

ASSISTED LIVING NURSING GUIDELINES

R432-270-15(1) The facility must develop written policies and procedures defining the level of nursing services provided by the facility.

1) Insulin dependent diabetics who are medically stable: Facility policy includes:

- a) For residents who do not self-administer or do not have families who provide insulin injections, the facility RN or LPN, under the direction and delegation of the facility RN, may provide insulin injections.
- b) Residents who self-administer insulin injections must be assessed to be independent in that process.
- c) Indicate in the resident assessment and service plan who is responsible for blood sugar monitoring and insulin injections.
- d) In-service of staff on complications of diabetes. This should be included with new staff orientation.
- e) Quarterly consultation by a dietitian is required if doctor has ordered a therapeutic diet.
- f) An RN must be available 24 hours a day for questions or concerns.

2) Foley or supra pubic catheters: Facility policy includes:

- a) Home health to provide management and catheter changes.
- b) In-services staff on complications, daily care of indwelling catheters and universal precautions.
- c) Dignity issues, down drain bag may be in a dignity pouch
- d) Include in resident assessment and service plan.

3) Wound Care: Facility policy includes.

- a) Wound care should be provided by home health or a wound clinic
- b) In-service staff on signs and symptoms of infection and universal precautions.
- c) Include in resident assessment and service plan.

4) Feeding Tubes: Facility policy includes.

- a) Home health or resident to provide management of feeding tube.
- b) Staff in-service on universal precautions.
- c) Quarterly consultation by the dietitian is required.
- d) Include in resident assessment and service plan.

5) Colostomy care: Facility policy includes.

- a) Home health or resident to provide management of colostomy
- b) Staff in-service on daily care and universal precautions.
- c) Include in resident assessment and service plan.

6) Other injections: Facility policy includes.

- a) For residents who do not self-administer or do not have families who provide injections, the facility RN or LPN, under the direction and delegation of the facility RN, may provide injections.
- b) Residents who self-administer injections must be assessed to be independent in that process.
- c) Indicate in the resident assessment and service plan who is responsible for injections.
- d) An RN must be available 24 hours a day for questions or concerns.

7) Half side rails and bed canes: Facility policy includes:

- a) Side rails and bed canes cannot be used as a restraint.
- b) Assess the resident's cognitive ability to utilize the equipment.
- c) Half side rails can only be used to assist with positioning and bed mobility.
- d) Assess bed entrapment risk for side rail or bed cane use.
- e) Staff must be instructed on the proper placement of the equipment.
- f) Half side rail or bed cane use must be included in resident assessment and service plan.
- g) Reminder: Home Health or Hospice agencies may install side rails and bed canes without discussing it with the facility staff, however the facility is responsible to ensure that the Assisted Living resident is free from restraints.

* R432-270-9(5)(c) Resident Rights include the following: the right to be free of mental and physical abuse, and chemical and physical restraints;

Updated December 19, 2017