

Article 12. Dementia**87705 CARE OF PERSONS WITH DEMENTIA****87705**

- (a) This section applies to licensees who accept or retain residents diagnosed by a physician to have dementia. Mild cognitive impairment, as defined in Section 87101(m), is not considered to be dementia.
- (b) In addition to the requirements as specified in Section 87208, Plan of Operation, the plan of operation shall address the needs of residents with dementia, including:
- (1) Procedures for notifying the resident's physician, family members and responsible persons who have requested notification, and conservator, if any, when a resident's behavior or condition changes.
 - (2) Safety measures to address behaviors such as wandering, aggressive behavior and ingestion of toxic materials.
- (c) Licensees who accept and retain residents with dementia shall be responsible for ensuring the following:
- (1) The facility has a nonambulatory fire clearance for each room that will be used to accommodate a resident with dementia who is unable to or unlikely to respond either physically or mentally to oral instructions relating to fire or other dangers and to independently take appropriate actions during emergencies or drills.
 - (2) The Emergency Disaster Plan, as required in Section 87212, addresses the safety of residents with dementia.
 - (3) In addition to the on-the-job training requirements in Section 87411(d), staff who provide direct care to residents with dementia shall receive the following training as appropriate for the job assigned and as evidenced by safe and effective job performance:
 - (A) Dementia care including, but not limited to, knowledge about hydration, skin care, communication, therapeutic activities, behavioral challenges, the environment, and assisting with activities of daily living;
 - (B) Recognizing symptoms that may create or aggravate dementia behaviors, including, but not limited to, dehydration, urinary tract infections, and problems with swallowing; and
 - (C) Recognizing the effects of medications commonly used to treat the symptoms of dementia.

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- (4) There is an adequate number of direct care staff to support each resident's physical, social, emotional, safety and health care needs as identified in his/her current appraisal.
 - (A) In addition to requirements specified in Section 87415, Night Supervision, a facility with fewer than 16 residents shall have at least one night staff person awake and on duty if any resident with dementia is determined through a pre-admission appraisal, reappraisal or observation to require awake night supervision.
- (5) Each resident with dementia shall have an annual medical assessment as specified in Section 87458, Medical Assessment, and a reappraisal done at least annually, both of which shall include a reassessment of the resident's dementia care needs.
 - (A) When any medical assessment, appraisal, or observation indicates that the resident's dementia care needs have changed, corresponding changes shall be made in the care and supervision provided to that resident.
- (6) Appraisals are conducted on an ongoing basis pursuant to Section 87463, Reappraisals.
- (7) An activity program shall address the needs and limitations of residents with dementia and include large motor activities and perceptual and sensory stimulation.
- (d) In addition to requirements specified in Section 87303, Maintenance and Operation, safety modifications shall include, but not be limited to, inaccessibility of ranges, heaters, wood stoves, inserts, and other heating devices to residents with dementia.
- (e) Swimming pools and other bodies of water shall be fenced and in compliance with state and local building codes.
- (f) The following shall be stored inaccessible to residents with dementia:
 - (1) Knives, matches, firearms, tools and other items that could constitute a danger to the resident(s).
 - (2) Over-the-counter medication, nutritional supplements or vitamins, alcohol, cigarettes, and toxic substances such as certain plants, gardening supplies, cleaning supplies and disinfectants.
- (g) As required by Section 87468(a)(12), residents with dementia shall be allowed to keep personal grooming and hygiene items in their own possession, unless there is evidence to substantiate that the resident cannot safely manage the items.
 - (1) Evidence means documentation from the resident's physician that the resident is at risk if allowed direct access to personal grooming and hygiene items.

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- (h) Outdoor facility space used for resident recreation and leisure shall be completely enclosed by a fence with self-closing latches and gates, or walls, to protect the safety of residents.
- (i) The licensee may use wrist bands or other egress alert devices worn by the resident, with the prior written approval of the resident or conservator, provided that such devices do not violate the resident's rights as specified in Section 87468, Personal Rights.
- (j) The licensee shall have an auditory device or other staff alert feature to monitor exits, if exiting presents a hazard to any resident.
- (k) The following initial and continuing requirements must be met for the licensee to utilize delayed egress devices on exterior doors or perimeter fence gates:
 - (1) The licensee shall notify the licensing agency immediately after determining the date that the device will be installed.
 - (2) The licensee shall ensure that the fire clearance includes approval of delayed egress devices.
 - (3) Fire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all direct care staff.
 - (4) Without violating Section 87468, Personal Rights, facility staff shall attempt to redirect a resident who attempts to leave the facility.
 - (5) Residents who continue to indicate a desire to leave the facility following redirection shall be permitted to do so with staff supervision.
 - (6) Without violating Section 87468, Personal Rights, facility staff shall ensure the continued safety of residents if they wander away from the facility.
 - (7) For each incident in which a resident wanders away from the facility unsupervised, the licensee shall report the incident to the licensing agency, the resident's conservator and/or other responsible person, if any, and to any family member who has requested notification. The report shall be made by telephone no later than the next working day and in writing within seven calendar days.
 - (8) Delayed egress devices shall not substitute for trained staff in sufficient numbers to meet the care and supervision needs of all residents and to escort residents who leave the facility.
 - (9) The licensee shall not accept or retain residents determined by a physician to have a primary diagnosis of a mental disorder unrelated to dementia.

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- (l) The following initial and continuing requirements shall be met for the licensee to lock exterior doors or perimeter fence gates:
- (1) Licensees shall notify the licensing agency of their intention to lock exterior doors and/or perimeter fence gates.
 - (2) The licensee shall ensure that the fire clearance includes approval of locked exterior doors or locked perimeter fence gates.
 - (3) The licensee shall obtain a waiver from Section 87468(a)(6), to prevent residents from leaving the facility.
 - (A) Facility staff shall attempt to redirect any unaccompanied resident(s) leaving the facility.
 - (4) The licensee shall maintain either of the following documents in the resident's record at the facility:
 - (A) The conservator's written consent for admission for each resident who has been conserved under the Probate Code or the Lanterman-Petris-Short Act; or
 - (B) A written statement signed by each non-conserved resident that states the resident understands that the facility has exterior door locks or perimeter fence gate locks and that the resident voluntarily consents to admission.
 - (5) Interior and exterior space shall be available on the facility premises to permit residents with dementia to wander freely and safely.
 - (6) Locked exterior doors or perimeter fences with locked gates shall not substitute for trained staff in sufficient numbers to meet the care and supervision needs of all residents.
 - (7) The licensee shall not accept or retain residents determined by a physician to have a primary diagnosis of a mental disorder unrelated to dementia.
 - (8) Fire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all direct care staff.

NOTE: Authority cited: Sections 1569.30 and 1569.698, Health and Safety Code. Reference: Sections 1569.2, 1569.31, 1569.312, 1569.698, 1569.699 and 13131, Health and Safety Code.