California Code Of Regulations
|->
Title 22@ Social Security
|->
Division 6@ Licensing of Community Care Facilities
|->
Chapter 3@ Adult Day Programs
|->
Article 6@ Continuing Requirements
|->
Section 82075@ Health-Related Services

# 82075 Health-Related Services

#### (a)

The licensee shall ensure that each client receives necessary first aid and other needed medical or dental services, including arrangement for and/or provision of transportation to the nearest available services.

### (b)

Clients shall be assisted as needed with self-administration of prescription and nonprescription medications. (1) Program staff who receive training from a licensed professional, may assist clients with metered-dose inhalers, and dry powder inhalers if the following requirements are met: (A) The licensee obtains written documentation from the licensed professional, outlining the procedures and the names of program staff whom they have trained in those procedures. (B) The licensee ensures that the licensed professional, reviews staff performance as necessary, but at least annually. (C) All staff training shall be documented in the facility personnel files. (2) Program staff, except those authorized by law, shall not administer injections but staff designated by the licensee shall be authorized to assist clients with self-administration of injections as needed. (3) Assistance with self-administration does not include forcing a client to take medications, hiding or camouflaging medications in other substances without the client's knowledge and consent, or otherwise infringing upon a client's right to refuse to take a medication as specified in Section 82072(a)(9). (4) If the client's physician has

stated in writing that the client is able to determine and communicate his/her need for a prescription or nonprescription PRN medication, program staff shall be permitted to assist the client with self-administration of their PRN medication. (5) If the client's physician has stated in writing that the client is unable to determine his/her own need for nonprescription PRN medication, but can communicate his/her symptoms clearly, program staff designated by the licensee shall be permitted to assist the client with self-administration, providing all of the following requirements are met: (A) There is a written direction from a physician, on a prescription blank, specifying the name of the client, the name of the medication, instructions regarding a time or circumstance (if any) when it should be discontinued, and an indication of when the physician should be contacted for a medication reevaluation. (B) Once ordered by the physician the medication is given according to the physician's directions. (C) A record of each dose is maintained in the client's record. The record shall include the date and time the PRN medication was taken, the dosage taken, and the client's response. (6) If the client is unable to determine his/her own need for a prescription or nonprescription PRN medication, and is unable to communicate his/her symptoms clearly, program staff designated by the licensee, shall be permitted to assist the client with self-administration, provided all of the following requirements are met: (A) Staff shall contact the client's physician, physician assistant, or nurse practitioner prior to each dose, describe the client's symptoms, and receive direction to assist the client in self-administration of that dose of medication. (B) The date and time of each contact with the physician, physician assistant, or nurse practitioner and his or her directions, shall be documented and maintained in the client's record. (C) The date and time the PRN medication was taken, the dosage taken, and the client's response, shall be documented and maintained in

the client's record.

**(1)** 

Program staff who receive training from a licensed professional, may assist clients with metered-dose inhalers, and dry powder inhalers if the following requirements are met:

(A) The licensee obtains written documentation from the licensed professional, outlining the procedures and the names of program staff whom they have trained in those procedures. (B) The licensee ensures that the licensed professional, reviews staff performance as necessary, but at least annually. (C) All staff training shall be documented in the facility personnel files.

(A)

The licensee obtains written documentation from the licensed professional, outlining the procedures and the names of program staff whom they have trained in those procedures.

(B)

The licensee ensures that the licensed professional, reviews staff performance as necessary, but at least annually.

(C)

All staff training shall be documented in the facility personnel files.

(2)

Program staff, except those authorized by law, shall not administer injections but staff designated by the licensee shall be authorized to assist clients with self-administration of injections as needed.

(3)

Assistance with self-administration does not include forcing a client to take medications, hiding or camouflaging medications in other substances without the client's knowledge and consent, or otherwise infringing upon a client's right to refuse to take a medication as specified in Section 82072(a)(9).

If the client's physician has stated in writing that the client is able to determine and communicate his/her need for a prescription or nonprescription PRN medication, program staff shall be permitted to assist the client with self-administration of their PRN medication.

(5)

If the client's physician has stated in writing that the client is unable to determine his/her own need for nonprescription PRN medication, but can communicate his/her symptoms clearly, program staff designated by the licensee shall be permitted to assist the client with self-administration, providing all of the following requirements are met:

(A) There is a written direction from a physician, on a prescription blank, specifying the name of the client, the name of the medication, instructions regarding a time or circumstance (if any) when it should be discontinued, and an indication of when the physician should be contacted for a medication reevaluation. (B) Once ordered by the physician the medication is given according to the physician's directions. (C) A record of each dose is maintained in the client's record. The record shall include the date and time the PRN medication was taken, the dosage taken, and the client's response.

(A)

There is a written direction from a physician, on a prescription blank, specifying the name of the client, the name of the medication, instructions regarding a time or circumstance (if any) when it should be discontinued, and an indication of when the physician should be contacted for a medication reevaluation.

(B)

Once ordered by the physician the medication is given according to the physician's directions.

(C)

A record of each dose is maintained in the client's record. The record shall include the date and time the PRN medication was taken, the dosage taken, and the client's response.

(6)

If the client is unable to determine his/her own need for a prescription or nonprescription PRN medication, and is unable to communicate his/her symptoms clearly, program staff designated by the licensee, shall be permitted to assist the client with self-administration, provided all of the following requirements are met: (A) Staff shall contact the client's physician, physician assistant, or nurse practitioner prior to each dose, describe the client's symptoms, and receive direction to assist the client in self-administration of that dose of medication. (B) The date and time of each contact with the physician, physician assistant, or nurse practitioner and his or her directions, shall be documented and maintained in the client's record. (C) The date and time the PRN medication was taken, the dosage taken, and the client's response, shall be documented and maintained in the client's record.

### (A)

Staff shall contact the client's physician, physician assistant, or nurse practitioner prior to each dose, describe the client's symptoms, and receive direction to assist the client in self-administration of that dose of medication.

#### (B)

The date and time of each contact with the physician, physician assistant, or nurse practitioner and his or her directions, shall be documented and maintained in the client's record.

### (C)

The date and time the PRN medication was taken, the dosage taken, and the client's response, shall be documented and maintained in the client's record.

A separate room or area specified in Section 82087(d) shall be used when separation from others is required.

#### (d)

There shall be privacy for first aid treatment of minor injuries and for examination or treatment by a medical professional if required.

## (e)

When a client requires oxygen the licensee is responsible for the following: (1)Monitoring the client's ongoing ability to operate and care for the equipment in accordance with the physician's instructions, or if the client is unable to do so: (A) Ensuring that an adequate number of program staff persons are designated to operate and care for the equipment and that those staff persons receive training from the client's family or primary caregiver.1. The licensee shall maintain, in the client's file, documentation of the training and which staff members were trained. (2) Ensuring that the following conditions are met if oxygen equipment is in use: (A) The licensee makes a written report to the local fire jurisdiction that oxygen is in use at the day program. (B) "No Smoking -- Oxygen in Use" signs shall be posted in appropriate areas. (C) Smoking is prohibited where oxygen is in use. (D) All electrical equipment is checked for defects that may cause sparks. (E) Oxygen tanks that are not portable are secured either in a stand or to the wall. (F) Plastic tubing from the nasal canula (mask) to the oxygen source is long enough to allow the client movement but does not constitute a hazard to the client or others. (G) Clients use oxygen from a portable source when they are moving about in the day program. (H) Equipment is operable. (I) Program staff have knowledge and ability to operate and care for the oxygen equipment. (J) Equipment is removed from the day program when no longer in use by the client.

Monitoring the client's ongoing ability to operate and care for the equipment in accordance with the physician's instructions, or if the client is unable to do so: (A) Ensuring that an adequate number of program staff persons are designated to operate and care for the equipment and that those staff persons receive training from the client's family or primary caregiver.1. The licensee shall maintain, in the client's file, documentation of the training and which staff members were trained.

(A)

Ensuring that an adequate number of program staff persons are designated to operate and care for the equipment and that those staff persons receive training from the client's family or primary caregiver.1. The licensee shall maintain, in the client's file, documentation of the training and which staff members were trained.

1.

The licensee shall maintain, in the client's file, documentation of the training and which staff members were trained.

(2)

Ensuring that the following conditions are met if oxygen equipment is in use: (A) The licensee makes a written report to the local fire jurisdiction that oxygen is in use at the day program. (B) "No Smoking -- Oxygen in Use" signs shall be posted in appropriate areas. (C) Smoking is prohibited where oxygen is in use. (D) All electrical equipment is checked for defects that may cause sparks. (E) Oxygen tanks that are not portable are secured either in a stand or to the wall. (F) Plastic tubing from the nasal canula (mask) to the oxygen source is long enough to allow the client movement but does not constitute a hazard to the client or others. (G) Clients use oxygen from a portable source when they are moving about in the day program. (H) Equipment is operable. (I) Program staff have knowledge and ability to operate and care for the oxygen equipment. (J) Equipment is removed from the day program when no longer in use by

the client.

(A)

The licensee makes a written report to the local fire jurisdiction that oxygen is in use at the day program.

(B)

"No Smoking -- Oxygen in Use" signs shall be posted in appropriate areas.

(C)

Smoking is prohibited where oxygen is in use.

(D)

All electrical equipment is checked for defects that may cause sparks.

(E)

Oxygen tanks that are not portable are secured either in a stand or to the wall.

(F)

Plastic tubing from the nasal canula (mask) to the oxygen source is long enough to allow the client movement but does not constitute a hazard to the client or others.

(G)

Clients use oxygen from a portable source when they are moving about in the day program.

(H)

Equipment is operable.

**(I)** 

Program staff have knowledge and ability to operate and care for the oxygen equipment.

**(J)** 

Equipment is removed from the day program when no longer in use by the client.

(f)

Staff responsible for providing direct care and supervision shall receive and maintain current training in first aid and cardiopulmonary resuscitation from

persons qualified by agencies including, but not limited to, the American Red Cross. (1) Ensure that at least one full-time staff member who has a current certificate in cardiopulmonary resuscitation is present during operating hours.

**(1)** 

Ensure that at least one full-time staff member who has a current certificate in cardiopulmonary resuscitation is present during operating hours.

(g)

If the day program has no medical unit at the program site, first aid supplies shall be maintained and be readily available in a central location. (1) The supplies shall include at least the following: (A) A current edition of a first aid manual approved by the American Red Cross, the American Medical Association or a state or federal health agency. (B) Sterile first aid dressings. (C) Bandages or roller bandages. (D) Adhesive tape. (E) Scissors. (F) Tweezers. (G) Thermometers. (H) Antiseptic solution.

**(1)** 

The supplies shall include at least the following: (A) A current edition of a first aid manual approved by the American Red Cross, the American Medical Association or a state or federal health agency. (B) Sterile first aid dressings. (C) Bandages or roller bandages. (D) Adhesive tape. (E) Scissors. (F) Tweezers. (G) Thermometers. (H) Antiseptic solution.

(A)

A current edition of a first aid manual approved by the American Red Cross, the American Medical Association or a state or federal health agency.

(B)

Sterile first aid dressings.

(C)

Bandages or roller bandages.

(D)

Adhesive tape.

(E)

Scissors.

(F)

Tweezers.

(G)

Thermometers.

#### (h)

(H)

Antiseptic solution.

There shall be at least one person in the day program at all times, who is capable of and responsible for communicating with emergency personnel. The following information shall be readily available to that person: (1) The name, address, and telephone number of each client's physician and dentist, and other medical and mental health providers, if any. (2) The name, address, and telephone number of each emergency agency, including, but not limited to the police department, the fire department, or paramedic unit. There shall be at least one medical resource available to be called at all times. (3) The name and telephone number of an ambulance service.

**(1)** 

The name, address, and telephone number of each client's physician and dentist, and other medical and mental health providers, if any.

(2)

The name, address, and telephone number of each emergency agency, including, but

not limited to the police department, the fire department, or paramedic unit. There shall be at least one medical resource available to be called at all times.

(3)

The name and telephone number of an ambulance service.

(i)

The licensee shall obtain, from the client or his/her authorized representative, an authorization to secure for the client necessary emergency medical services. (1) Such authorization shall be maintained on file in the facility. (2) The licensee shall not be required to obtain such an authorization from clients who adhere to a religious faith practicing healing by prayer or other spiritual means. (A) Under such circumstances, the licensee shall obtain a statement from the client or his/her authorized representative which states the adherence to such religion.

**(1)** 

Such authorization shall be maintained on file in the facility.

(2)

The licensee shall not be required to obtain such an authorization from clients who adhere to a religious faith practicing healing by prayer or other spiritual means. (A) Under such circumstances, the licensee shall obtain a statement from the client or his/her authorized representative which states the adherence to such religion.

(A)

Under such circumstances, the licensee shall obtain a statement from the client or his/her authorized representative which states the adherence to such religion.

**(j)** 

When a client requires prosthetic devices, or vision or hearing aids, the staff shall be familiar with the use of these devices and aids and shall assist the client with their utilization as needed.

Medications shall be centrally stored under the following circumstances: (1)

Preservation of the medication requires refrigeration. (2) Any medication

determined by the physician to be hazardous if kept in the personal possession of
the client for whom it was prescribed. (3) Because of physical arrangements and
the condition or the habits of persons in the day program, the medications are
determined by either the administrator or by the licensing agency to be a safety
hazard.

**(1)** 

Preservation of the medication requires refrigeration.

(2)

Any medication determined by the physician to be hazardous if kept in the personal possession of the client for whom it was prescribed.

(3)

Because of physical arrangements and the condition or the habits of persons in the day program, the medications are determined by either the administrator or by the licensing agency to be a safety hazard.

**(I)** 

The following requirements shall apply to medications which are centrally stored:

(1) Medication shall be kept in a safe and locked place that is not accessible to persons other than employees responsible for the supervision of the centrally stored medication. (2) Each container shall identify the items specified in Sections 82075 (I)(7)(A) through (H). (3) All medications shall be labeled and maintained in compliance with label instructions and state and federal laws. (4) No person other than the dispensing pharmacist shall alter a prescription label. (5) Each client's medication shall be stored in its originally received container. (6) No

medications shall be transferred between containers. (7) The licensee shall ensure the maintenance, for each client, of a record of centrally stored prescription medications which is retained for at least one year and includes the following:

(A) The name of the client for whom prescribed. (B) The name of the prescribing physician. (C) The drug name, strength, and quantity. (D) The date filled. (E) The prescription number and the name of the issuing pharmacy. (F) Expiration date.

(G) Number of refills. (H) Instructions, if any, regarding control and custody of the medication.

**(1)** 

Medication shall be kept in a safe and locked place that is not accessible to persons other than employees responsible for the supervision of the centrally stored medication.

(2)

Each container shall identify the items specified in Sections 82075 (I)(7)(A) through (H).

(3)

All medications shall be labeled and maintained in compliance with label instructions and state and federal laws.

**(4)** 

No person other than the dispensing pharmacist shall alter a prescription label.

(5)

Each client's medication shall be stored in its originally received container.

(6)

No medications shall be transferred between containers.

**(7)** 

The licensee shall ensure the maintenance, for each client, of a record of centrally

stored prescription medications which is retained for at least one year and includes the following: (A) The name of the client for whom prescribed. (B) The name of the prescribing physician. (C) The drug name, strength, and quantity. (D) The date filled.

- (E) The prescription number and the name of the issuing pharmacy. (F) Expiration date.
- (G) Number of refills. (H) Instructions, if any, regarding control and custody of the medication.

#### (A)

The name of the client for whom prescribed.

(B)

The name of the prescribing physician.

(C)

The drug name, strength, and quantity.

(D)

The date filled.

(E)

The prescription number and the name of the issuing pharmacy.

(F)

Expiration date.

(G)

Number of refills.

(H)

Instructions, if any, regarding control and custody of the medication.

### (m)

Prescription medications which are not taken with the client upon termination of services, or which are not to be retained shall be destroyed by the administrator, or a designated substitute, and one other adult who is not a client. (1) Both shall

sign a record, to be retained for at least one year, which lists the following: (A)

Name of the client. (B) The prescription number and the name of the pharmacy.

(C) The drug name, strength, and quantity destroyed. (D) The date of destruction.

**(1)** 

Both shall sign a record, to be retained for at least one year, which lists the following:

(A) Name of the client. (B) The prescription number and the name of the pharmacy. (C)

The drug name, strength, and quantity destroyed. (D) The date of destruction.

(A)

Name of the client.

(B)

The prescription number and the name of the pharmacy.

(C)

The drug name, strength, and quantity destroyed.

(D)

The date of destruction.

(n)

The adult day program shall notify the family/care provider and/or physician of any significant changes in the client's physical, emotional, or cognitive condition.