

State of Iowa Department of Corrections

Policy and Procedures

Policy Number: HSP-606

Applicability: DOC

Policy Code: Public Access

Iowa Code Reference: N/A

Chapter 6: Health Services

Sub Chapter: Acute/ Specialty Services

Related DOC Policies: HSP-601

Administrative Code Reference: N/A

Subject: Medical Assisted Living

ACA Standards: 5-ACI-6C-06, 5-ACI-6A-07

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Authority:

1. PURPOSE

To outline the scope of assisted living level of care and admission criteria.

2. POLICY

The IDOC will provide designated living space for those patients that require assistance with activities of daily living, are physically disabled, geriatric and/or chronically ill.

CONTENT

- A. Intra System Admission
- B. Inter System Admission
- C. Assisted Living Care Admission

3. DEFINITIONS

A. Assisted Living Unit:

An area in the facility accommodating patients for an extended period of time that provides a combination of specialized housing, personalized supportive services and health care designed to respond to the individual needs of those who need help in activities of daily living, but do not need skilled nursing care. The assisted living beds are designated per institutional procedure. Minimum standards for the assisted living unit include:

1. A physician available on call 24 hours per day.
2. A licensed nurse directing the care of patients.
3. An active treatment plan developed by qualified health care professionals.
4. A manual of nursing care procedures consistent with the Nursing Practice Act of Iowa is available on the unit. (Lippincott Manual of Nursing Practice Current Edition)

B. Assisted Living Care:

Level of nursing care determined by severity and/or a combination of factors that require assisted living and/or medical intervention for an extended period of time. Factors may include but are not limited to:

1. Dementia and/or other memory disorders.
2. Chronic medical conditions requiring on-going care/treatments.
3. Disease conditions requiring supervision and/or assistance with ADLs, i.e. eating, bathing, dressing, toileting, walking, etc.

C. See IDOC Policy **AD-GA-16** for additional Definitions.

4. PROCEDURES

A. Intra System Admission

If it becomes apparent that a patient who is currently residing in general population requires medical assistance for an extended period of time, they are referred and discussed at the weekly admissions meeting.

B. Inter System Admission

Inter system transfer to the IMCC Assisted Living Unit is accomplished by completion of DOC form **HSF-601A**, *Application for Admission to the IMCC SNU Medical Units*. The IMCC Admissions Committee reviews these applications and communicates the decision for appropriateness at their weekly meeting. Emergency request for admission is addressed to the DOC Nursing Administrator or designee for prompt response.

C. Assisted Living Care Admission:

1. Upon receipt of a patient into the assisted living unit, the licensed nurse will document the following in the medical record:
 - a. Admission will require a head to foot written health assessment by a licensed nurse in the EMR.
 - b. Pain assessment and interventions
 - c. Referrals to other clinicians as appropriate
 - d. Medications and treatment orders
 - e. Initiate nursing care plan
 - f. Current therapies
2. The medical practitioner will provide medical orders for treatment that covers the following items, at a minimum:
 - a. Medication
 - b. Activity level/diet
 - c. Reporting parameters to nursing staff
 - d. Pain assessment and treatment

- e. Advance directive status-IPOST/DNR

3. Continuing Assessments:

- a. The medical practitioner will assess who resides on the assisted living unit monthly and document in the EMR.
- b. The medical practitioner will be present on the unit to consult with the nurse once a week.
- c. A licensed nurse will do a monthly head to toe assessment.
- d. Sick call is done on the unit by nursing staff.

4. Discharge

- a. Requires an order from practitioner.
- b. The Assisted Living Unit nurse will call report to the receiving institution/housing unit as appropriate to transfer care.
- c. The Assisted Living Unit nurse will assure continuity of care for medications, treatment and appointments by assuring the ICON Medical record is accurate with the current plan of care and scheduled appointments.
- d. The Assisted Living Unit nurse will complete a Nurse Encounter in the medical record with discharge instructions and the date and time of report to the receiving institution/living unit.