



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

BLAST FAX 10-01a

TO: Nursing Home Administrators

FROM: Barbara Cass, R.N.
Public Health Services Manager
Facility Licensing and Investigations Section

DATE: January 12, 2010

SUBJECT: Registered Nurse Staffing Requirement On Each Shift For
General Inpatient Hospice Stay

Federal Conditions of Participation for Hospice Care November 11, 2008 Final Draft

1. L706 [§ 418.108 (a)] requires that inpatient care for pain control and symptom management be provided in one of the following: (1) A Medicare-certified hospice that meets the conditions of participation for providing inpatient care directly as specified in § 418.110 or L707 (2) A Medicare-certified hospital or a skilled nursing facility that also meets the standards specified in § 418.110 (b) and (e) regarding 24-hour nursing services and patient areas.
2. L722 [§ 418.110 (b) (1)] requires that the hospice facility provide 24-hour nursing services that meet the needs of all patients and are furnished in accordance with each patient's plan of care.
3. L723 [§ 418.110 (b) (2)] requires in the instance where at least one patient in the hospice facility is receiving general inpatient care, that each shift include a registered nurse who provides direct patient care.

The Interpretive Guidelines for § 418.110 (b) (2) further explains that the general inpatient care provided in a facility for pain control or acute or chronic symptom management, which cannot be managed in other settings, is a different level of care than respite care.

In addition, the Procedures and Probes for § 418.110 (b) (2) direct surveyors to ask the hospice facility for a schedule of RN personnel for the past month and inquire about the mechanism to ensure an RN provides direct patient care on each shift.

If at least one patient is receiving inpatient hospice care for pain control or symptom management, also called general inpatient care (GIP) (excluding respite purposes), each shift must be staffed with a registered nurse who provides direct patient care.

STAFFING THE FACILITY DURING THE RESPITE STAY OF A HOSPICE PATIENT CONTINUES TO BE BASED ON THE PATIENT'S SPECIFIC NEEDS



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