Short-term care, including respite services and adult day or night care.  (1) The nursing home may provide short-term care to individuals which include:
   (a) Respite services to provide relief care for families or other caregivers of individuals with disabilities which must:
      (i) Provide short-term care and supervision in substitution for the caregiver;
      (ii) Be for short-term stays up to a maximum of thirty-one days; and
      (iii) Not be used as a short-term placement pending the individual's admission to the nursing home.
   (b) Adult day or night care to provide short-term nursing home care:
      (i) Not to exceed sixteen hours each day; and
      (ii) May be on a regular or intermittent basis.
(2) The nursing home providing respite services, and adult day or night care must:
   (a) Develop and implement policies and procedures consistent with this section;
   (b) Ensure that individuals receiving short-term services under respite or adult day or night care are treated and cared for in accordance with the rights and choices of long-term residents, except for transfer and discharge rights which are provided under the program for short-term services which covers the individual in the nursing home;
   (c) Have appropriate and adequate staff, space, and equipment to meet the individual's needs without jeopardy to the care of regular residents;
   (d) Before or at the time of admission, obtain sufficient information to meet the individual's anticipated needs. At a minimum, such information must include:
      (i) The name, address, and telephone number of the individual's attending physician, and alternate physician if any;
      (ii) Medical and social history, which may be obtained from a respite care assessment and service plan performed by a case manager designated by an area agency on aging under contract with the department, and mental and physical assessment data; and
      (iii) Physician's orders for diet, medication and routine care consistent with the individual's status on admission.
   (e) Ensure the individuals have assessments performed, where needed, and where the assessment of the individual reveals symptoms of tuberculosis, follow tuberculosis testing requirements under WAC 388-97-1360 through 388-97-1580;
   (f) With the participation of the individual and, where appropriate, their representative, develop a plan of care to maintain or improve their health and functional status during their stay or care in the nursing home;
   (g) Provide for the individual to:
      (i) Bring medications from home in accordance with nursing home policy; and
      (ii) Self-medicate where determined safe.
   (h) Promptly report injury, illness, or other adverse change in health condition to the attending physician; and
   (i) Inquire as to the need for and comply with any request of the individual, or where appropriate, the individual's representative, to secure cash and other valuables brought to the nursing home during the stay/care.
(3) The nursing home may, in lieu of opening a new record, reopen the individual's clinical record with each period of stay or care up to one year from the previous stay or care, provided the nursing home reviews and updates the recorded information.

(4) Medicaid certified nursing facilities must complete the state-approved resident assessment instrument, within fourteen days, for any individual whose respite stay exceeds fourteen days.

[Statutory Authority: Chapters 18.51 and 74.42 RCW and 42 C.F.R. 489.52. WSR 08-20-062, § 388-97-1880, filed 9/24/08, effective 11/1/08.]