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Title 22@ Social Security

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Division 6@ Licensing of Community Care Facilities

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Chapter 1@ General Licensing Requirements

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Article 8@ Incidental Medical Services

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Section 80092.2@ Restricted Health Condition Care Plan

80092.2 Restricted Health Condition Care Plan

(a)

If the licensee of an ARF chooses to care for a client with a restricted health condition, as specified in Section 80092, the licensee shall develop and maintain, as part of the Needs and Services Plan, a written Restricted Health Condition Care Plan. The plan must include all of the following: (1) Documentation that the client and the client's authorized representative, if any, the client's physician or a licensed professional designated by the physician, and the placement agency, if any, participated in the development of the plan. (2) Documentation by the client's physician or a licensed professional designated by the physician, of the following: (A) Stability of the medical conditions. (B) Medical conditions that require services or procedures. (C) Specific services needed. (D) Client's ability to perform the procedures. (E) The client does not require 24-hour nursing care and/or monitoring. (3) Identification of a licensed professional who will perform procedures if the client needs medical assistance. (4) Identification of the person who will perform incidental medical assistance that does not require a licensed professional. (5) Name and telephone number of emergency medical contacts. (6) A date specified by the client's physician or designee, who is also a licensed professional, when the plan must be reviewed by all parties identified in Section 80092.2(a)(1). (7) A signed statement from the client's attending physician that the plan meets medical scope of practice requirements. (8) For clients of a

placement agency, a signed statement from a representative of the placement agency, that they have reviewed and approved the plan and that the placement agency will monitor implementation of the plan.

(1)

Documentation that the client and the client's authorized representative, if any, the client's physician or a licensed professional designated by the physician, and the placement agency, if any, participated in the development of the plan.

(2)

Documentation by the client's physician or a licensed professional designated by the physician, of the following: (A) Stability of the medical conditions. (B) Medical conditions that require services or procedures. (C) Specific services needed. (D) Client's ability to perform the procedures. (E) The client does not require 24-hour nursing care and/or monitoring.

(A)

Stability of the medical conditions.

(B)

Medical conditions that require services or procedures.

(C)

Specific services needed.

(D)

Client's ability to perform the procedures.

(E)

The client does not require 24-hour nursing care and/or monitoring.

(3)

Identification of a licensed professional who will perform procedures if the client needs medical assistance.

(4)

Identification of the person who will perform incidental medical assistance that does not require a licensed professional.

(5)

Name and telephone number of emergency medical contacts.

(6)

A date specified by the client's physician or designee, who is also a licensed professional, when the plan must be reviewed by all parties identified in Section 80092.2(a)(1).

(7)

A signed statement from the client's attending physician that the plan meets medical scope of practice requirements.

(8)

For clients of a placement agency, a signed statement from a representative of the placement agency, that they have reviewed and approved the plan and that the placement agency will monitor implementation of the plan.

(b)

The Restricted Health Condition Care Plan shall neither require nor recommend that the licensee or any facility personnel or any other person providing care, other than a physician or licensed professional, implement any health care procedure that may legally be provided only by a physician or licensed professional.