

## OPTIONAL

This Check list has been developed as a tool to evaluate and monitor areas pertaining to the Health Care rule in Adult Care and Family Care Homes. Licensure regulations for adult and family care homes have been referenced for the items that are specifically rule based. Items on the checklist that are recommendations that may prevent problems from developing do not have a licensure regulation referenced.

### **10A NCAC 13F/G .0902 HEALTH CARE**

- (a) An adult care home shall provide care and services in accordance with the resident's care plan.
- (b) The facility shall assure referral and follow-up to meet the routine and acute health care needs of residents.
- (c) The facility shall assure documentation of the following in the resident's record:
  - (1) facility contacts with the resident's physician, physician service, other licensed health professional, including mental health professional, when illnesses or accidents occur and any other facility contacts with a physician or licensed health professional regarding resident care.
  - (2) all visits of the resident to or from the resident's physician, physician service or other licensed health professional, including mental health professional, of which the facility is aware.
  - (3) written procedures, treatments or orders from a physician or other licensed health professional; and
  - (4) implementation of procedures, treatments or orders specified in Subparagraph (c)(3) of this Rule
- (d) The follow shall apply to the resident's physician or physician service
  - (1) The resident or the resident's responsible person shall be allowed to chooses a physician or physician service to attend the resident.
  - (2) When the resident cannot remain under the care of the chosen physician or physician service, the facility shall assure that arrangements are made with the resident or responsible person for choosing and securing another physician or physician service within 45 days or prior to the signing of the care plan as required in Rule .0802 of this Subchapter.

|                                                                                                                                 | Yes | No | Comments |
|---------------------------------------------------------------------------------------------------------------------------------|-----|----|----------|
| 1. The facility provides care and services in accordance with the resident's care [;am 10A NCAC 13F/G .0902(a)                  |     |    |          |
| 2. The facility assures referral and follow up to meet the routine health care needs of the resident<br>10A NCAC 13F/G .0902(b) |     |    |          |
| 3. The facility assures referral and follow up to meet the acute health care needs of the resident<br>10A NCAC 13F/G .0902(b)   |     |    |          |

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|----------|
| <p>4. The facility documents the following in the residents record:<br/>10A NCAC 13F/G .0902(c)</p> <ul style="list-style-type: none"> <li>• Facility contact with the resident's physician, physician service or other licensed health professional regarding resident care</li> <li>• Facility contacts with the resident's physician, physician service or other licensed health professional when illness/ accidents occur</li> <li>• Documentation of all visits of the resident to or from the resident's physician, physician service, or other licensed health professional of which the facility is aware</li> <li>• Documentation of written procedures, treatments or orders from a physician or other licensed health professional</li> <li>• Implementation of procedures</li> </ul> |     |    |          |
| <p>5. The following shall apply to the resident's physician or physician service:<br/>10A NCAC 13F/G .0902(d)</p> <ul style="list-style-type: none"> <li>• The resident or the resident's responsible person was allowed to choose a physician or physician service to attend the resident</li> <li>• If the resident cannot remain under the care of the chosen physician or physician service, the facility shall assure that arrangements are made with the resident or responsible person for choosing and securing another physician or physician service within 45 days or prior to the signing of the care plan</li> </ul>                                                                                                                                                                 |     |    |          |
| 6. There is a system in place to assure care plans are current and reflect the resident care needs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |     |    |          |
| 7. There is a system in place to identify residents requiring lab work                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |     |    |          |

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|                                                                          | Yes | No | Comments |
|--------------------------------------------------------------------------|-----|----|----------|
| 8. There is a system in place to assure residents lab work is drawn      |     |    |          |
| 9. There is a system in place to assure follow up appointments are kept  |     |    |          |
| 10. There is a system in place to receive and carry out new orders       |     |    |          |
| 11. There is a system in place to assure treatments are done as ordered. |     |    |          |
| 12. There is a system in place to assure FSBS are done as ordered        |     |    |          |
| 13. There is a system in place to assure weights are done as ordered.    |     |    |          |