

ADMINISTRATIVE POLICY

1 Objectives

- 1.1 To provide quality health services to all persons including, but not limited to, training in personal hygiene skills, universal precautions, family life and sex education.
- 1.2 To consider each person's health needs and to assist in implementing a plan to meet those needs.
- 1.3 To monitor and supervise each person's health status and assist persons with assuming increased responsibility for their own health.
- 1.4 To work as an interdisciplinary liaison with other medical service providers and with the family or guardian/conservators of each person.

2 Nursing Staff Organization and Responsibilities

- 2.1 Health Services will be under the direct supervision of a registered professional nurse (RN) licensed to practice in the State of California. The RN will visit OPTIONS sites to provide health services and perform personal health assessments as needed, no less than one hour per residential person per week at CDPH health licensed sites. The RN will visit other OPTIONS program sites upon request.
- 2.2 OPTIONS will delegate to the RN the authority, to carry out the nursing functions as required in Department of Public Health Services regulations. The RN will have the authority to make judgments regarding the health issues of the person served within the scope of the Nursing Practice.
- 2.3 RN Services will include, but not be limited to, the following:
 - 2.3.1 The RN will review the health status of persons residing at sites that are health licensed by direct physical examination at least once each quarter.
 - 2.3.2 Review of all medication documentation and compliance with regulatory requirements and acceptable standards for all persons residing at sites that are health licensed at least once every four weeks.
 - 2.3.3 Train Community Support Specialists to administer medications, and observe and certify each employee's proficiency in the handling, administering and recording of medications, documenting proficiency level in the employee training record.

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3 Care Policies for Residential Persons

- 3.1 The RN is designated to implement Care Policies under the direction of each person's attending physician.
- 3.2 The RN and other designated personnel will participate in the setting of Care Policies.

4 Physician's Orders

- 4.1 Only licensed nursing personnel and employees designated by OPTIONS RN or RN Consultant will receive and record physicians' orders.

5 Documentation - General

- 5.1 Records will be maintained for each person admitted into OPTIONS Residential Programs. The Registered Nurse and Community Support staff will record observations, actions, findings, etc., in the medication administration records and unit record.
- 5.2 The ID Progress notes for persons residing at sites that are health licensed will reflect a clear, concise picture of each person's health status and progress.
- 5.3 At the time of a person's transfer from a health licensed site, relevant nursing information from the person's record will be included with other medical information forwarded to the facility of transfer.

6 Health Care

- 6.1 OPTIONS' health services will be characterized by an active program of rehabilitative health care promoting self direction for persons in taking care of their own health needs, and providing instruction in appropriate protective and preventive health measures.
- 6.2 Each person will be trained and/or assisted in achieving and maintaining the highest possible level of self-care and independence. Persons will follow their active treatment schedule except when contraindicated by physician's orders.

7 First Aid Equipment and Supplies

- 7.1 First aid equipment and supplies will be made available as approved by

the Safety Committee and per regulations.

8 Notification of Weight Changes:

8.1 The attending physician will be notified any time there is a significant weight change, unless otherwise anticipated in the physician's notes. The date the physician was notified will be recorded on a change in condition form or on a health care appointment care list, whichever is most applicable to the situation.

9 Mechanical Devices/Postural Supports

9.1 Mechanical devices/postural supports, other than orthopedic braces, may be used to achieve proper body position, balance or alignment and to improve a person's mobility and independent functioning as ordered by his/her physician.

9.2 The Individual Service Plan (ISP) will indicate the reason for the support, when and where each device/support is to be applied, and a schedule for the use of each support.

9.3 Mechanical devices/postural supports will be designed and applied under the supervision of a physical or occupational therapist.

9.4 Mechanical devices/postural supports will be designed and applied so that they can be easily removed in case of emergency.

9.5 Mechanical devices/postural supports will be removed on a scheduled basis to allow for change of position and circulation.

9.6 The care and use of any mechanical device or postural support will be monitored by an RN.

POLICY DATE: February 1996

REVISED: March 2004, August 2007, January 2011, May 2012, April 2014, September 2015, November 2016

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