

# **Addendum to Provide Care for Consumers with need for enemas/suppositories 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: Need for enemas or suppositories. We will adhere to Title 22 regulations section 80092.5, and provide the best care possible for the consumer.

## **Section 2: Medical**

1. If the consumer is mentally and physically capable of caring for his/her own fecal impaction removal, enema, or suppository, the role of the Administrator will be to, monitor the procedures, document consumer response, and provide all supplies as needed, and monitor the consumer's ongoing ability to provide self care.
2. If the consumer is unable to provide fecal impaction removal, enema, or suppository, independently, the role of the Administrator will be to insure privacy when bowel care procedures are provided:
  1. a. The Administrator insures that a licensed health professional performs the fecal impaction removal, enema, or insert suppositories, when the consumer is unable to do so himself/herself. The licensed health professional will be from home health agency
  2. The licensed health professional will train non-licensed staff, (using FDA approved equipment):
    - Monitor the consumer's ongoing ability to follow the physician's instructions and provide his/her own routine care.
    - To assist with evacuation/waste clean up procedure.
    - Provides licensee with written documentation outlining the procedures and the names of facility staff who received the training.
    - Reviews staff performance as often as he/she thinks is necessary, but at least once yearly.

3. Administrator will insure that facility staff has the knowledge and ability to care for bowel care supplies and equipment, per manufacturer's recommendations.
4. Administrator will insure that consumer's response to bowel care procedure will be documented in the consumer health file.
5. 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 how to provide diet. Consultation with a dietitian will be done as needed. For example, if stool consistency is dry, physician may prescribe increased fiber and fluid.

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

1. A licensed health professional will train staff to monitor the consumer's bowel regime. The licensed health professional will be: a staff member.
2. Administrator will ensure 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.