

## **Chapter 82. Minimum Standards for Licensure of Hospice Agencies**

### **Subchapter A. General Provisions**

#### **§8201. Definitions**

A. The following words and terms, when used in this Chapter, shall have the following meanings, unless the context clearly indicates otherwise:

*Activities of Daily Living (ADL's)*—the following functions or self-care tasks performed either independently or with supervision or assistance:

- a. mobility;
- b. transferring;
- c. walking;

- d. grooming;
- e. bathing;
- f. dressing and undressing;
- g. eating; and
- h. toileting.

*Acute/General Inpatient Care*—short-term, intensive hospice services provided in an appropriately licensed facility to meet the patient’s need for skilled nursing, symptom management or complex medical treatment.

*Advance Directives*—a witnessed document, statement, or expression voluntarily made by the declarant, authorizing the withholding or withdrawal of life-sustaining procedures. A declaration may be made in writing, such as a durable power of attorney for health care, a directive pursuant to patient self-determination initiatives, a living will, or by other means of communication such as an oral directive which either states a person’s choices for medical treatment or, in the event the person is unable to make treatment choices, designates who shall make those decisions.

*Advanced Practice Registered Nurse (APRN)*—a nurse who is legally authorized to practice advanced practice nursing in the state and designated by the patient as the licensed medical practitioner responsible for his/her medical care.

*Attending/Primary Physician*—a person who is a doctor of medicine or osteopathy licensed to practice medicine in the state of Louisiana, who is designated by the patient as the physician responsible for his/her medical care.

*Bereavement Services*—organized services provided under the supervision of a qualified professional to help the family cope with death related grief and loss issues. This shall be provided for at least one year following the death of the patient.

*Branch*—an alternative delivery site from which a hospice agency provides services within a portion of the total geographic area served by the parent agency. The branch office is part of the parent hospice agency and is located within a 50 mile radius of the parent agency and shares administration and supervision.

*Care Giver*—the person whom the patient designates to provide his/her emotional support and/or physical care.

*Certified Nurse Aide (CNA) Registry*—the state registry used to determine if a prospective hire who is a CNA has had a finding placed on the registry that he/she has abused or neglected a resident or misappropriated a resident’s property or funds.

*Cessation of Business*—provider is non-operational and/or has stopped offering or providing services to the community

*Chaplain*—a member of the clergy.

*Community*—a group of individuals or a defined geographic area served by a hospice.

*Continuous Home Care*—care provided by the hospice during a period of crisis as necessary to maintain the terminally ill individual at home. A minimum of eight hours of care shall be furnished on a particular day to be considered continuous home care. Nursing care shall be provided for more than one half of the period of care and shall be provided by either a registered nurse or licensed practical nurse. Services may be provided by a homemaker or home health aide to supplement the nursing care. A registered nurse shall complete an assessment of the patient and determine that the patient requires continuous home care prior to assigning a licensed practical nurse, homemaker, or a hospice aide to a patient requiring continuous home care. This assignment must comply with accepted professional standards of practice.

*Contracted Services*—services provided to a hospice provider or its patients by a third party under a legally binding agreement that defines the roles and responsibilities of the hospice and service provider.

*Core Services*—nursing services, licensed medical practitioner services, medical social services, and counseling services, including bereavement counseling, dietary counseling, spiritual counseling, and any other counseling services provided to meet the needs of the individual and family. These services shall be provided by employees of the hospice, except that licensed medical practitioner services and dietary counseling services may be provided through contract. Core services also include support services, such as trained volunteers.

*Department*—the Department of Health (LDH).

*Direct Service Worker (DSW)*—an unlicensed person who provides personal care or other services and support to persons with disabilities or to the elderly to enhance their well-being, and who is involved in face-to-face direct contact with the person. Functions performed may include, but are not limited to, assistance in activities of daily living and personal care services. An example of a DSW may be a hospice or home health aide or homemaker.

*Discharge*—the point at which the patient’s active involvement with the hospice program is ended and the program no longer has active responsibility for the care of the patient.

*Do Not Resuscitate Orders*—orders written by the patient’s physician which stipulate that in the event the patient has a cardiac or respiratory arrest, no cardiopulmonary resuscitation will be initiated or carried out.

*Emotional Support*—counseling provided to assist the person in coping with stress, grief, and loss.

*Employee*—an individual who may be contracted, hired for a staff position or a volunteer under the jurisdiction of the hospice.

*Facility-Based Care*—hospice services delivered in a place other than the patient’s home, such as an inpatient hospice facility, nursing facility or hospital inpatient unit.

*Family*—a group of two or more individuals related by ties of blood, legal status, or affection who consider themselves a family.

*Geographic Area*—area around location of licensed agency which is within 50 mile radius of the hospice premises. Each hospice shall designate the geographic area in which the agency will provide services.

*Governing Body*—the person or group of persons that assumes full legal responsibility for determining, implementing and monitoring policies governing the hospice's total operation. The governing body shall designate an individual who is responsible for the day-to-day management of the hospice program, and shall also ensure that all services provided are consistent with accepted standards of practice. Written minutes and attendance of governing body meetings are to be maintained.

*Health Standards Section (HSS)*—the agency within the Department of Health responsible for regulation of licensed health care providers, agencies or facilities.

*Home*—a person's place of residence.

*Homemaker*—an individual who provides light housekeeping services to patients in their homes.

*Hospice*—an autonomous, centrally administered, medically directed program providing a continuum of home, outpatient, and homelike inpatient care for the terminally ill patient and his family. It employs an interdisciplinary team to assist in providing palliative and supportive care to meet the special needs arising out of the physical, emotional, spiritual, social, and economic stresses which are experienced during the final stages of illness and during dying and bereavement.

*Hospice Inpatient Facility*—a facility where specific levels of hospice care ranging from residential to acute, including respite, are provided in order to meet the needs of the patient/family.

*Hospice Inpatient Services*—care and services available for pain control, symptom management and/or respite purposes that are provided for a patient either directly by the hospice agency or in a participating facility.

*Hospice Physician*—a person who is a doctor of medicine or osteopathy, and is currently and legally authorized to practice medicine in the State of Louisiana, designated by the hospice to provide medical care to hospice patients in lieu of their primary licensed medical practitioner.

*Hospice Premises*—the physical site where the hospice maintains staff to perform administrative functions, and maintains its personnel records, or maintains its patient service records, or holds itself out to the public as being a location for receipt of patient referrals.

*Hospice Services*—a coordinated program of palliative and supportive care, in a variety of appropriate settings, from the time of admission through bereavement, with the focus on keeping terminally ill patients in their place of residence as long as possible.

*Informed Consent*—a documented process in which information regarding the potential and actual benefit and risks of a given procedure or program of care is exchanged between provider and patient.

*Interdisciplinary Team (IDT)*—an interdisciplinary team or teams designated by the hospice, composed of representatives from all the core services. The IDT shall include at least a doctor of medicine or osteopathy, a registered nurse, a social worker, a pastoral or other counselor, and a representative of the volunteer services. The interdisciplinary team is responsible for participation in the establishment of the plan of care; provision or supervision of hospice care and services; periodic review and updating of the plan of care for each individual receiving hospice care, and establishment of policies governing the day-to-day provision of hospice care and services. If a hospice has more than one interdisciplinary team, it shall designate in advance the team it chooses to execute the establishment of policies governing the day-to-day provision of hospice care and services.

*Interdisciplinary Team Conferences*—regularly scheduled periodic meetings of specific members of the interdisciplinary team to review the most current patient/family assessment, evaluate care needs, and update the plan of care.

*Louisiana At-Risk Registry*—the reporting mechanism for hospice patients that require community assistance in emergency situations.

*Louisiana Physician Order for Scope of Treatment (LaPOST)*—a physician's order that documents the wishes of a qualified patient for life-sustaining interventions, as well as the patient's preferred treatment for each intervention, on a form that is recognized, adopted, and honored across treatment settings in accordance with state laws.

*Major Alteration*—any repair or replacement of building materials and equipment which does not meet the definition of minor alteration.

*Medical Social Services*—include a comprehensive psychosocial assessment; ongoing support for the patient and family; and assistance with coping skills, anticipatory grief, and grief reactions.

*Minor Alteration*—repair or replacement of building materials and equipment with materials and equipment of a similar type that does not diminish the level of construction below that which existed prior to the alteration. This does not include any alteration to the function or original design of the construction.

*Non-Core Services*—services provided directly by hospice employees or under arrangement. These services include, but are not limited to:

- a. hospice aide and homemaker;
- b. physical therapy services;
- c. occupational therapy services;
- d. speech-language pathology services;

e. inpatient care for pain control and symptom management and respite purposes; and

f. medical supplies and appliances including drugs and biologicals.

*Non-Operational*—the hospice agency location is not open for business operation on designated days and hours as stated on the licensing application and business location signage.

*Palliative Care*—the reduction or abatement of pain or other troubling symptoms by appropriate coordination of all services of the hospice care team required to achieve needed relief of distress.

*Period of Crisis*—a period in which a patient requires predominately nursing care to achieve palliation or management of acute medical problems.

*Plan of Care (POC)*—a written document established and maintained for each individual admitted to a hospice program. Care provided to an individual shall be in accordance with the plan. The plan includes an assessment of the individual's needs and identification of the services including the management of discomfort and symptom relief.

*Public Health Emergency (PHE)*—a declaration made pursuant to the Louisiana Health Emergency Powers Act, R.S. 29:760 et seq.

*Representative*—an individual who has been authorized under State law to terminate medical care or to elect or revoke the election of hospice care on behalf of a terminally ill individual who is mentally or physically incapacitated.

*Residential Care*—hospice care provided in a nursing facility, adult residential facility or any residence or facility other than the patient's private residence.

*Respite Care*—short-term care generally provided in a nursing facility or hospice facility to provide relief for the family from daily care of the patient.

*Spiritual Services*—providing the availability of clergy as needed to address the patient's/family's spiritual needs and concerns.

*State Certified Hospice Attendant*—a former inmate of a Louisiana state prison with a hospice provider license issued by the Department of Health who shall be eligible to be employed as a non-licensed person by a provider licensed to provide hospice services pursuant to the requirements of R.S. 40:2192 if the following provisions are satisfied:

a. the former inmate shall not have been convicted of a sex offense as defined by R.S. 27 15:541;

b. while incarcerated, the former inmate shall have been a caregiver in the licensed hospice program, with documentation of such, and successfully completed the training pursuant to subsection B of R.S.40:2192;

c. the former inmate shall hold a certification issued by the Department of Public Safety and Corrections;

d. the former inmate shall submit notice of his/her certification to the department in a manner prescribed by the Department of Health; and

e. there are no federal restrictions or prohibitions against the former inmate providing hospice services.

*Sublicense*—a license issued for the inpatient hospice facility that provides inpatient hospice services directly under the operation and management of the licensed hospice entity.

*Terminally Ill*—a medical prognosis of limited expected survival, of approximately six months or less at the time of referral to a hospice, of an individual who is experiencing an illness for which therapeutic strategies directed toward cure and control of the disease alone are no longer appropriate. Therapeutic strategies by the hospice agency are directed toward pain and symptom management of the terminal illness.

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