

4. All participant areas shall be free of noxious odors;
5. Throw rugs or scatter rugs shall not be used in the facility;
6. All furnishings shall be clean and in good repair, and mechanical equipment shall be in working order. Equipment shall be kept covered to protect from contamination and accessible for cleaning and inspection. Broken or worn items shall be repaired, replaced, or removed promptly;
7. All equipment shall have unobstructed space provided for operation;
8. All equipment and materials necessary for cleaning, disinfecting, and sterilizing shall be provided;
9. Thermometers which are accurate to within three degrees Fahrenheit shall be maintained in refrigerators, freezers, and storerooms used for perishable and other items subject to deterioration;
10. Pesticides shall be applied in accordance with N.J.A.C. 7:30;
11. Articles in storage shall be elevated from the floor and away from walls;
12. All poisonous and toxic materials shall be identified, labeled, and stored in a locked cabinet or room that is used for no other purpose;
13. Combustible materials shall not be stored in heater rooms or within 18 feet of any heater located in an open basement;
14. Paints, varnishes, lacquers, thinners, and all other flammable materials shall be stored in closed metal cabinets or containers;
15. Unobstructed aisles shall be provided in storage areas;
16. A program shall be maintained to keep rodents, flies, roaches, and other vermin out of the facility;
17. Toilet tissue, soap dispenser, paper towels or air dryers, and waste receptacles shall be provided in each bathroom at all times;
18. All solid or liquid waste that is not regulated medical waste, garbage, and trash shall be collected, stored, and disposed of in accordance with the rules of the New Jersey Department of Environmental Protection and the New Jersey Department of Health and Senior Services. Solid waste shall be stored in insect-proof, rodent-proof, and fire-proof, non-absorbent, watertight containers with tight-fitting covers and collected from storage areas regularly, so as to prevent nuisances such as odors. Procedures and schedules shall be established and implemented for the cleaning of storage areas and containers for solid or liquid waste, garbage, and trash, in accordance with N.J.A.C. 8:24;

19. Garbage compactors shall be located on an impervious pad that is graded to a drain. The drain shall be unobstructed and connected to the sanitary sewage disposal system;

20. Plastic bags shall be used for solid waste removal. Bags shall be of sufficient strength to safely contain waste from point of origin to point of disposal and shall be effectively closed prior to disposal;

21. Draperies, upholstery, and other fabrics or decorations shall be fire-resistant and flameproof;

22. Wastebaskets and ashtrays shall be made of noncombustible materials;

23. Latex foam pillows shall be prohibited;

24. The temperature of the hot water used for bathing and handwashing shall not exceed 120 degrees Fahrenheit;

25. Equipment requiring drainage, such as ice machines, shall be drained to a sanitary connection; and

26. The temperature in the facility shall be kept at a minimum of 70 degrees Fahrenheit and a maximum of 85 degrees Fahrenheit when participants are in the facility.

SUBCHAPTER 17. TRANSPORTATION SERVICES

8:43F-17.1 Transportation services

(a) The facility shall provide safe transportation services, either directly or through contractual arrangements, to all participants who require transportation between the facility and the participant's home. No participant's total transportation time between the facility and the participant's home shall exceed two hours daily.

1. In accordance with N.J.A.C. 8:86, the facility shall accommodate the special transportation needs of the participant and the medical equipment used by the participant.

(b) The facility shall provide safe transportation services to all participants who require transportation between the facility and off-site physical or occupational therapy or speech-language pathology services.

1. Transportation between the facility and off-site rehabilitative services as described in (b) above shall not be counted against the two-hour maximum transportation time in (a) above.

(c) Vehicles shall be maintained in safe operating order.

(d) The facility shall maintain insurance on the vehicles.

(e) The facility shall comply with all applicable Department of Transportation rules promulgated under N.J.S.A. 39:1-1 et seq.

8:43F-17.2 Security and accountability during transportation

The facility shall develop and implement plans for security and accountability for the participant and the participant's personal possessions while transportation services are being provided.

SUBCHAPTER 18. QUALITY IMPROVEMENT
8:43F-18.1 Quality improvement program

(a) The facility shall establish and implement a written plan for a quality improvement program for participant care. The plan shall specify a timetable and designate a coordinator(s) of the quality improvement program and shall provide for ongoing monitoring of staff and participant care services.

(b) Quality improvement activities shall include, but not be limited to, the following:

1. At least annual review of staff qualifications and credentials;
2. At least annual review of staff orientation and staff education;
3. Evaluation of participant care services, staffing, infection prevention and control, housekeeping, sanitation, safety, maintenance of physical plant and equipment, participant care statistics, and discharge planning services;
4. Evaluation by participants and their families of care and services provided by the facility;
5. Review of medication errors and adverse medication reactions by the consultant pharmacist;
6. Audit of participant medical records (including those of both active and discharged participants) on an ongoing basis to determine if care provided conforms to criteria established by each participant care service for the maintenance of quality of care; and
7. Establishment of objective criteria for evaluation of the participant care provided by each service.

(c) The coordinator of the quality improvement program shall submit the results of the quality improvement program to the licensed operator at least annually and the results shall include, at a minimum, the deficiencies found and recommendations for corrections or improvements.

1. The coordinator of the quality improvement program shall immediately report deficiencies that jeopardize participant safety to the licensed operator.
2. The administrator shall implement measures to ensure that corrections or improvements are made.

Administrative correction.
See: 38 N.J.R. 965(b).

8:43F-18.2 Use of restraints

(a) The facility shall develop policies and procedures that support a restraint-free environment for all adult participants.

(b) The use of any restraining device shall be based on an assessment and shall require a physician, advanced practice nurse or physician assistant order.

(c) The least restrictive device shall be used, in compliance with the prescriber's order.

(d) A specific plan of care shall be developed for the use of any restraining device.

(e) In pediatric day health services facilities, pediatric safety guards may be used, in accordance with assessments and care plans.

8:43F-18.3 Personal care services

(a) To insure quality personal care, facility staff shall make daily checks to assure that participants are maintaining personal hygiene, receiving medications as prescribed (which includes assuring the renewal of prescriptions as necessary and the disposition of outdated or discontinued medications), and participating in appropriate social and recreational activities.

(b) Personal care services shall include education in assistance with activities of daily living and supervision of personal hygiene.

SUBCHAPTER 19. PEDIATRIC DAY HEALTH SERVICES FACILITIES
8:43F-19.1 Services

(a) Each pediatric day health services facility shall comply with the applicable provisions in N.J.A.C. 8:43F-1 through 18.

(b) Pediatric day health care services shall be provided for a minimum of six hours per day, exclusive of transportation time, not to exceed five days per week.

1. In accordance with N.J.A.C. 8:86-1.4(b), exceptions to the six-hour requirement may be made for specific participants, if all conditions as delineated at N.J.A.C. 8:86-1.4(b) are met.

(c) Each pediatric day health services facility shall have a system to ensure that each child's nutritional needs are met, based upon individual assessments. Parents may send foods with participants or foods may be prepared in the facility, in accordance with facility policies and procedures. The facility shall ensure that appropriate snacks and fluids are available for each child.

(d) Each pediatric day health services facility shall have arrangements for the provision of services by appropriate pediatric specialists (for example, pulmonologists, cardiologists).

(e) A medical evaluation of all participants shall be provided or arranged for by the medical consultant as needed, but at least every 60 days. The documented components of the medical evaluation for children shall be a history and physical, including developmental status, immunization status, laboratory data and a clear identification of medical needs.

(f) In pediatric day health services facilities, activities of daily living include appropriate developmental stimulation, diaper changing, and toilet training.

(g) A diversified program of activities for pediatric participants shall be planned and implemented, based on evaluation of the developmental status and needs of each child.

(h) The records of all pediatric participants shall be reviewed by the pharmaceutical consultant at least every 60 days to assure that the medication records are accurate, up-to-date and that these records indicate that medications are administered or self-administered in accordance with physician's orders.

(i) Pediatric records shall be reviewed by the pharmaceutical consultant at least every 60 days to assure medication regimen, laboratory tests, special dietary requirements, and foods used or administered concomitantly with other medications to the same recipients, are monitored for potential adverse reaction, allergies, medication interaction, contraindications, rationality, medication evaluation, and test modification; and that all irregularities or recommended changes are documented on the participant's record and reported to the medical consultant or attending physician, advanced practice nurse or physician assistant.

(j) The record shall be protected against loss, destruction, or unauthorized use. Medical records shall be retained for a period of 10 years following the most recent discharge of the participant or until the participant reaches the age of 23 years, whichever is the longer period of time, a summary sheet shall be retained for a period of 20 years, and X-ray films or reproductions thereof shall be retained for a period of five years, in accordance with N.J.S.A. 26:8-5.

(k) If a health care facility licensed by the Department provides pediatric day health services in addition to other health care services, the facility shall adhere to the rules in this chapter and to the rules for licensure of facilities providing the other health care services.

(l) A pediatric day health services facility may retain a participant who is more than six years of age, with a physician's order and assessment on at least a quarterly basis

by the registered professional nurse to assure that the participant's needs are met.

Amended by R.2005 d.388, effective December 19, 2005 (operative February 1, 2006).
See: 36 N.J.R. 5240(a), 37 N.J.R. 385(a), 37 N.J.R. 4931(a).
Rewrote the section.

8:43F-19.2 Staffing

(a) In pediatric day health services facilities, the ratio shall be one staff person to three children. There shall be at least two registered professional nurses available to participants of the facility, including one registered professional nurse on the premises of the pediatric day health services facility during all hours of operation. The ratio shall include the administrator/director and all other personnel (except the medical consultant) who are involved in direct participant care, excluding volunteers. Additional staff members shall be provided when assessment of the acuity of participant need indicates that additional staff members are required, in accordance with the facility's policies and procedures for determining staffing levels.

1. Without compromising the above required staff-participant ratio of one to three for pediatric day health services facilities, the administrator/director may be a social worker or activities director, performing dual functions of the director/social worker or the director/activities director.

(b) When there are technology dependent children served in the facility, a registered professional nurse certified for intravenous administration must be available during the hours of operation.

Amended by R.2005 d.388, effective December 19, 2005 (operative February 1, 2006).
See: 36 N.J.R. 5240(a), 37 N.J.R. 385(a), 37 N.J.R. 4931(a).
Rewrote the section.

8:43F-19.3 Use of restraints

In pediatric day health care facilities, pediatric safety guards may be used, in accordance with assessments and care plans.

8:43F-19.4 Provision of cribs or mats

(a) Pediatric facilities shall provide one crib or sleeping mat for each child.

(b) Pediatric day health care facilities shall provide space for one crib and/or sleeping pad for each child.

8:43F-19.5 Staff qualifications

(a) In a pediatric day health services facility, one of the on duty registered professional nurses shall have, at a minimum, the following credentials:

1. Possess a Bachelor of Science in Nursing degree; or
2. Have at least one year full-time pediatric experience.

(b) In a pediatric day health services facility, the director of nursing services shall have pediatric nursing experience.

(c) In a pediatric day health services facility, the administrator/director shall be a qualified health professional, such as a physician, licensed social worker or licensed clinical social worker with a pediatric concentration; a registered professional nurse with a Master of Science (MSS), or Bachelor of Science in Nursing (BSN), or Pediatric Nurse Practitioner (PNP), with pediatric experience.

(d) For pediatric day health services facilities, all direct care staff shall have current certification in cardio-pulmonary resuscitation (CPR) and shall have had pediatric experience. Those without recent pediatric experience shall be educated by the facility in growth and development and in the care of children with special needs.

(e) The medical consultant of a pediatric facility shall be board certified in pediatrics.

(f) All personnel shall receive orientation at the time of employment and at least annual in-service education regarding, at a minimum, emergency plans and procedures, the infection prevention and control services, and identification of child abuse.

(g) In pediatric facilities, the social worker shall have experience in providing social services to children.

(h) In pediatric facilities, the activities director shall have experience in planning and implementing activities for children, in addition to meeting the qualifications of activities director at N.J.A.C. 8:43F-13.2(a).

(i) Staff employed by a pediatric day health services facility shall have had pediatric experience or shall be educated by the facility in growth and development and in the care of children with special needs, and shall be provided with ongoing training regarding children with special needs.

Amended by R.2005 d.388, effective December 19, 2005 (operative February 1, 2006).

See: 36 N.J.R. 5240(a), 37 N.J.R. 385(a), 37 N.J.R. 4931(a).

Rewrote the section.

8:43F-19.6 Facility

(a) Construction standards for freestanding facilities for new buildings and alterations, renovations, and additions to existing buildings for freestanding pediatric day health services facilities shall comply with N.J.A.C. 8:43F-14.

(b) Construction standards for facilities within long-term care facilities for new buildings and alterations, renovations, and additions for pediatric day health services facilities in existing buildings which are part of long-term care facilities shall comply with N.J.A.C. 8:43F-14.

Amended by R.2005 d.388, effective December 19, 2005 (operative February 1, 2006).

See: 36 N.J.R. 5240(a), 37 N.J.R. 385(a), 37 N.J.R. 4931(a).

Rewrote the section.