

388-97-1040 Dementia care

(1)

A nursing home must ensure that it provides residents with dementia with an environment designed to attain or maintain the highest level of functioning and well-being possible, taking into consideration the resident's medical condition and functional status. Therefore, the nursing home must: (a) Have a program designed to meet the identified needs of the residents; (b) Develop and implement program policies and procedures; and (c) Train all staff, who have resident contact, in the special needs and care approaches applicable to residents with dementia. This training must be ongoing and consistent with requirements under WAC 388-97-1680(2)(b).

(a)

Have a program designed to meet the identified needs of the residents;

(b)

Develop and implement program policies and procedures; and

(c)

Train all staff, who have resident contact, in the special needs and care approaches applicable to residents with dementia. This training must be ongoing and consistent with requirements under WAC 388-97-1680(2)(b).

(2)

A nursing home that has a locked or secured dementia unit must: (a) Always have

staff present in the unit, available to meet the needs of the residents and to protect them in the event of an emergency; (b) Have staff available to assist residents, as needed, in accessing outdoor areas; (c) Have admission, transfer, and discharge criteria which ensures that: (i) The process of informed consent is followed before admission to or transfer/discharge from the unit; (ii) The resident is provided with unit specific admission or transfer/discharge criteria, prior to admission to the unit; (iii) The resident's need for admission to the unit from another part of the nursing home, or transfer/discharge from the unit, is based on the comprehensive assessment and plan of care; (iv) Through an evaluation prior to admission, a resident admitted directly from outside the nursing home meets the cognitive and functional criteria of the unit; and (v) In the case of an individual admitted directly to the unit from outside the nursing home, as specified in subsection (2)(b)(iv) above, the nursing home may complete the comprehensive assessment after the individual's admission to the unit, provided that the nursing home complies with required time frames for completion of the resident assessment under WAC 388-97-1000. (d) Provide private pay residents, or their surrogate decision maker written notification: (i) If admitted from outside the nursing home, of additional charges, if any, for services, items, and activities in the unit, prior to admission; and (ii) If admitted from another part of the nursing home, thirty days in advance of changes to those charges. (e) Comply with physical plant requirements in WAC 388-97-2800 through 388-97-2920, for existing facilities and for new construction.

(a)

Always have staff present in the unit, available to meet the needs of the residents and to protect them in the event of an emergency;

(b)

Have staff available to assist residents, as needed, in accessing outdoor areas;

(c)

Have admission, transfer, and discharge criteria which ensures that: (i) The process of informed consent is followed before admission to or transfer/discharge from the unit; (ii) The resident is provided with unit specific admission or transfer/discharge criteria, prior to admission to the unit; (iii) The resident's need for admission to the unit from another part of the nursing home, or transfer/discharge from the unit, is based on the comprehensive assessment and plan of care; (iv) Through an evaluation prior to admission, a resident admitted directly from outside the nursing home meets the cognitive and functional criteria of the unit; and (v) In the case of an individual admitted directly to the unit from outside the nursing home, as specified in subsection (2)(b)(iv) above, the nursing home may complete the comprehensive assessment after the individual's admission to the unit, provided that the nursing home complies with required time frames for completion of the resident assessment under WAC 388-97-1000.

(i)

The process of informed consent is followed before admission to or transfer/discharge from the unit;

(ii)

The resident is provided with unit specific admission or transfer/discharge criteria, prior to admission to the unit;

(iii)

The resident's need for admission to the unit from another part of the nursing home, or transfer/discharge from the unit, is based on the comprehensive assessment and plan of care;

(iv)

Through an evaluation prior to admission, a resident admitted directly from outside the

nursing home meets the cognitive and functional criteria of the unit; and

(v)

In the case of an individual admitted directly to the unit from outside the nursing home, as specified in subsection (2)(b)(iv) above, the nursing home may complete the comprehensive assessment after the individual's admission to the unit, provided that the nursing home complies with required time frames for completion of the resident assessment under WAC 388-97-1000.

(d)

Provide private pay residents, or their surrogate decision maker written notification: (i) If admitted from outside the nursing home, of additional charges, if any, for services, items, and activities in the unit, prior to admission; and (ii) If admitted from another part of the nursing home, thirty days in advance of changes to those charges.

(i)

If admitted from outside the nursing home, of additional charges, if any, for services, items, and activities in the unit, prior to admission; and

(ii)

If admitted from another part of the nursing home, thirty days in advance of changes to those charges.

(e)

Comply with physical plant requirements in WAC 388-97-2800 through 388-97-2920, for existing facilities and for new construction.