



TITLE:	ASSESSMENT OF RESIDENT	POLICY 3.03
--------	------------------------	-------------

Authority: [WAC 388-78A-2090, Full assessment topics](#)
[WAC 388-78A-2100, On-going assessment](#)

PURPOSE:

This policy describes the process for assessing residents upon admission and annually thereafter.

SCOPE:

All Trouves employees that assess residents upon admission and annually.

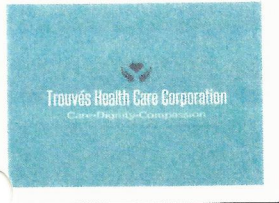
POLICY:

- A. Trouves Health Care obtains sufficient information to be able to assess the capabilities, needs, and preferences for each resident, and completes a full assessment addressing the following, within fourteen days of the resident's move-in date, unless extended by the department for good cause:
 - 1. Individual's recent medical history, including, but not limited to:
 - a. A licensed medical or health professional's diagnosis, unless the resident objects for religious reasons;
 - b. Chronic, current, and potential skin conditions; or
 - c. Known allergies to foods or medications, or other considerations for providing care or services.
 - 2. Currently necessary and contraindicated medications and treatments for the individual, including:
 - a. Any prescribed medications, and over-the-counter medications commonly taken by the individual, that the individual is able to independently self-administer, or safely and accurately direct others to administer to him/her;



TITLE:	ASSESSMENT OF RESIDENT	POLICY 3.03
--------	------------------------	-------------

- b. Any prescribed medications, and over-the-counter medications commonly taken by the individual, that the individual is able to self-administer when he/she has the assistance of a caregiver; and
 - c. Any prescribed medications, and over-the-counter medications commonly taken by the individual, that the individual is not able to self-administer, and needs to have administered to him or her.
- 3. The resident's nursing needs when the resident requires the services of a nurse on the Trouves Health Care facility premises.
- 4. Individual's sensory abilities, including:
 - a. Vision; and
 - b. Hearing.
- 5. Individual's communication abilities, including:
 - a. Modes of expression;
 - b. Ability to make self understood; and
 - c. Ability to understand others.
- 6. Significant known behaviors or symptoms of the individual causing concern or requiring special care, including:
 - a. History of substance abuse;
 - b. History of harming self, others, or property; or
 - c. Other conditions that may require behavioral intervention strategies;
 - d. Individual's ability to leave the assisted living facility unsupervised; and
 - e. Other safety considerations that may pose a danger to the individual or others, such as use of medical devices or the individual's ability to smoke unsupervised, if smoking is permitted in the assisted living facility.
- 7. Individual's special needs, by evaluating available information, or if available information does not indicate the presence of special needs, selecting and using an appropriate tool, to determine the presence of symptoms consistent with, and implications for care and services of:



TITLE:	ASSESSMENT OF RESIDENT	POLICY 3.03
--------	------------------------	-------------

- a. Mental illness, or needs for psychological or mental health services, except where protected by confidentiality laws;
 - b. Developmental disability;
 - c. Dementia. While screening a resident for dementia, the assisted living facility must:
 - i. Base any determination that the resident has short-term memory loss upon objective evidence; and
 - ii. Document the evidence in the resident's record.
 - d. Other conditions affecting cognition, such as traumatic brain injury.
8. Individual's level of personal care needs, including:
- a. Ability to perform activities of daily living;
 - b. Medication management ability, including:
 - i. The individual's ability to obtain and appropriately use over-the-counter medications; and
 - ii. How the individual will obtain prescribed medications for use in the assisted living facility.
9. Individual's activities, typical daily routines, habits and service preferences.
10. Individual's personal identity and lifestyle, to the extent the individual is willing to share the information, and the manner in which they are expressed, including preferences regarding food, community contacts, hobbies, spiritual preferences, or other sources of pleasure and comfort.
11. Who has decision-making authority for the individual, including:
- a. The presence of any advance directive, or other legal document that will establish a substitute decision maker in the future;
 - b. The presence of any legal document that establishes a current substitute decision maker; and
 - c. The scope of decision-making authority of any substitute decision maker.



TITLE:	ASSESSMENT OF RESIDENT	POLICY 3.03
--------	------------------------	-------------

B. Trouves Health Care completes a full assessment addressing the items above See A. The assessment focuses on a resident's identified problems and related issues:

1. Consistent with the resident's change of condition as specified in WAC 388-78A-2120.

C. An assessment is also completed when:

1. The resident's negotiated service agreement no longer addresses the resident's current needs and preferences;
2. When the resident has an injury requiring the intervention of a practitioner.

D. Trouves employees performing the on-going assessments are qualified to assess. Qualified employees:

1. Has a master's degree in social services, human services, behavioral sciences or an allied field and two years social service experience working with adults who have functional or cognitive disabilities; or
2. Has a bachelor's degree in social services, human services, behavioral sciences, or an allied field and three years social service experience working with adults who have functional or cognitive disabilities; or
3. Has a valid Washington state license to practice nursing, in accordance with chapters 18.79 RCW and 246-840 WAC; or
4. Is a physician with a valid state license to practice medicine; or
5. Has three years of successful experience acquired prior to September 1, 2004, assessing prospective and current assisted living facility residents in a setting licensed.

E. Residents, Guardians, and or Family participate in assessment.

EXCEPTIONS:

No exceptions to this policy may be granted without the prior written approval of the Director.



Trouves Health Care

TITLE:	ASSESSMENT OF RESIDENT	POLICY 3.03
--------	------------------------	-------------

SUPERCEDES:

None