (g) foot care; and (h) prostheses care.

**(a)**

injections;

**(b)**

parenteral and enteral fluids;

**(c)**

colostomy, ureterostomy, or ileostomy care;

**(d)**

tracheostomy care;

**(e)**

tracheal suctioning;

**(f)**

respiratory care;

**(g)**

foot care; and

**(h)**

prostheses care.

**(13)**

Each resident's drug regimen must be free from unnecessary drugs and the facility shall ensure that: (a) residents who have not used anti-psychotic drugs are not

given these drugs unless anti-psychotic drug therapy is necessary to treat a specific condition as diagnosed and documented in the clinical record; and (b) residents who use anti-psychotic drugs receive gradual dose reductions and behavioral interventions, unless clinically contraindicated in an effort to discontinue these drugs.

**(a)**

residents who have not used anti-psychotic drugs are not given these drugs unless anti-psychotic drug therapy is necessary to treat a specific condition as diagnosed and documented in the clinical record; and

**(b)**

residents who use anti-psychotic drugs receive gradual dose reductions and behavioral interventions, unless clinically contraindicated in an effort to discontinue these drugs.

**(14)**

The quality assurance committee must monitor medication errors to ensure that: (a) the facility does not have medication error rates of five percent or greater; (b) residents are free of any significant medication errors.

**(a)**

the facility does not have medication error rates of five percent or greater;

**(b)**

residents are free of any significant medication errors.