

CHAPTER 43D

**STANDARDS FOR LICENSURE OF PEDIATRIC
COMMUNITY TRANSITIONAL HOMES**

Authority

N.J.S.A. 26:2H-1 et seq., specifically 26:2H-5.

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Chapter Expiration Date

Chapter 8:43D, Standards for Licensure of Pediatric Community Transitional Homes, expires on December 1, 2008.

Chapter Historical Note

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SUBCHAPTER 1. DEFINITIONS AND QUALIFICATIONS**8:43D-1.1 Scope**

The rules in this chapter pertain to all facilities which provide pediatric community transitional home services. These rules constitute the basis for the licensure of pediatric community transitional homes by the New Jersey Department of Health and Senior Services.

8:43D-1.2 Purpose

The purpose of these rules is to establish minimum licensure standards applicable to pediatric community transitional homes to promote a coordinated array of supportive personal and health care services, available 24 hours per day, to medically fragile children in a community living environment.

8:43D-1.3 Definitions

The following words and terms, when used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise:

“Activities of daily living (ADL)” means the functions or tasks that are performed by the staff of the pediatric community transitional home, or by the resident either with or without supervision or assistance by staff. Activities of daily living include at least: mobility, transferring, walking, grooming, bathing, dressing and undressing, eating, and toileting.

“Administrator” means the person who is responsible for operating the facility on a day to day basis.

“Admission agreement” means a document developed by the facility and signed by both a facility representative and the resident or the resident’s responsible party prior to admission to the facility. This agreement clearly and in plain English describes all services to be provided to the resident, the cost of the services, additional services available and the cost of these, specification of the time interval in which charges will not be increased, admission and discharge criteria and discharge appeal mechanisms.

“Advanced practice nurse” means a person who holds a certification in accordance with section 8 or 9 of P.L. 1991, c.377 (N.J.S.A. 45:11-47 or 45:11-47).

“Available” means, pertaining to equipment, present and ready for immediate use; pertaining to personnel, “available” means capable of being reached by telephone 24 hours per day.

“Bedridden” means physically unable to leave bed, even with assistance.

“Cleaning” means the removal, by scrubbing and washing, with hot water, soap or detergent and/or vacuuming where appropriate, of infectious agents and/or organic matter from surfaces on which and in which infectious agents may survive or multiply.

“Commissioner” means the New Jersey State Commissioner of Health and Senior Services.

“Communicable disease” means an illness, due to a specific infectious agent or its toxic products, which occurs through transmission of that agent or its products from a reservoir to a susceptible host.

“Conspicuously posted” means placed at a location within the facility accessible to and in plain view to patients and the public.

“Contamination” means the presence of an infectious or toxic agent in the air, on a body surface, or on or in clothes, bedding, instruments, dressings, or other inanimate articles or substances, including water, milk, and food.

“Current” means up-to-date reflecting the present calendar day, month and year.

“Department” means the New Jersey Department of Health and Senior Services.

5. Policies and procedures for maintaining confidentiality of resident records, including policies and procedures for examination of resident records by the resident (if age appropriate); resident's parent(s) or legal guardian; and other authorized persons; and for release of the resident's records to any individual outside the facility, as consented by the resident's parent or legal guardian or as required by law or third party payor;

6. Policies and procedures for the maintenance of personnel records for each employee, including at least his or her name, previous employment, educational background, credentials, driver's license number with effective date and date of expiration, (if applicable), certification and licensure (if applicable), verification of credentials, prior criminal records, records of physical examinations, job description, records of orientation and inservice education, and evaluations of job performance;

7. Policies and procedures, including content and frequency, for physical examinations and immunizations and tuberculin testing upon and during the course of employment for employees both non-contractual and contractual as well as volunteers providing direct resident care services in the facility;

8. Policies and procedures for the collection, storage and handling of regulated medical waste, consistent with all applicable Federal, State and local laws, rules and regulations;

9. Policies and procedures related to involuntary discharge in accordance with N.J.A.C. 8:43D-4.11; and

10. Other policies and procedures as specified in this chapter.

(b) The facility shall make all policy and procedure manuals available to residents, guardians, designated responsible persons, prospective applicants, and referring agencies during normal business hours or by prior arrangement.

8:43D-4.5 Resident transportation

The facility shall provide resident transportation, either directly or by arrangement, to and from health care services provided outside the facility, and shall promote reasonable plans for security and accountability for the resident and his or her personal possessions, as well as transfer of resident information to and from the provider of the service, as required by individual residents and specified in the resident's written plan of care.

8:43D-4.6 Written agreements

The facility shall have a written agreement, or its equivalent, for services not provided directly by the facility. If the facility provides care to residents with psychiatric disorders, the facility shall have a written agreement with one or more community mental health centers specifying which services will be provided by the mental health center. The written

agreement, or its equivalent, shall specify that the facility retain administrative responsibility for services rendered, and require that services be provided in accordance with the rules in this chapter.

8:43D-4.7 Reportable events and Notification Requirements

(a) The facility shall notify the Department immediately by telephone at 609-292-9900 or 1-800-792-9770 (after business hours), followed within 72 hours by written confirmation to the Department's Certificate of Need and Acute Care Licensure Program, of the following:

1. The interruption for three or more hours of basic physical plant services, such as heat, light, power, water, food, as well as staff;

2. The termination of employment of the administrator, and the name and qualifications of his or her replacement;

3. The occurrence of epidemic disease in the facility;

4. All fires, all disasters, all residents who are missing for 24 hours, and all deaths resulting from accidents or incidents in the facility or related to facility services. The written confirmation shall contain information about injuries to residents and/or personnel, disruption of services, and extent of damages;

5. Any major occurrence or incident of an unusual nature shall be reported immediately to the Department by telephone, and shall be confirmed in writing to the Department as soon as possible thereafter;

6. All alleged or suspected crimes which endanger the life or safety of residents or employees, which shall also be reported at the time of occurrence to the local police department; and

7. All suspected cases of resident abuse or exploitation which also must be reported to the Division of Youth and Family Services, Office of Institutional Abuse Investigation Bureau.

(b) The resident's family, guardian, and/or designated responsible person or community agency, along with the Department of Health and Senior Services, shall be notified immediately after the occurrence of the following:

1. The resident acquires an acute illness requiring medical care;

2. Any serious accident or incident which involves the resident and results in serious harm or injury to the resident or others, or results in the resident's arrest or detention;

3. All alleged or suspected crimes committed by or against residents as specified in N.J.A.C. 8:43D-4.7(a)6.
4. The resident is transferred from the facility; or
5. The resident expires.

(c) Such notification shall be given at the time of occurrence, and then documented in the resident's record in accordance with the documentation requirements contained in these rules.

8:43D-4.8 Notices

(a) The facility shall conspicuously post a notice that the following information is available in the facility during normal business hours, to residents, guardians or responsible parties and the general public:

1. All waivers granted by the Department;
2. A copy of the last annual licensure inspection survey report and the list of deficiencies from any valid complaint investigation during the immediately previous 12 months;
3. Policies and procedures regarding resident rights;
4. The business hours of the facility;
5. Policies and procedures for maintaining security of the facility;
6. The toll-free complaint hot line number of the Department (1-800-792-9770); and the telephone numbers of county agencies and of the Division of Youth and Family Services, Office of Institutionalized Abuse Investigation Bureau; and
7. The names of, and a means to formally contact, the owner and/or members of the governing authority.

8:43D-4.9 Maintenance of records

The facility shall maintain an annual chronological listing of residents admitted and discharged, including the destination of residents who are discharged and provide this data to the Department upon request.

8:43D-4.10 Admission and retention of residents

(a) The administrator of the pediatric community transitional home or the administrator's designee shall conduct an interview (when appropriate) with the resident, the resident's family, guardian, or interested agency, prior to or at the time of the resident's admission. The interview shall include at least orientation to the facility's policies, business hours, fee schedule, services provided, resident rights, and criteria for admission and discharge. Documentation of the resident interview shall be included in the resident's record.

(b) At the initial interview either prior to or at the time of admission of each resident, the administrator or the administrator's designee shall be provided with the name, address and telephone number of a family member, guardian, responsible party or designated community agency who shall be notified in the event of the resident's illness, incident, or other emergency.

(c) If a facility has reason to believe, based on a resident's behavior, that the resident poses a danger to himself or herself or others, and that the facility is not capable of providing proper care to the resident, then the attending primary care provider or the provider on call (see N.J.A.C. 8:43D-5.13(h)), in consultation with facility staff and a responsible person, shall determine whether the resident is appropriately placed in the facility. The facility or resident representative shall initiate the mental health screening process in accordance with N.J.S.A. 30:4-27.1 and N.J.A.C. 10:31 and, based on the results and recommendations of that screening process, shall attempt to locate a new placement if necessary.

(d) If an applicant, after applying in writing, is denied admission to the pediatric community transitional home, the applicant and/or his or her family, guardian, or designated community agency shall, upon written request, be given the reason for such denial, in writing and signed by the administrator, within 15 days of receipt of the written request.

(e) A pediatric community transitional home shall not deny a resident admission regardless of their ability to pay so long as it has capacity and the appropriate clinical services.

8:43D-4.11 Involuntary discharge

(a) Written notification by the administrator shall be provided to a resident and/or his or her family, guardian, or designated responsible person, of a decision to involuntarily discharge the resident from the facility. The notification shall contain a clear and concise statement of the basis for involuntary discharge, and the resident's/responsible person's right to appeal. A copy of the notice shall be entered into the resident's medical record.

(b) The resident and/or his or her family, guardian or designated responsible person shall have the right to appeal to the administrator any involuntary discharge from the facility. The appeal shall be in writing and a copy shall be included in the resident's record along with a copy of the written disposition or resolution of the appeal. The resident and/or his or her family, guardian or designated responsible person shall have the right to retain legal counsel to represent the resident in the appeal.

(c) In an emergency situation, for the protection of the health, safety and general welfare of the resident or others, the facility may transfer the resident without providing 30 days notice. The Department shall be notified in the event of such discharge.