

Baseline Care Plan Policy and Procedure Checklist

Purpose and Intent of §483.21(a)

The purpose of the facility Baseline Care Plan Policy is to outline a process for development of an initial person-centered care plan within the first 48 hours of admission, that will provide instructions for care of the resident. Completion and implementation of the baseline care plan within 48 hours of a resident’s admission is intended to promote continuity of care and communication among nursing home staff, increase resident safety, and safeguard against adverse events that are most likely to occur right after admission; and to ensure the resident and representative, if applicable, are informed of the initial plan for delivery of care and services by receiving a written summary of the baseline care plan.

To assure that the individual facility has followed all the required steps for the development and implementation of a comprehensive Baseline Care Plan policy in accordance to the new Requirements of Participation (RoP), the following checklist captures specific action items for successful completion. The left column represents the actual Requirements of Participation (RoP) language and the right column indicates specific leadership strategies for successful completion and implementation of the revised RoP. When preparing updated policies and procedures, it is recommended to include actual RoP language as applicable.

Suggested Checklist Program and Policy and Procedure

Regulation	Recommended Actions
<p>§483.21(a) Baseline Care Plans (F655) §483.21(a)(1) The facility must develop and implement a baseline care plan for each resident that includes the instructions needed to provide effective and person-centered care of the resident that meet professional standards of quality care. The baseline care plan must—</p> <ul style="list-style-type: none"> (i) Be developed within 48 hours of a resident’s admission. (ii) Include the minimum healthcare information necessary to properly care for a resident including, but not limited to— <p>(A) Initial goals based on admission orders. (B) Physician orders.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Review, develop and/or implement the Baseline Care Plan Policy and Procedure <input type="checkbox"/> Assure that policy contains the necessary components of a baseline care plan such as: <ul style="list-style-type: none"> (A) Initial goals based on admission orders. (B) Physician orders. (C) Dietary orders. (D) Therapy services. (E) Social services. (F) PASARR recommendation, if applicable.



<p>(C) Dietary orders. (D) Therapy services. (E) Social services. (F) PASARR recommendation, if applicable.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Educate the interdisciplinary team about the Baseline Care Plan Policy and Procedure and their role in development and implementation of interventions. <input type="checkbox"/> Conduct updated training for nursing leaders and clinical department leaders about supervising and monitoring for compliance with the Baseline Care Plan Policy and Procedure <input type="checkbox"/> Review the Baseline Care Plan Policy with the Medical Director in conjunction with the Quarterly Quality Assurance Committee meeting
<p>§483.21(a)(3) The facility must provide the resident and their representative with a summary of the baseline care plan that includes but is not limited to:</p> <ul style="list-style-type: none"> (i) The initial goals of the resident. (ii) A summary of the resident’s medications and dietary instructions. (iii) Any services and treatments to be administered by the facility and personnel acting on behalf of the facility. <p>Any updated information based on the details of the comprehensive care plan, as necessary.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Review, develop and/or implement policy as it relates the Baseline Care Plan Summary <input type="checkbox"/> Assure that the policy contains the essential components which are: <ul style="list-style-type: none"> ● Initial goals for the resident ● List of current medication ● Dietary instructions ● Services and treatments to be administered by the facility and personnel acting on behalf of the facility <input type="checkbox"/> Assure documentation that the resident and their representative was provided a summary of the baseline care plan <ul style="list-style-type: none"> ● Create/update standard document to use to provide residents and their representative, if the



	<p>resident so chooses, with a summary of the baseline care plan. Assure that there is documentation that the summary was provided.</p>
<p>§483.21(a)(2) The facility may develop a comprehensive care plan in place of the baseline care plan if the comprehensive care plan—</p> <p>(i) Is developed within 48 hours of the resident’s admission.</p> <p>(ii) Meets the requirements set forth in paragraph (b) of this section (excepting paragraph (b)(2)(i) of this section).</p> <p>F656</p> <p>§483.21(b)</p> <p>Comprehensive Care Plans</p> <p>(i) The services that are to be furnished to attain or maintain the resident's highest practicable physical, mental, and psychosocial well-being as required under §483.24, §483.25 or §483.40; and</p> <p>(ii) Any services that would otherwise be required under §483.24, §483.25 or §483.40 but are not provided due to the resident's exercise of rights under §483.10, including the right to refuse treatment under §483.10(c)(6).</p> <p>(iii) Any specialized services or specialized rehabilitative services the nursing facility will provide as a result of PASARR recommendations. If a facility disagrees with the findings of the PASARR, it must indicate its rationale in the resident’s medical record.</p> <p>(iv) (iv) In consultation with the resident and the resident’s representative(s)—</p> <p>(A) The resident’s goals for admission and desired outcomes.</p> <p>(B) The resident’s preference and potential for future discharge. Facilities must document whether the resident’s desire to</p>	<p>For instances in which the comprehensive care plan will also serve as the 48 hour baseline care plan:</p> <p><input type="checkbox"/> Review and revise the policy and procedure for comprehensive care plans to assure it contains the essential components of both the 48-hour baseline care plan and comprehensive care plan requirements</p> <p><input type="checkbox"/> Assure that the policy includes the 48-hour time frame from admission to the development of a comprehensive care plan for those instances in which the comprehensive care plan also serves as the 48-hour baseline care plan</p> <p><input type="checkbox"/> Care plan summary of the comprehensive care plan must be provided to the resident and representative in writing, in a language that can be understood by the resident and representative.</p> <p><input type="checkbox"/> Ensure there is a process in place to ensure direct care staff are aware of and educated about the care plan interventions.</p>



<p>return to the community was assessed and any referrals to local contact agencies and/or other appropriate entities, for this purpose. (C) Discharge plans in the comprehensive care plan, as appropriate, in accordance with the requirements set forth in paragraph (c) of this section.</p>	
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The below areas serve as a cross reference for facility leaders to conduct addition policy and procedure review across departments to incorporate the changes set forth in **F655 §483.21(a) Baseline Care Plans**

This listing is not all encompassing however should serve as a resource for leaders as they update their internal policies, procedures and operational processes.

Cross Reference: (additional areas for review)

- CMS Regulations
- State and Local Regulations
- Employee Orientation
- Annual Training Requirements
- Medical Director
- Quality Assurance and Performance Improvement
- Staff Training and Education

References

CMS State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities:

- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Downloads/Advance-Appendix-PP-Including-Phase-2-.pdf>