

DIVISION OF DEVELOPMENTAL DISABILITIES Olympia, Washington

TITLE: HEALTH SERVICES POLICY 9.06

Authority: 42 CFR 483.15, .20, .25, .30, .40, .45, .55

RCW 70.122, 71A.12.040, 74.42.240 Chapters 248-14-250, 248-14-260 WAC

DDD Policy 9.04

PURPOSE

This policy specifies procedures to be implemented at Residential Habilitation Centers (RHCs) and Intermediate Care Facilities for the Mentally Retarded (ICF/MRs) regarding appropriate and adequate services for clients' health conditions and health care needs.

SCOPE

This policy applies to all RHCs and ICF/MRs operated by or contracted with the Division of Developmental Disabilities (DDD).

POLICY

Individuals who live in RHCs and ICF/MRs will receive preventive, routine and emergency health services and appropriate nursing care in accordance with their health care needs and in a manner consistent with current standards of health care practices.

- A. Facility procedures shall be developed which ensure the following:
 - 1. The assignment or designation of a primary physician responsible for providing or coordinating all medical/health care for each client;
 - 2. A comprehensive annual health and dental evaluation for each client including a written plan for health maintenance and preventive health care;

DDD I GEICH WITHOUTE 1 OF 2 1550ED 1077

HEALTH SERVICES

- 3. A review of the client's health care plan as one integrated element of the Individual Habilitation Plan by the Interdisciplinary Team (IDT) on an as needed basis, but not less than annually;
- 4. Training programs for self-administration of medications ordered and supervised by qualified IDT members;
- 5. Client nursing care plans which are written, implemented, and revised when acute illness or health conditions develop;
- 6. Medications which are prescribed, dispensed, and administered to clients by qualified licensed staff in accordance with state laws;
- 7. The IDT's approval of decisions related to the client's health, including obtaining informed consent from client as appropriate (refer to DDD Policy 7.03, Consent);
- 8. Hospice care for clients with a terminal illness when appropriate informed consents have been obtained, reviewed, and approved by the RHC Superintendent in consultation with the attending physician or the facility manager (refer to DDD Policy 9.04, Hospice Care); and
- 9. Life-sustaining measures provided within the capabilities of the facilities when Advance Directives have not been provided by the client and the client is not enrolled in a hospice program.

SUPERSESSION

TITLE:

Division Policy Directive 340.2 Issued November, 1986

Approved:	/s/ <i>Norm Davis</i> Director, Division of Developmental Disabilities	Date:	10/29/93
	CHAPTED 0		

POLICY 9.06