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Title 22@ Social Security

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Division 5@ Licensing and Certification of Health Facilities, Home Health Agencies, Clinics, and Referral Agencies

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Chapter 8@ Intermediate Care Facilities for the Developmentally Disabled

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Article 4@ Administration

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Section 76521@ Policies and Procedures

76521 Policies and Procedures

(a)

Written administrative, management and personnel policies shall be implemented to govern the administration and management of the facility.

(b)

All policies and procedures required of these regulations shall be in writing, made available upon request to clients or their agents, employees and the public, and shall be carried out as written. Policies and procedures shall be reviewed at least annually, and revised as needed.

(c)

Each facility shall establish the following policies and procedures: (1) The overall philosophy, objectives and goals the facility is striving to achieve shall include but not be limited to: (A) The facility's role in the state comprehensive program for the developmentally disabled. (B) The facility's goals for its clients. (C) The facility's concept of its relationship to the parents or representatives of the clients. (2) Personnel policies which include: (A) Job descriptions detailing qualifications, duties and limitations of each classification of employee and employee benefits. (B) Procedures for employee orientation to facility, duties, client population, facility policies and procedures and staff. (C) Authorized procedures, consistent with due process, for suspension and/or dismissal of an employee for cause. (3) Policies and procedures on client admission, leave of absence, transfer and

discharge which shall include rate of charge for services included in basic rate, charges for extra services, limitation of services, cause for termination of services and refund policies applying to termination of services. (4) Policies and procedures governing autopsies, assuring that:(A) An autopsy shall be performed with proper authorization only, and only by a qualified physician selected as to be free of any conflict of interest. (B) The family shall be told of the autopsy findings if they desire. (5) Policies and procedures to assure that all clients are screened for tuberculosis upon admission. These procedures shall be determined by the client care policy committee. Subsequent tuberculosis screening procedures shall be established by attending physicians. A tuberculosis screening may not be required if there is satisfactory written evidence available that a tuberculosis screening has been completed within 90 days of the date of admission to the facility. (6) Policies and procedures assuring that admission or discharge of a client shall not be denied based on sex, race, color, religion, ancestry, national origin, sexual orientation, disability, medical condition, marital status, or registered domestic partner status, except as provided in this section. Any bona fide nonprofit religious, fraternal or charitable organization which can demonstrate to the satisfaction of the Department that its primary or substantial purpose is not to evade this subsection may establish admission policies limiting or giving preference to its own members or adherents and such policies shall not be construed as a violation of the first paragraph of this subsection. (7) Written policies and procedures governing client records developed with the assistance of a person skilled in record maintenance and preservation. Client records shall be stored and systematically organized to facilitate retrieval of information. (8) Written policies and procedures governing access to, duplication of, and dissemination of information from the record. (9) A policy and procedure

establishing an ongoing program of open and honest communication with the clients and families as follows:(A) The facility shall have a written plan for informing families or authorized representatives of significant changes in the client's condition and of activities related to the clients that may be of interest to them and to assure that communications to the facility from clients' families or representatives shall be promptly and appropriate handled and answered. (B) Policies and procedures to assure that parents and authorized representatives shall be permitted to visit all parts of the facility that provide services to clients. (C) Frequent and informal visits home shall be encouraged, and the regulations of the facility shall facilitate rather than inhibit—such visitations. (10) A—procedure by which allegations of client abuse are immediately reported. Such procedures shall assure that there shall be evidence that: (A) All alleged violations are thoroughly investigated. (B) The results of the investigation are reported to the administrator or designee within 24 hours of the report of the incident. (C) Substantiated instances of abuse are reported to the Department immediately. (D) Appropriate sanctions are invoked when the allegation is substantiated. (11) A written policy to assure that clients are protected from exploitation when they are engaged in work that benefits the facility. The policy shall assure that all work programs shall be included in the client's individual program plan and have specific goals and objectives. (12) Policies and procedures for reporting unusual occurrences. (13) Policies and procedures for smoking by clients. (14) Provisions for accessibility to and utilization of the facility by the physically handicapped. (15) A policy assuring that persons with an infectious or communicable disease may be admitted only under the provisions of Section 76543. (16) Policies and procedures developed in concurrence with the local health officer to determine outbreaks or prevalence of infectious or parasitic disease or infestation and to correct such conditions. (17)

Policies and procedures that assure that client's equipment and valuables shall be inventoried as required by Section 76561(a)(19) and that client's personal possessions shall be identified by label. (18) Policies and procedures that define the conditions under which restraints are used, the application of restraints, staff members who shall authorize their use and the mechanism used for monitoring and controlling their use.

(1)

The overall philosophy, objectives and goals the facility is striving to achieve shall include but not be limited to: (A) The facility's role in the state comprehensive program for the developmentally disabled. (B) The facility's goals for its clients. (C) The facility's concept of its relationship to the parents or representatives of the clients.

(A)

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(B)

The facility's goals for its clients.

(C)

The facility's concept of its relationship to the parents or representatives of the clients.

(2)

Personnel policies which include:(A) Job descriptions detailing qualifications, duties and limitations of each classification of employee and employee benefits. (B)

Procedures for employee orientation to facility, duties, client population, facility policies and procedures and staff. (C) Authorized procedures, consistent with due process, for suspension and/or dismissal of an employee for cause.

(A)

Job descriptions detailing qualifications, duties and limitations of each classification of employee and employee benefits.

(B)

Procedures for employee orientation to facility, duties, client population, facility policies and procedures and staff.

(C)

Authorized procedures, consistent with due process, for suspension and/or dismissal of an employee for cause.

(3)

Policies and procedures on client admission, leave of absence, transfer and discharge which shall include rate of charge for services included in basic rate, charges for extra services, limitation of services, cause for termination of services and refund policies applying to termination of services.

(4)

Policies and procedures governing autopsies, assuring that:(A) An autopsy shall be performed with proper authorization only, and only by a qualified physician selected as to be free of any conflict of interest. (B) The family shall be told of the autopsy findings if they desire.

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An autopsy shall be performed with proper authorization only, and only by a qualified physician selected as to be free of any conflict of interest.

(B)

The family shall be told of the autopsy findings if they desire.

(5)

Policies and procedures to assure that all clients are screened for tuberculosis upon admission. These procedures shall be determined by the client care policy committee.

Subsequent tuberculosis screening procedures shall be established by attending physicians. A tuberculosis screening may not be required if there is satisfactory written

evidence available that a tuberculosis screening has been completed within 90 days of the date of admission to the facility.

(6)

Policies and procedures assuring that admission or discharge of a client shall not be denied based on sex, race, color, religion, ancestry, national origin, sexual orientation, disability, medical condition, marital status, or registered domestic partner status, except as provided in this section. Any bona fide nonprofit religious, fraternal or charitable organization which can demonstrate to the satisfaction of the Department that its primary or substantial purpose is not to evade this subsection may establish admission policies limiting or giving preference to its own members or adherents and such policies shall not be construed as a violation of the first paragraph of this subsection.

(7)

Written policies and procedures governing client records developed with the assistance of a person skilled in record maintenance and preservation. Client records shall be stored and systematically organized to facilitate retrieval of information.

(8)

Written policies and procedures governing access to, duplication of, and dissemination of information from the record.

(9)

A policy and procedure establishing an ongoing program of open and honest communication with the clients and families as follows:(A) The facility shall have a written plan for informing families or authorized representatives of significant changes in the client's condition and of activities related to the clients that may be of interest to them and to assure that communications to the facility from clients' families or representatives shall be promptly and appropriate handled and answered. (B) Policies

and procedures to assure that parents and authorized representatives shall be permitted to visit all parts of the facility that provide services to clients. (C) Frequent and informal visits home shall be encouraged, and the regulations of the facility shall facilitate rather than inhibit such visitations.

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(B)

Policies and procedures to assure that parents and authorized representatives shall be permitted to visit all parts of the facility that provide services to clients.

(C)

Frequent and informal visits home shall be encouraged, and the regulations of the facility shall facilitate rather than inhibit such visitations.

(10)

A procedure by which allegations of client abuse are immediately reported. Such procedures shall assure that there shall be evidence that: (A) All alleged violations are thoroughly investigated. (B) The results of the investigation are reported to the administrator or designee within 24 hours of the report of the incident. (C) Substantiated instances of abuse are reported to the Department immediately. (D) Appropriate sanctions are invoked when the allegation is substantiated.

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All alleged violations are thoroughly investigated.

(B)

The results of the investigation are reported to the administrator or designee within 24 hours

of the report of the incident.

(C)

Substantiated instances of abuse are reported to the Department immediately.

(D)

Appropriate sanctions are invoked when the allegation is substantiated.

(11)

A written policy to assure that clients are protected from exploitation when they are engaged in work that benefits the facility. The policy shall assure that all work programs shall be included in the client's individual program plan and have specific goals and objectives.

(12)

Policies and procedures for reporting unusual occurrences.

(13)

Policies and procedures for smoking by clients.

(14)

Provisions for accessibility to and utilization of the facility by the physically handicapped.

(15)

A policy assuring that persons with an infectious or communicable disease may be admitted only under the provisions of Section 76543.

(16)

Policies and procedures developed in concurrence with the local health officer to determine outbreaks or prevalence of infectious or parasitic disease or infestation and to correct such conditions.

(17)

Policies and procedures that assure that client's equipment and valuables shall be

inventoried as required by Section 76561(a)(19) and that client's personal possessions shall be identified by label.

(18)

Policies and procedures that define the conditions under which restraints are used, the application of restraints, staff members who shall authorize their use and the mechanism used for monitoring and controlling their use.

(d)

The facility shall have a written plan for a continuing management audit to insure compliance with state laws and regulations and the effective implementation of its stated policies and procedures.

(e)

The facility shall have a written organizational chart showing the major operating programs of the facility, with staff divisions, the administrative personnel in charge of the programs and divisions and their lines of authority, responsibility and communication.