

**8:43F-4.4 (Reserved)**

Recodified to N.J.A.C. 8:43F-4.2 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), 4931(a).  
Section was "Rights of each participant".

## SUBCHAPTER 5. PARTICIPANT ASSESSMENT AND PLAN OF CARE

**8:43F-5.1 Pre-admission assessment**

(a) Prior to admission of the participant, a member of the interdisciplinary team shall perform an assessment of the participant's home environment. The assessment shall be documented in the participant's medical record and shall include assessment of at least the following:

1. Living arrangements;
2. The participant's relationship with his or her family;
3. Amenities and facilities available, such as heat, toilet and bathing facilities, and provisions for preparing and storing food;
4. Existence of environmental barriers, such as stairs, not negotiable by the participant; and
5. Access to transportation, shopping, religious, social, or other resources to meet the needs of the participant.

(b) The administrator or a designee shall conduct an interview with the participant and, if possible, the participant's family prior to or at the time of the participant's admission. The interview shall include at least orientation of the participant to the facility's policies and services, hours and days on which services are provided, fee schedule, participant rights, and criteria for admission, treatment, and discharge. The administrator shall make a determination, in writing, that a Medicaid eligible participant is eligible to receive services offered by the facility. A summary of the interview shall be documented in the participant's medical record.

(c) A participant who manifests such a degree of behavioral disorder to allow the facility to reasonably believe that he or she is a danger to himself or herself or others, or whose behavior may interfere with the health or safety or well-being of other participants, shall not be admitted to or retained in the facility.

(d) A person suffering exclusively from substance abuse or misuse shall not be admitted to or retained in the facility.

(e) All participants in adult day health services facilities shall be 16 years of age or older.

New Rule 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), 4931(a).  
Former N.J.A.C. 8:43F-5.1, General services provided, recodified to N.J.A.C. 8:43F-6.1.

**8:43F-5.2 Assistance with activities of daily living**

Assistance with activities of daily living shall be provided on-site to participants who require such assistance.

**8:43F-5.3 Assessment**

(a) A registered professional nurse (RN) shall assess the nursing needs of each participant, coordinate the written interdisciplinary plan of care, and ensure the timeliness of all services.

(b) An initial assessment shall be completed for each participant on the day of admission and shall include at least personal hygiene, immediate dietary needs, medications, ambulation and diagnosis. Based on this initial assessment, a written initial plan of care shall be developed within five business days of the date the initial assessment is performed.

(c) A physician, advanced practice nurse or physician assistant shall provide orders for each participant's care beginning on the day of admission.

(d) Each physician, advanced practice nurse or physician assistant shall be executed by the nursing, dietary, social work, activities, rehabilitation or pharmacy service, as appropriate in accordance with professional standards of practice.

(e) A comprehensive assessment shall be completed for each participant within 14 days of the date the participant first attends the program. The comprehensive assessment shall include, at a minimum, evaluation of the following:

1. Cognitive patterns;
2. Communication/hearing patterns and vision;
3. Physical functioning;
4. Psychosocial well-being;
5. Medical condition/diagnoses;
6. Nutritional status and life style;
7. Oral/dental status;
8. Skin condition;
9. Medication use; and
10. Special treatment and procedures, assistive devices.

**8:43F-5.4 Development and implementation of plan of care, and discharge**

(a) A written interdisciplinary plan of care shall be developed, based on the initial and interdisciplinary assessment, within 30 days of the date the participant first attends the program. The plan of care shall include, but not be limited to, the following:

1. The participant's scheduled days of attendance;

2. The specific goals of care, if appropriate;
3. The participant's needs and preferences for himself or herself;
4. Orders for treatment or services, medications, and diet, if needed; and
5. The time intervals at which the participant's response to treatment will be reviewed.

(b) The interdisciplinary plan of care shall be based on the comprehensive assessments provided by nursing, dietary, activities, and social work staff; and when ordered by the physician, advanced practice or physician assistant, other health professionals, including pharmacy consultation, shall also provide assessments. The plan of care shall include measurable objectives with interventions based on the participant's care needs and means of achieving each goal. The complete plan of care shall include, if appropriate, rehabilitative/restorative measures, preventive intervention, and training and teaching of self-care.

(c) There shall be a scheduled review and evaluation in each service involved in the initial assessment, and in other areas that the physician, advanced practice nurse or physician assistant, or interdisciplinary team indicates are necessary. Reassessments shall be performed as necessary, based on participant's needs, but at least quarterly for adult participants.

(d) The plan of care shall include documented discharge planning, which shall address the participant's changing status that may alter the appropriateness of day care and necessitate helping the caregiver to access alternative resources.

1. The plans for discharge shall be in compliance with N.J.A.C. 8:86-1.5 regarding Medicaid eligibility criteria, if applicable.

2. As part of the documented plans for discharge, the facility shall assist the participant and, if applicable, the participant's caregiver and/or family members, in accessing alternative resources.

(e) The participant and, if indicated, the participant's caregiver and/or family members shall assist in developing the plans for discharge.

(f) The facility shall maintain signed attestations by the participant or the participant's authorized representative that the facility has provided him or her with a written explanation of the facility's policies and procedures regarding discharge planning, and that he or she agrees with it.

Public Notice: Moratorium Affecting Licensure of Adult Day Health Care Facilities and Services.  
See: 40 N.J.R. 6487(d).

## SUBCHAPTER 6. GENERAL SERVICES

### 8:43F-6.1 General services provided

(a) The facility shall provide, in accordance with the rules in this chapter, preventive, diagnostic, therapeutic, rehabilitative and habilitative services to participants who do not require 24-hour inpatient health care.

(b) The facility, at a minimum, shall provide the following services directly in the facility: nursing, dietary, activities, pharmaceutical, and social work.

(c) The facility shall provide or arrange for occupational therapy, physical therapy, and speech-language pathology services, either in the facility or outside of the facility. Habilitative services shall be provided or arranged for children and adult participants with developmental disabilities.

(d) The facility shall make referrals for services, which shall include, but not be limited to, dental, laboratory, medical, and radiological.

(e) Adult day health services shall be provided for at least five consecutive hours and no more than 12 hours daily, exclusive of transportation time, for a minimum of five days per week.

1. For Medicaid-eligible participants, the facility shall also comply with all of the provisions of N.J.A.C. 8:86.

(f) The facility shall maintain a daily record of participant attendance for each day during which services are provided, in accordance with N.J.A.C. 8:86-1.3(a)3.

Recodified from N.J.A.C. 8:43F-5.1 and 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), 4931(a).

Rewrote the section.

Former N.J.A.C. 8:43F-6.1, Mandatory staffing requirements, repealed.

### 8:43F-6.2 General staffing requirements

(a) Adult day health service facilities shall provide at least one full-time, or full-time equivalent, direct care staff member for every nine participant equivalents, calculated on the basis of the daily census. Additional staff shall be provided as needed, based on the acuity of the participants. The facility shall have adequate staff capability to provide services and supervision to the participants at all times.

(b) Transportation staff shall not be counted as direct care staff for purposes of the staff to participant ratio, except during any hours that they spend in the facility providing care to the participants. Under no circumstances shall the time spent driving participants to or from the facility be counted as direct care staff hours.