

## OASAS Part 820 Nurse Staffing FAQ's

<u>Question</u>	<u>Response</u>
<b><i>Nurse Staffing Requirements.</i></b>	
Within Part 820 Stabilization and Rehabilitation elements what are the nurse staffing requirements?	<p>Per 820.6 the nurse staff hours are required as:</p> <ul style="list-style-type: none"> <li>• Sufficient to meet the needs of the resident population;</li> <li>• Will include Registered nurse and weekend nursing staff (LPN) as sufficient to resident need, on-site daily and to supervise Licensed Practical Nurse (LPN);</li> <li>• LPN available on-site daily for support to residents and for [support] oversight; and.</li> <li>• Documentation of self-administered medication.</li> </ul>
In the Stabilization element are Nursing staff required to be on site 24/7?	Within the Stabilization element medical staffing hours must accommodate 7 day a week intake of new patients. Programs are not required to have 24 hour a day intake ability. Programs must have a daily intake policy and procedures to accommodate this requirement.
Within the Part 820 Reintegration element what is the nursing staffing requirement?	Part 820 does not require the reintegration element to be staffed by medical staff (including nurses). The expectation is that the clients within this element would be linked to physical health services within the community.
<b><i>What are the Part 820 Medical Staff availability requirements?</i></b>	
Within the Part 820 Stabilization and Rehabilitation elements are medical staff required to be on site 24/7?	In collaboration with their medical director, programs will establish internal policies and procedures for medical staffing availability as sufficient to meet the demographic needs of the population served.
Within the Part 820 Reintegration what is the medical staffing requirement?	Part 820 does not require the reintegration element to be staffed by medical staff (including nurses). The expectation is that the clients within this element would be linked to physical health services within the community.



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<b>Supervision:</b>	
Within Part 820 Stabilization and Rehabilitation: elements what is the supervisory roles of Nurses?	Within Part 820 Stabilization and Rehabilitation Elements, Nurse Supervisor duties may include, but are not be limited to: supervising day to day nursing operations; and, providing direct LPNs supervision.
Within the Part 820 Stabilization and Rehabilitation what is the supervisory role of the Medical Director.	<p>Within a designated Part 820 Stabilization and Rehabilitation element , the intended role of the medical director is to:</p> <ul style="list-style-type: none"> <li>• provide oversight of the development of policies and procedures to ensure the provision of routine services, including but not limited to, means for the prompt detection and referral of health problems through adequate medical surveillance and regular examination as needed;</li> <li>• implement medical orders regarding treatment of medical conditions and reporting of communicable diseases and infection in accordance with law; and,</li> <li>• supervise medical staff in the performance of medical services (not to supersede the nursing supervisor's role. (see above)</li> </ul>
Reintegration	N/A
<b>Medication:</b>	
Will Nurses be administering patient specific medication in any of the Part 820 elements?	Patients requiring administering of medication would not be medically appropriate for any/ all Part 820 elements. Therefore, nurses generally will not dispense patient specific medication. Nurses may monitor medications that are brought to treatment; or, prescribed by a physician or nurse practitioner to the patient. Nurses may when necessary administer medication to patients as allowed within their scope of practice with a non-patient specific physician or nurse practitioner order and facility protocol which meet the NYSED practice guidance.
What are the Part 820 requirements regarding Emergency Medical Kits?	Emergency medical kit. Part 820 "General program standards" affirms that All programs must maintain an emergency medical kit at each certified location; such kit must include basic first aid and at least one naloxone or other opioid related overdose treatment emergency overdose prevention kit the use of which is subject to applicable laws and regulations. Programs must develop and implement a plan to have staff and residents, where appropriate, trained in the prescribed use of a naloxone or other opioid related overdose treatment kit such that it is available, to the maximum extent possible, for use during all program hours of operation.

