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Title 22@ Social Security

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Division 6@ Licensing of Community Care Facilities

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Chapter 8.5@ Residential Care Facilities for the Chronically III

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Article 8@ Medical and Health Related Care

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Section 87890@ Allowable Conditions

87890 Allowable Conditions

(a)

A licensee may accept or retain the following residents whose condition has been diagnosed as chronic and life threatening and who require different levels of care, except those conditions as specified in Section 87891: (1) Residents whose illness is in a state of remission. (2) Residents whose illness is intensifying and causing a deterioration in their condition, provided they do not require inpatient care in an Acute Care Hospital or a skilled nursing facility as determined by the resident's physician. (3) Residents whose condition has deteriorated to a point where death is imminent. (4) Residents who have in addition to (a) above, other medical conditions or needs or require the use of medical equipment including the following: (A) Diabetes (B) Colostomy (C) Ileostomy (D) Tracheotomy (E) Gastrostomy (F) Total Parenteral Nourishment (G) Intermittent Intravenous Therapy (H) Wounds (I) Dermal Ulcers (J) Nasal Gastric Tube Feeding (K) Indwelling Catheters (L) Intermittent Catheterization (M) External Catheters (N) Incontinence (O) Oxygen Administration (P) Dementia (Q) Other medical conditions which may confine the residents to bed. (R) Noncommunicable Tuberculosis (5) The licensee shall request an approval to accept or retain residents who have medical conditions or needs or require use of medical equipment not specified in (4) above.

(1)

Residents whose illness is in a state of remission.

(2)

Residents whose illness is intensifying and causing a deterioration in their condition, provided they do not require inpatient care in an Acute Care Hospital or a skilled nursing facility as determined by the resident's physician.

(3)

Residents whose condition has deteriorated to a point where death is imminent.

(4)

Residents who have in addition to (a) above, other medical conditions or needs or require the use of medical equipment including the following: (A) Diabetes (B) Colostomy (C) Ileostomy (D) Tracheotomy (E) Gastrostomy (F) Total Parenteral Nourishment (G) Intermittent Intravenous Therapy (H) Wounds (I) Dermal Ulcers (J) Nasal Gastric Tube Feeding (K) Indwelling Catheters (L) Intermittent Catheterization (M) External Catheters (N) Incontinence (O) Oxygen Administration (P) Dementia (Q) Other medical conditions which may confine the residents to bed. (R) Noncommunicable Tuberculosis

(A)

Diabetes

(B)

Colostomy

(C)

Ileostomy

(D)

Tracheotomy

(E)

Gastrostomy

(F)

Total Parenteral Nourishment

(G)

Intermittent Intravenous Therapy

(H)

Wounds

(I)

Dermal Ulcers

(J)

Nasal Gastric Tube Feeding

(K)

Indwelling Catheters

(L)

Intermittent Catheterization

(M)

External Catheters

(N)

Incontinence

(O)

Oxygen Administration

(P)

Dementia

(Q)

Other medical conditions which may confine the residents to bed.

(R)

Noncommunicable Tuberculosis

(5)

The licensee shall request an approval to accept or retain residents who have medical conditions or needs or require use of medical equipment not specified in (4) above.