

CHAPTER 1. NURSING HOME CARE

1.01 AUTHORITY

Title 38 U.S.C. 610 authorizes the VA to provide nursing home care in VA owned Nursing Home Care Units. Title 38 U.S.C. 620 authorizes the VA to provide nursing home care in public or private institutions not under the jurisdiction of the Administrator which furnish nursing home care.

1.02 DEFINITIONS

a. **Nursing Home Care.** This term means the coordination and delivery of care to convalescents or other persons who are not in need of hospital care, but who require nursing care and related medical or psychosocial services. For veterans in VA NHCU (Nursing Home Care Units) this includes any professionally recommended services, supplies, and equipment. For veterans in community nursing homes, this includes room, meals, nursing care, physician visits, emergency dental care, medicines and drugs, minimal laboratory and radiology services, and other special services and supplies normally provided patients requiring nursing home care. The term includes

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1. Physical Environment

- a. Attractiveness of building
- b. Maintenance of building
- c. Maintenance of grounds
- d. Lighting of interior
- e. Adequacy of privacy/personal living space
- f. Privacy for resident/family counseling/visitation
- g. Absence of offensive odors
- h. Absence of excessive noise
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either intermediate or skilled nursing home care or both. In the case of the VA NHCU, it includes both equivalent levels of care.

b. **VA NHCU.** A specialized nursing facility designed to care for patients who require nursing care and supportive personal care and/or individual adjustment services. Veterans admitted to this program require care which is planned and coordinated by an interdisciplinary team and require the services of a hospital based nursing home.

c. **SNF (Skilled Nursing Facility).** A community nursing home, licensed by the state in which it is located, which provides care prescribed by, or performed under the general direction of a physician and provides nursing, rehabilitative, dietetic, pharmaceutical, laboratory, radiological, social, and spiritual services to the patient.

d. **ICF (Intermediate Care Facility).** A community nursing home, licensed by the state in which it is located, to provide health care services on a regular basis to individuals who, because of their physical or mental condition, require such care and services, above the level of room and board, as provided in a domiciliary but do not require the intensity or frequency of such services as provided in a SNF. The

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facility must be certified for participation as a provider of ICF services under Title XIX (State Medicaid Program). If there is no Medicaid program in the state, the ICF must meet the standards for the ICFs as outlined in 42 CFR and meet the additional VA standards outlined in chapter 3, paragraph 3.06.

e. **Medical Center.** This term when used, also applies to the VA Outpatient Clinics in Honolulu, HI, and Anchorage, AK.

f. **Rehabilitation.** Rehabilitation is * "to restore an individual to his/her former functional and environmental status, or alternatively to maintain or maximize remaining function." When working with patients in long-term care, it is important that staff conceptualize a model of rehabilitation which takes into account the age, frailty, disease process, and level of dysfunction of the individual patient."

* Williams, T. Franklin, Ed. Rehabilitation in the Aging, Raven Press, New York, 1984.

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Rehabilitation in this population is long-term, often with limited goals. Equally important as the physical rehabilitation of the patient, is the psychological or social rehabilitation which may be required to improve the quality of life for the individual. In this broader definition, it is not valid to ascribe to a patient, a lack of rehabilitation potential.

[g. **Programmatic Responsibility.** Responsibility for management of NHCU programs, i.e., the structured unity of efforts by clinical and administrative services directed toward the mission and goals of the NHCU, in accordance with regulations, policies, and accreditation standards.

h. **Administrative Responsibility.** Responsibility for policies and procedures, fiscal management, internal and external reviews, staffing, interface with hospital management, and with academic and research communities.

i. **Operational Responsibility.** Responsibility for day-to-day activities necessary for the operation of the nursing home, including scheduling of staff and patients, ordering supplies, assuring food delivery and the provision of housekeeping, maintenance services, etc.

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j.] **Role of Nursing Home Care Unit Screening Committee.** The Nursing Home Care Unit Screening Committee should determine the need for NHCU placement. The placement should be based on the patient's need for long-term nursing supervision, observation and care by an interdisciplinary team, and/or long-term rehabilitation programs and supportive health services.

NOTE: *It is necessary to define the term "custodial care" since the term is sometimes misapplied to nursing home patients. Custodial care is that care which can be rendered by an individual who is not professionally trained to provide that care. Custodial care is the monitoring of a patient to ensure that the patient carries out the activities of daily living, takes prescribed medicine and has a safe environment in which to live. Those patients who have been medically determined to need nursing home care are not custodial care patients. For example, a comatose patient requiring total nursing care, turning, feeding, bathing, proper positioning, etc., is not a custodial care patient. Determining the need for nursing home care recognizes the fact that the patient needs care provided by a licensed professional or under the supervision of a licensed professional.*

1.03 ELIGIBILITY

A prospective patient's eligibility for a VA NHCU and the Community Nursing Home Program will be determined by MAS (Medical Administration Service) prior to

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admission. For the VA NHCU, MAS will also determine the priority for admission. These policies are found in M-1, part I, chapter 12.

1.04 OTHER RELATED TOPICS--GENERAL

The policy on the following issues is found in M-1, part I, chapter 12: releases; outpatient care; institutional awards and NBC status; admission of women veterans; deaths; other administrative procedures; and priorities for nursing home care. The policy on nursing home care in state homes is found in M-1, part I, chapter 3. The policy on reimbursement rates is found in chapter 3, paragraph 3.03.

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