# Addendum to Provide Care for Consumers with Inhalation assistive device in an Adult Residential Facility

## Section 1: Purpose/Methods/Goals

care home is licensed to provide care to developmentally disabled individuals. Our goal is to be able to accept and/or retain consumers who have a restricted health condition. We want the consumer to have continuity of care and be able to stay in the, care home if a health problem develops. Our home will provide care for consumers with the following health conditions: Use of inhalation assisted device. Our home will provide care for consumers with the following conditions: Inhalation-Assistive Devices, positive pressure machines, commonly known as IPPB (Intermittent Positive Pressure Breathing) or C-PAP (Continuous Positive Airway Pressure) often used for sleep apnea. This does not include ventilators (only 24 hour nursing can provide services for this). We will adhere to Title 22 regulations and provide the best care possible for the consumer.

#### **Section 2: Medical**

- 1. If the consumer is mentally and physically capable of operating/caring for his/her own inhalation assistive device, then the role of the Administrator will be to monitor the procedures, document them, and provide all supplies as needed, and monitor the consumer's ability to provide self care.
- 2. If the consumer is unable to operate the device then:
  - B. The Administrator will have a licensed health professional operate the device. The licensed health professional can be from home health agency
  - C. The licensed health professional will train non-licensed staff to operate the device.
- 3. Administrator will insure that the inhalation assistive device is functional, and will be removed from the facility when no longer prescribed for use by the consumer, as detailed in the California Code of Regulations, Title 22, 80092.3
- 4. Administrator insures that the room containing the inhalation-assistive device is large enough so that consumers and staff can safely move around when the device is in the room.
- 5. Administrator will insure that facility staff has the knowledge and ability to care for the inhalation-assistive device, following manufacturer's recommendations.
- 6. Administrator will provide a specialized diet, if physician prescribes.
- 7. Administrator will insure that consumer's response to inhalation-assistive device use will be documented in the consumer health file.
- **8.** In an emergency, the staff present will call 911 and notify the consumer's physician.

## Section 3: Admission/intake /discharge

- 1. Before admission to care home the Administrator will do a pre-admission appraisal to insure that the care home can meet the consumer's needs. A functional capabilities assessment will be done as part of this appraisal.
- 2. Staff training will be provided prior to consumer's admission, which shall include hands-on instruction in both general procedures and client-specific procedures.
- 3. If the Administrator feels the care home no longer meets the consumer's needs, the Administrator will give the consumer and the placing agency a 30 day notice. If an emergency situation exists, an immediate notice, verbal and written, will be given to the placing agency, consumer and authorized representative.

#### Section 4: Needs and Services

- 1. Within 30 calendar days of admission, the consumer will have a written medical assessment by a licensed physician, or designee. This information will be used to develop the Needs and Services Plan.
- 2. The Needs and Services Plan will be developed jointly with the consumer and placing agency within 30 days of admission.
- 3. The Restricted Health Condition Care Plan (RHCCP) will be developed in conjunction with a licensed health professional for those restricted health conditions stated in 80092. The plan will be developed within 30 days of admission.
- 4. The RHCCP shall neither require nor recommend that the licensee or any facility personnel or any other person providing care, other than a physician or unlicensed health professional, implement any health care procedures that may legally be provided only by a physician or licensed health professional.

#### **Section 5: Nutrition/menu**

1. If the physician prescribes a specialized diet, Administrator will instruct staff on how to provide this diet. Consultation with a dietitian will be done as needed. For example, if apnea may be related to obesity, physician may prescribe caloric reduction

# **Section 6: In-service training for staff**

- 1. A licensed health professional will train staff to monitor and care for the consumer's inhalation device. The licensed health professional will be: a staff member.
- 2. Administrator will insure that training is done for all staff at least annually and for new staff as part of orientation, prior to providing services to the consumer. This will be documented and documentation kept in personnel files of facility.

3. Administrator will attend trainings given by licensed staff and obtain a copy of the training materials. Training shall include hands on instruction specific to (consumer) and general procedures

## **Section 7: Reporting requirements**

1. Administrator will call, email or fax notification to CCL when a consumer with a restricted health condition is admitted to the care home. The presence of a restricted health condition will be noted on the roster of clients for the care home.

# **Section 8: Personal rights**

- 1. Consumers and their representative will be informed of client's rights, in accordance with California Code of Regulations, Title 22, 82072. This includes the right to refuse treatment and to be informed of what the placement consequences of such action would be.
- 2. If a client refuses medical services, the licensee shall immediately notify all persons involved and shall participate in developing a plan for meeting the client's needs, which may result in an eviction notice to the consumer.

3/09