

R432-150-5 Scope of Services

(1)

An intermediate level of care facility must provide 24-hour licensed nursing services. (a) The facility shall ensure that nursing staff are present on the premises at all times to meet the needs of residents. (b) The facility shall provide at least one registered nurse either by direct employ or by contract to provide direction to nursing services. (c) The facility may employ a licensed practical nurse to act as the health services supervisor in lieu of a director of nursing provided that a registered nurse consultant meets regularly with the health services supervisor. (d) The facility shall provide at least the following: (i) medical supervision; (ii) dietary services; (iii) social services; and (iv) recreational therapy. (e) The following services shall be provided as required in the resident care plan: (i) physical therapy; (ii) occupational therapy; (iii) speech therapy; (iv) respiratory therapy; and (v) other therapies.

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The facility shall provide at least one registered nurse either by direct employ or by contract to provide direction to nursing services.

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The facility may employ a licensed practical nurse to act as the health services supervisor in lieu of a director of nursing provided that a registered nurse consultant meets regularly with the health services supervisor.

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The facility shall provide at least the following: (i) medical supervision; (ii) dietary services; (iii) social services; and (iv) recreational therapy.

(i)

medical supervision;

(ii)

dietary services;

(iii)

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(iv)

recreational therapy.

(e)

The following services shall be provided as required in the resident care plan: (i) physical therapy; (ii) occupational therapy; (iii) speech therapy; (iv) respiratory therapy; and (v) other therapies.

(i)

physical therapy;

(ii)

occupational therapy;

(iii)

speech therapy;

(iv)

respiratory therapy; and

(v)

other therapies.

(2)

A skilled level of care facility must provide 24-hour licensed nursing services. (a) The facility shall ensure that nursing staff are present on the premises at all times to meet the needs of residents. A licensed nurse shall serve as charge nurse on each shift. (b) The facility shall employ a registered nurse for at least eight consecutive hours a day, seven days a week. (c) The facility shall designate a registered nurse to serve as the director of nursing on a full- time basis. A person may not concurrently serve as the director of nursing and as a charge nurse. (d) A skilled level of care facility shall provide services to residents that preserve current capabilities and prevent further deterioration including the following: (i) medical supervision; (ii) dietary services; (iii) physical therapy; (iv) social services; (v) recreation therapy; (vi) dental services; and (vii) pharmacy services; (e) The facility shall provide the following services as required by the resident care plan: (i) respiratory therapy, (ii) occupational therapy, and (iii) speech therapy.

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charge nurse.

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A skilled level of care facility shall provide services to residents that preserve current capabilities and prevent further deterioration including the following: (i) medical supervision; (ii) dietary services; (iii) physical therapy; (iv) social services; (v) recreation therapy; (vi) dental services; and (vii) pharmacy services;

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(3)

Respite services may be provided in nursing care facilities. (a) The purpose of respite is to provide intermittent, time-limited care to give primary caretakers relief from the demands of caring for a person. (b) Respite services may be provided at an hourly rate or daily rate, but shall not exceed 14-days for any single respite stay. A respite stay which exceeds 14 days is a nursing facility admission subject to the requirements of this rule applicable to non-respite residents. (c) The facility shall coordinate the delivery of respite services with the recipient of services, the case manager, if one exists, and the family member or primary caretaker. (d) The facility shall document the person's response to the respite placement and coordinate with all provider agencies to ensure an uninterrupted service delivery program. (e) The facility must complete the following: (i) a Level 1 Preadmission Screening upon the persons admission for respite services; and (ii) a service agreement to serve as the plan of care, which shall identify the prescribed medications, physician treatment orders, need for assistance with activities of daily living, and diet orders. (f) The facility must have written respite care policies and procedures that are available to staff. Respite care policies and procedures must address: (i) medication administration; (ii) notification of a responsible party in the case of an emergency; (iii) service agreement and admission criteria; (iv) behavior management interventions; (v) philosophy of respite services; (vi) post-service summary; (vii) training and in-service requirement for employees; and (viii) handling personal funds. (g) Persons receiving respite services must receive a copy of the Resident Rights documents upon admission. (h) The facility must maintain a

record for each person receiving respite services. The record shall contain the following: (i) the service agreement; (ii) resident demographic information; (iii) nursing notes; (iv) physician treatment orders; (v) daily staff notes; (vi) accident and injury reports, (vii) a post service summary, and (viii) an advanced directive, if available. (i) Retention and storage of respite records shall comply with R432-150-25(3). (j) Confidentiality and release of information shall comply with R432-150-25(4).

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Retention and storage of respite records shall comply with R432-150-25(3).

(j)

Confidentiality and release of information shall comply with R432-150-25(4).

(4)

Hospice care may only be arranged and provided by a licensed hospice agency in accordance with R432-750. The facility shall be licensed as a hospice if it provides hospice care.

(5)

A nursing care facility may provide terminal care.