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- 1) <u>Heading of the Part</u>: Illinois Veterans' Homes Code
- 2) Code Citation: 77 Ill. Adm. Code 340
- 3) <u>Section Number</u>: <u>Adopted Action</u>: 340.1300 Amended
- 4) <u>Statutory Authority</u>: Nursing Home Care Act [210 ILCS 45]
- 5) Effective Date of Amendment:
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) <u>Does this rulemaking contain incorporations by reference</u>? No
- 8) A copy of the adopted amendments, including any material incorporated by reference, is on file in the agency's principal office and is available for public inspection.
- 9) Notice of Proposal Published in Illinois Register: August 3, 2012; 36 Ill. Reg. 12238
- 10) Has JCAR issued a Statement of Objections to these rules? No
- 11) Difference(s) between proposal and final version:

Various typographical, grammatical, and form changes were made in response to the comments from JCAR.

- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes
- 13) Will this rulemaking replace an emergency rule currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) <u>Summary and Purpose of Rulemaking</u>: The Illinois Veterans' Homes Code (77 Ill. Adm. Code 340) regulates all aspects of resident care, including mandating that facilities draft policies and procedures governing resident care services provided by the facility.

This rulemaking implements Public Act 96-0389, enacted by the General Assembly in 2009. PA 96-0389 mandates that facilities draft "a policy to identify, assess, and develop

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strategies to control risk of injury to residents and nurses" in the transferring and moving of residents.

16) <u>Information and questions regarding these adopted amendments shall be directed to:</u>

Susan Meister Division of Legal Services Department of Public Health 535 West Jefferson, 5th Floor Springfield, Illinois 62761

e-mail: dph.rules@illinois.gov

The full text of the adopted amendments begins on the next page:

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TITLE 77: PUBLIC HEALTH CHAPTER I: DEPARTMENT OF PUBLIC HEALTH SUBCHAPTER c: LONG-TERM CARE FACILITIES

PART 340 ILLINOIS VETERANS' HOMES CODE

SUBPART A: GENERAL PROVISIONS

Section	
340.1000	Definitions
340.1010	Incorporated and Referenced Materials
340.1110	General Requirements
340.1115	Federal Veterans' Regulations
340.1120	Application for License
340.1125	Alzheimer's Special Care Disclosure
340.1130	Criteria for Adverse Licensure Actions
340.1140	Denial of Initial License
340.1150	Revocation or Denial of Renewal of License
340.1160	Inspections, Surveys, Evaluations, and Consultations
340.1170	Presentation of Findings by the Department
340.1190	Ownership Disclosure
340.1200	Monitor and Receivership
340.1210	Determination of a Violation
340.1220	Determination of the Level of a Violation
340.1225	Administrative Warning
340.1230	Plans of Correction and Reports of Correction
340.1240	Calculation of Penalties (Repealed)
340.1245	Conditions for Assessment of Penalties
340.1250	Reduction or Waiver of Penalties
340.1255	Supported Congregate Living Arrangement Demonstration
340.1260	Waivers

SUBPART B: POLICIES AND FACILITY RECORDS

Section	
340.1300	Facility Policies
340.1305	Request for Resident Criminal History Record Information
340.1310	Admission, Retention and Discharge Policies
340.1314	Criminal History Background Checks for Persons Who Were Residents on May

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	10, 2006 (Repealed)
340.1315	Identified Offenders
340.1316	Discharge Planning for Identified Offenders
340.1317	Transfer of an Identified Offender
340.1320	Disaster Preparedness
340.1330	Incidents and Accidents
340.1335	Infection Control
340.1340	Facility Record Requirements
340.1350	Personnel Policies
340.1351	Whistleblower Protection
340.1360	Initial Health Evaluation for Employees
340.1370	Administrator
340.1375	Personnel Requirements
340.1376	Registry of Certified Nursing Assistants
340.1377	Health Care Worker Background Check
340.1378	Resident Attendants
340.1380	Contacting Local Law Enforcement
	SUBPART C: RESIDENT RIGHTS
Section	
340.1400	Implementation of Resident Rights and Facility Responsibilities
340.1410	General
340.1420	Contract Between Resident and Facility
340.1430	Residents' Advisory Council
340.1440	Abuse and Neglect
340.1450	Communication and Visitation
340.1460	Resident's Funds
340.1470	Transfer or Discharge
340.1480	Complaint Procedures
340.1490	Private Right of Action
	SUBPART D: HEALTH SERVICES
	SUBFART D. HEALTH SERVICES
Section	
340.1500	Medical Care Policies
340.1505	Medical, Nursing and Restorative Services
340.1510	Communicable Disease Policies
340.1520	Tuberculin Skin Test Procedures
340.1530	Physician Services

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340.1535	Dental Programs
340.1540	Life-Sustaining Treatments
340.1550	Obstetrical and Gynecological Care
340.1560	Nursing Personnel
340.1570	Personal Care
340.1575	Care and Treatment of Sexual Assault Survivors
340.1580	Restraints
340.1590	Nonemergency Use of Physical Restraints
340.1600	Emergency Use of Physical Restraints
340.1610	Unnecessary, Psychotropic, and Antipsychotic Drugs
340.1620	Medication Administration (Repealed)
340.1630	Self-Administration of Medication (Renumbered)
340.1640	Vaccinations
340.1645	Language Assistance Services
	SUBPART E: MEDICATIONS
Section	
340.1650	Medication Policies and Procedures
340.1655	Compliance with Licensed Prescriber's Orders
340.1660	Administration of Medication
340.1665	Control of Medication
340.1670	Labeling and Storage of Medication
340.1675	Self-Administration of Medication
	SUBPART F: RESIDENT LIVING SERVICES
Section	
340.1700	Recreational and Activity Programs
340.1710	Social Services
340.1720	Work Programs
340.1730	Volunteer Program
	SUBPART G: RESIDENT RECORDS
Section	
340.1800	Resident Record Requirements
340.1810	Content of Medical Records
340.1820	Records Pertaining to Resident's Property
340.1830	Retention, Transfer, and Inspection of Records

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340.1840 Confidentiality of Resident's Records

SUBPART H: FOOD SERVICE

Section	
340.1900	Food Service Staff
340.1910	Diet Orders
340.1920	Meal Planning
340.1930	Therapeutic Diets (Repealed)
340.1940	Menus and Food Records
340.1950	Food Preparation and Service
340.1960	Kitchen Equipment, Utensils and Supplies

SUBPART I: PHYSICAL PLANT SERVICES, FURNISHINGS, EQUIPMENT AND SUPPLIES

Section	
340.2000	Maintenance
340.2010	Water Supply, Sewage Disposal and Plumbing
340.2020	Housekeeping
340.2030	Laundry Services
340.2040	Furnishings
340.2050	Equipment and Supplies
240 TARIE A	Haat Inday Table/Apparant Tamparatur

340.TABLE A Heat Index Table/Apparent Temperature Guidelines for the Use of Various Drugs

AUTHORITY: Implementing and authorized by the Nursing Home Care Act [210 ILCS 45].

SOURCE: Emergency rule adopted at 18 Ill. Reg. 10391, effective June 21, 1994, for a maximum of 150 days; emergency rule expired November 18, 1994; adopted at 19 Ill. Reg. 5679, effective April 3, 1995; emergency amendment at 20 Ill. Reg. 496, effective January 1, 1996, for a maximum of 150 days; emergency expired May 29, 1996; amended at 20 Ill. Reg. 10045, effective July 15, 1996; amended at 20 Ill. Reg. 12013, effective September 10, 1996; amended at 22 Ill. Reg. 3959, effective February 13, 1998; amended at 22 Ill. Reg. 7162, effective April 15, 1998; amended at 23 Ill. Reg. 1038, effective January 15, 1999; amended at 23 Ill. Reg. 7931, effective July 15, 1999; amended at 24 Ill. Reg. 17225, effective November 1, 2000; amended at 25 Ill. Reg. 4869, effective April 1, 2001; amended at 26 Ill. Reg. 4870, effective April 1, 2002; amended at 26 Ill. Reg. 10589, effective July 1, 2002; emergency amendment at 27 Ill. Reg. 2222, effective February 1, 2003, for a maximum of 150 days;

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emergency expired June 30, 2003; amended at 27 Ill. Reg. 5903, effective April 1, 2003; emergency amendment at 27 Ill. Reg. 14230, effective August 15, 2003, for a maximum of 150 days; emergency expired January 11, 2004; amended at 27 Ill. Reg. 15904, effective September 25, 2003; amended at 27 Ill. Reg. 18148, effective November 15, 2003; amended at 28 Ill. Reg. 11209, effective July 22, 2004; emergency amendment at 29 Ill. Reg. 11931, effective July 12, 2005, for a maximum of 150 days; emergency rule modified in response to JCAR Recommendation at 29 Ill. Reg. 15208, effective September 23, 2005, for the remainder of the maximum 150 days; emergency amendment expired December 8, 2005; amended at 29 Ill. Reg. 12924, effective August 2, 2005; amended at 30 Ill. Reg. 1452, effective January 23, 2006; amended at 30 Ill. Reg. 5303, effective March 2, 2006; amended at 31 Ill. Reg. 6098, effective April 3, 2007; amended at 31 Ill. Reg. 8841, effective June 6, 2007; amended at 33 Ill. Reg. 9384, effective June 17, 2009; amended at 34 Ill. Reg. 19214, effective November 23, 2010; amended at 35 Ill. Reg. 3442, effective February 14, 2011; amended at 35 Ill. Reg. 11596, effective June 29, 2011; amended at 37 Ill. Reg. 2330, effective February 4, 2013; amended at 37 Ill. Reg. _______, effective ________.

SUBPART B: POLICIES AND FACILITY RECORDS

Section 340.1300 Facility Policies

- a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures, which shall be formulated with the involvement of the administrator. The These policies shall complybe in compliance with the Act and this Part. The These written policies shall be followed in operating the facility and shall be reviewed at least annually by the facility's advising physician or the medical advisory committee, as evidenced by a dated signature.
- b) <u>AnThere shall be an</u> advisory physician, or a medical advisory committee composed of physicians, who shall be responsible for advising the administrator on the overall medical management of the residents and the staff of the facility. If the facility employs a house physician, the house physician may be the advisory physician.
- c) All of the information contained in the policies shall be available to the public, staff and, residents, and for review by the Department personnel.
- d) The These written policies shall include, at a minimum, the following provisions:
 - 1) Admission, transfer, and discharge of residents, including the types of

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services offered by the facility that would cause residents to be admitted, transferred or discharged, and transfers within the facility from one room to another:

- 2) Resident care services, including physician services, emergency services, personal care and nursing services, restorative services, activity services, pharmaceutical services, dietary services, social services, clinical records, dental services, and diagnostic <u>servicesservice</u> (including laboratory and x-ray):
- 3) <u>A policy prohibiting Prohibition against</u> blood transfusions, unless the facility is hospital based and appropriate services are available in case of an adverse reaction to the transfusions; and-
- 4) A policy to identify, assess, and develop strategies to control risk of injury to residents and nurses and other health care workers associated with the lifting, transferring, repositioning, or movement of a resident. The policy shall establish a process that, at a minimum, includes all of the following:
 - Analysis of the risk of injury to residents and nurses and other health care workers taking into account the resident handling needs of the resident populations served by the facility and the physical environment in which the resident handling and movement occurs.
 - B) Education of nurses in the identification, assessment, and control of risks of injury to residents and nurses and other health care workers during resident handling.
 - <u>Evaluation of alternative ways to reduce risks associated with resident handling, including evaluation of equipment and the environment.</u>
 - D) Restriction, to the extent feasible with existing equipment and aids, of manual resident handling or movement of all or most of a resident's weight, except for emergency, life-threatening, or otherwise exceptional circumstances.
 - E) Procedures for a nurse to refuse to perform or be involved in resident handling or movement that the nurse, in good faith,

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believes will expose a resident or nurse or other health care worker to an unacceptable risk of injury.

- F) <u>Development of strategies to control risk of injury to residents and nurses and other health care workers associated with the lifting, transferring, repositioning, or movement of a resident.</u>
- G) Consideration of the feasibility of incorporating resident handling equipment or the physical space and construction design needed to incorporate that equipment when developing architectural plans for construction or remodeling of a facility or unit of a facility in which resident handling and movement occurs. (Section 3-206.05 of the Act)
- e) For the purposes of subsection (d)(4):
 - 1) "Health care worker" means an individual providing direct resident care services who may be required to lift, transfer, reposition, or move a resident.
 - 2) "Nurse" means an advanced practice nurse, a registered nurse, or a licensed practical nurse licensed under the Nurse Practice Act. (Section 3-206.05 of the Act)
- The facility shall have a written agreement with one or more hospitals to, which indicates the hospital or hospitals will provide diagnostic, emergency and routine acute care hospital services. The Department will waive this (This requirement ifmay be waived when the facility can document to the satisfaction of the Department that it is unable to meet the requirement because of its y reason of remote location or refusal of local hospitals to enter an agreement, it is unable to effect such an agreement.)
- The advisory physician or medical advisory committee shall develop policies and procedures to be followed during the various medical emergencies that may occur from time to time in a facility. These medical emergencies include, but are not limited to, such things as:
 - Pulmonary emergencies (for example, airway obstruction, foreign body aspiration, and acute respiratory distress, failure, or arrest):

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2) Cardiac emergencies (for example, ischemic pain, cardiac failure; or cardiac arrest):

3) Traumatic injuries (for example, fractures, burns; or lacerations):

4) Toxicologic emergencies (for example, untoward drug reactions or overdoses); and:

5) Other medical emergencies (for example, convulsions or shock).

h)g) The facility shall maintain in a suitable location the equipment to be used during the emergencies detailed in subsection (g)(f) of this Section. This equipment shall include, at a minimum, a portable oxygen kit, including a face mask or cannula, an airway, and a bag_valve_mask manual ventilating device.

(Source: Amended at 37 Ill. Reg. _____, effective _____)