

79781 Required Committees

(a)

Each correctional treatment center shall have at least the following committees:
patient care policy, infection control and pharmaceutical service.

(b)

Minutes of every committee meeting shall be maintained in the facility and indicate names of members present, date, length of meeting, subject matter discussed and action taken.

(c)

In those correctional treatment centers where appropriate, these functions may be performed by a committee of the whole.

(d)

Committee composition and function shall be as follows: (1) Patient Care Policy Committee. (A) A patient care policy committee shall establish policies governing the following services: Physician, psychiatrist, psychologist, dental, nursing, dietetic, pharmaceutical, health records, housekeeping and such additional services as are provided by the facility. (B) The committee shall be composed of at least the medical director, the administrator (if appointed), the director of nursing service, a pharmacist and a representative of each required service as appropriate. (C) The committee shall meet at least annually. (D) The patient care policy committee shall have the responsibility for reviewing and

approving all policies relating to patient care. Based on reports received from the facility administrator, the committee shall review the effectiveness of policy implementation and shall make recommendations for the improvement of patient care. (E) The committee shall review patient care policies annually and revise as necessary. Minutes shall list policies reviewed. (F) The patient care policy committee shall implement the provisions of Health and Safety Code Sections 1315, 1316, and 1316.5, by means of written policies and procedures. (G) Only physicians shall assume the overall medical care of patients, including performing the admitting history, and the physical examinations and the issuance of orders for medical care. (2) Infection Control Committee. (A) An infection control committee shall be responsible for infection control in the facility. (B) The committee shall be composed of representatives from at least the following services; physician, nursing, administration, dietary, pharmaceutical, housekeeping, and laundry. (C) The committee shall meet at least quarterly. (D) The functions of the infection control committee shall include, but not be limited to: 1. Establishing, reviewing, monitoring and approving policies and procedures for investigating, controlling and preventing infections, including tuberculosis, in the correctional treatment center. These policies and procedures shall be reviewed and revised per 79779(b), and shall be based on the recommendations of the Centers for Disease Control and Prevention (CDC). 2. Maintaining, documenting, reviewing and reporting statistics of the number, types, sources and locations of infections within the facility. This shall include maintaining a confidentiality log which contains the dates and results of tests for tuberculosis infection that are recommended by the federal Centers for Disease Control and Prevention (CDC) and licensed by the federal Food and Drug Administration (FDA) and chest X-ray results of all correctional treatment center employees and

inmate-patients. (E) A registered nurse shall be assigned on a full-time or part-time basis to infection control surveillance. (3) Pharmaceutical Service Committee. (A) A pharmaceutical service committee shall direct the pharmaceutical services in the facility. (B) The committee shall be composed of the following; a pharmacist, the director of nursing service, the administrator (if appointed), and the medical director or at least one physician. (C) The committee shall meet at least quarterly. (D) The functions of the pharmaceutical service committee shall include, but not be limited to: 1. Establishing, reviewing, monitoring and approving policies and procedures for the safe procurement, storage, distribution and use of drugs, biologicals, and chemicals. 2. Reviewing and taking appropriate action on the pharmacist's quarterly report. 3. Recommending measures for improvement of services and the selection of pharmaceutical reference materials.

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The committee shall meet at least quarterly.

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The functions of the infection control committee shall include, but not be limited to: 1.

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2. Maintaining, documenting, reviewing and reporting statistics of the number, types, sources and locations of infections within the facility. This shall include maintaining a confidentiality log which contains the dates and results of tests for tuberculosis infection that are recommended by the federal Centers for Disease Control and Prevention (CDC) and licensed by the federal Food and Drug Administration (FDA) and chest X-ray results of all correctional treatment center employees and inmate-patients.

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Maintaining, documenting, reviewing and reporting statistics of the number, types, sources and locations of infections within the facility. This shall include maintaining a confidentiality log which contains the dates and results of tests for tuberculosis infection that are recommended by the federal Centers for Disease Control and Prevention (CDC) and licensed by the federal Food and Drug Administration (FDA) and chest X-ray results of all correctional treatment center employees and

inmate-patients.

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A registered nurse shall be assigned on a full-time or part-time basis to infection control surveillance.

(3)

Pharmaceutical Service Committee.(A) A pharmaceutical service committee shall direct the pharmaceutical services in the facility. (B) The committee shall be composed of the following; a pharmacist, the director of nursing service, the administrator (if appointed), and the medical director or at least one physician. (C) The committee shall meet at least quarterly. (D) The functions of the pharmaceutical service committee shall include, but not be limited to: 1. Establishing, reviewing, monitoring and approving policies and procedures for the safe procurement, storage, distribution and use of drugs, biologicals, and chemicals. 2. Reviewing and taking appropriate action on the pharmacist's quarterly report. 3. Recommending measures for improvement of services and the selection of pharmaceutical reference materials.

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