Standards Revisions for Nursing Care Centers

APPLICABLE TO NURSING CARE CENTERS

Effective January 1, 2016

Environment of Care (EC)

Standard EC.02.01.03
The organization prohibits smoking except in specific circumstances.

Element of Performance for EC.02.01.03
A 3. If the organization decides that certain patients and residents may smoke, the leaders develop written criteria identifying the specific circumstances under which they may smoke, as determined by an initial smoking assessment. The criteria also describe where and when they may smoke and whether supervision is required and the frequency of smoking reassessments. (See also PC.01.02.01, EP 13)

Human Resources (HR)

Standard HR.02.01.04
The organization permits licensed independent practitioners to provide care, treatment, and services.

Elements of Performance for HR.02.01.04
A 3. Before permitting licensed independent practitioners new to the organization to provide care, treatment, and services, the organization does the following: The organization obtains and documents information from the National Practitioner Data Bank (NPDB) on physicians and dentists. The medical director evaluates this information.

C 6. At least every two years, before permitting licensed independent practitioners to continue to provide care, treatment, and services, the organization does the following: The organization obtains and documents information from the National Practitioner Data Bank (NPDB) on physicians and dentists. The medical director evaluates this information.

Leadership (LD)

Standard LD.03.01.01
Leaders create and maintain a culture of safety and quality throughout the organization.

Element of Performance for LD.03.01.01
A 1. Leaders regularly evaluate the culture of safety and quality using a valid and reliable tool. *

*: An example of a valid and reliable tool is the Agency for Healthcare Research and Quality (AHRQ) Nursing Home Survey on Patient Safety Culture found at www.ahrq.gov.

Key: A indicates scoring category A; C indicates scoring category C; D indicates that documentation is required; M indicates Measure of Success is needed; H indicates an Immediate Threat to Health or Safety; S indicates situational decision rules apply; D indicates direct impact requirements apply; R indicates an identified risk area
Provision of Care, Treatment, and Services (PC)

Standard PC.01.02.01
The organization assesses and reassesses its patients and residents.

Element of Performance for PC.01.02.01
A 13. The organization defines, in writing, the information to be gathered during the initial assessment(s), including the following:

- The patient's or resident's current diagnosis, pertinent history, medication history (including allergies and sensitivities), current medication, and current treatments
- The patient's or resident's physical and neuropsychiatric status
- The patient's or resident's skin condition
- The patient's or resident's communication status
- The patient's or resident's functional status
- Whether or not the patient or resident smokes, and if so, the patient's or resident's ability to meet the organization's written criteria under which one may smoke (See also Standard EC.02.01.03)
- The patient's or resident's rehabilitation status, potential, and needs
- The patient's or resident's nutritional and hydration status
- The patient's or resident's oral health status, including the condition of the oral cavity, teeth, and tooth-supporting structures; the presence or absence of natural teeth or dentures; and the ability to function with or without natural teeth or dentures
- The patient's or resident's pain status, including recent pain history, origin, location, severity, alleviating, and exacerbating factors; current treatment for pain; and response to treatment
- The patient's or resident's psychosocial and spiritual needs
- The patient's or resident's cultural and ethnic factors that can influence care, treatment, and services
- The patient's or resident's personal preferences regarding schedules, activities, and grooming
- For the dying patient or resident, the social, spiritual, and cultural variables that influence both the patient's or resident's and family's perceptions and experience of the process of dying