

<u>Question</u>	<u>Response</u>
<i>Nurse Staffing Requirements.</i>	DRAFT 820 NURSE GUIDANCE.
Within Part 820 Stabilization and Rehabilitation elements what are the nurse staffing requirements?	Per 820.6 the nurse staff hours are required as: <ul style="list-style-type: none"> • Sufficient to meet the needs of the resident population ; • Will include Registered nurse and weekend nursing staff (LPN) as sufficient to resident need, on-site daily and to supervise Licensed Practical Nurse (LPN); • LPN available on-site daily for support to residents and for [support] oversight; and. • Documentation of self-administered medication.
In the Stabilization element are Nursing staff required to be on site 24/7?	Within the Stabilization element medical staffing hours must accommodate 7 day a week intake of new patients. Programs are not required to have 24 hour a day intake ability. Programs must have a daily intake policy and procedures to accommodate this requirement.
Within the Part 820 Reintegration element what is the nursing staffing requirement?	Part 820 does not require the reintegration element to be staffed by medical staff (including nurses). The expectation is that the clients within this element would be linked to physical health services within the community.
<i>What are the Part 820 Medical Staff availability requirements?</i>	
Within the Part 820 Stabilization and Rehabilitation elements are medical staff required to be on site 24/7?	In collaboration with their medical director, programs will establish internal policies and procedures for medical staffing availability as sufficient to meet the demographic needs of the population served.
Within the Part 820 Reintegration what is the medical staffing requirement?	Part 820 does not require the reintegration element to be staffed by medical staff (including nurses). The expectation is that the clients within this element would be linked to physical health services within the community.
<i>Supervision:</i>	
Within Part 820 Stabilization and Rehabilitation: elements what is the supervisory roles of Nurses?	Within Part 820 Stabilization and Rehabilitation Elements, Nurse Supervisor duties may include, but are not be limited to: supervising day to day nursing operations; and, providing direct LPNs supervision.
Within the Part 820 Stabilization and Rehabilitation what is the supervisory role of the Medical Director.	Within a designated Part 820 Stabilization and Rehabilitation element , the intended role of the medical director is to: <ul style="list-style-type: none"> • provide oversight of the development of policies and procedures to ensure the

	<p>provision of routine services, including but not limited to, means for the prompt detection and referral of health problems through adequate medical surveillance and regular examination as needed;</p> <ul style="list-style-type: none"> • implement medical orders regarding treatment of medical conditions and reporting of communicable diseases and infection in accordance with law; and, • supervise medical staff in the performance of medical services (not to supersede the nursing supervisor’s role. (see above)
Reintegration	<p>Providers who choose to have patients self-administer their medications with direct clinical staff oversight must have a RN trainer, who was OASAS trained.</p> <p>Providers who allow patients to self-administer their medication without direct clinical staff oversight must have:</p> <ol style="list-style-type: none"> 1. A process for patients to be determined competent to self-administer medication. 2. A process for patients to lock their medication securely for his/her access only. 3. A process for staff to periodically monitor that patients are self-administering their medications appropriately. 4. A process for safe medication disposal.
Medication:	
Will Nurses be administering patient specific medication in any of the Part 820 elements?	<p>Patients requiring administering of medication would not be medically appropriate for any/ all Part 820 elements. Therefore, nurses generally will not administer patient specific medication. Nurses may monitor medications that are brought to treatment; or, prescribed by a physician or nurse practitioner to the patient. Nurses may when necessary administer medication to patients as allowed within their scope of practice with a non-patient specific physician or nurse practitioner order and facility protocol which meet the NYSED practice guidance.</p>
What are the Part 820 requirements regarding Emergency Medical Kits?	<p>Emergency medical kit. Part 820 “General program standards” affirms that All programs must maintain an emergency medical kit at each certified location; such kit must include basic first aid and at least one naloxone or other opioid related overdose treatment emergency overdose prevention kit the use of which is subject to applicable laws and regulations. Programs must develop and implement a plan to have staff and residents, where appropriate, trained in the prescribed use of a naloxone or other opioid related overdose treatment kit such that it is available, to the maximum extent possible, for use during all program hours of operation.</p>

Dispensing

Pharmacy refers to the preparation and dispensing of drugs as well as the counseling of patients in the proper use of these drugs.

As per NYSED 6810. Prescriptions 1. No drug for which a prescription is required by the provisions of the Federal Food, Drug and Cosmetic Act or by the commissioner of health shall be distributed or dispensed to any person except upon a prescription written by a person legally authorized to issue such prescription. Such drug shall be compounded or dispensed by a licensed pharmacist, and no such drug shall be dispensed without affixing to the immediate container in which the drug is sold or dispensed a label bearing the name and address of the owner of the establishment in which it was dispensed, the date compounded, the number of the prescription under which it is recorded in the pharmacist's prescription files, the name of the prescriber, the name and address of the patient, and the directions for the use of the drug by the patient as given upon the prescription. All labels shall conform to such rules and regulations as promulgated by the commissioner pursuant to section sixty-eight hundred twenty-nine of this article. The prescribing and dispensing of a drug which is a controlled substance shall be subject to additional requirements provided in article thirty-three of the public health law.

Drug dispensing is the preparation, packaging, labeling, record keeping, and transfer of a prescription **drug** to a patient or an intermediary, who is responsible for administration of the **drug**.

Administration

NY State Education Department defines administration of medications as “a task that involves not only the correct identification of the medication and the accurate implementation of instructions from the authorized prescriber, such as a physician or nurse practitioner, but the task also involves the critical process of identifying when an individual’s response to the medication or change in condition requires the medication to be held until further consultation takes place with the prescriber. As such, the administration of medication by others has been restricted to appropriately licensed professionals, with limited exceptions”.

Medication Administration can be broken down into the component parts necessary to ensure the (1) right patient receives the (2) right dose of the (3) right medication (4) at the right time (5) in the right route and that the (6) right documentation is done after the patient received the medication for the (7) right reason and experienced the (8) right response to it. (Modified - page 48 OPWDD Medication Administration Instructor’s Manual)

Self-Administration

NY State Education Department also states that “unlicensed persons may assist self –directed individuals in taking their medications in community settings such as adult homes. It is expected that training will be provided to unlicensed person, with written directions that can be

referenced, to ensure that all unlicensed persons approach self-directed individuals in a consistent manner when assisting them to take their medications.

The term **self-administration** of medication means that competent patients are responsible for **administering** their own medicines, with the nurse and pharmacist acting as educators and supervisors of this process.

Observing patient self-administration: The unlicensed staff member is trained and determined to be capable and competent to be able to safety monitor the patient self-administer their medication under the “rights” of medication administration.