- (2) (I) ALL DISCLOSURES MADE TO THE OFFICE OF HEALTH CARE QUALITY SHALL BE IN WRITING.
- (II) A DISCLOSURE MADE TO AN INQUIRING PERSON SHALL BE IN WRITING, IF REQUESTED.
- (D) THE FACILITY DISCLOSING THE PATIENT CARE INFORMATION SHALL EXPLAIN HOW THE ALZHEIMER'S SPECIAL CARE UNIT OR PROGRAM IS DESIGNED TO SATISFY THE SPECIFIC NEEDS OF INDIVIDUALS WITH A DIAGNOSIS OF ALZHEIMER'S DISEASE OR A RELATED DISORDER BY INCLUDING THE FOLLOWING INFORMATION:
- (1) A WRITTEN STATEMENT OF THE FACILITYS OVERALL TREATMENT PHILOSOPHY AND ITS MISSION STATEMENT REGARDING THE ALZHEIMER'S SPECIAL CARE UNIT OR PROGRAM:
- (2) A DESCRIPTION OF THE FACILITY'S PERSONNEL TRAINING, THE CONTENT OF THE TRAINING, AND THE JOB TITLES OF THE STAFF WHO RECEIVE TRAINING FOR THE ALZHEIMER'S SPECIAL CARE UNIT OR PROGRAM:
- (3) SCREENING, ADMISSION, AND DISCHARGE PROCEDURES AND CRITERIA;
- (4) ASSESSMENT, PLANNING, IMPLEMENTATION, MONITORING, AND EVALUATION OF CARE PLANS:
- (5) STAFFING PATTERNS UNIQUE TO THE FACILITY'S ALZHEIMER'S SPECIAL CARE UNIT OR PROGRAM:
- (6) A DESCRIPTION OF THE PHYSICAL ENVIRONMENT AND ANY DESIGN FEATURES APPROPRIATE TO SUPPORT THE FUNCTIONING OF COGNITIVELY IMPAIRED ADULTS:
- (7) RESIDENTS' OR PROGRAM PARTICIPANTS' ACTIVITIES INCLUDING, THE FREQUENCY AND TYPE OF ACTIVITIES; AND
- (8) PROCRAM COSTS INCLUDING, THE COSTS OF CARE AND ANY ADDITIONAL FEES UNIQUE TO THE FACILITY'S ALZHEIMER'S SPECIAL CARE UNIT OR PROCRAM.
- (E) THE OFFICE OF HEALTH CARE QUALITY SHALL EXAMINE THE RECORDS OF AND VERIFY THE ACCURACY OF A FACILITY'S PATIENT CARE DISCLOSURES AS PART OF THE FACILITY'S LICENSE RENEWAL PROCEDURE.
- (F) IF THE OFFICE OF HEALTH CARE QUALITY DETERMINES THAT THE FACILITY ADVERTISING, MARKETING, OR OTHERWISE PROMOTING THE ALZHEIMER'S SPECIAL CARE UNIT OR PROGRAM IS NOT PROVIDING THE ADVERTISED SERVICES OR CARE, THE OFFICE OF HEALTH CARE QUALITY SHALL INSTRUCT THE FACILITY TO DEVELOP AND IMPLEMENT A PLAN TO PROVIDE THE SERVICES OR CARE AS ADVERTISED, OR TO CEASE THE ADVERTISING, MARKETING, OR PROMOTING OF THE ALZHEIMER'S SPECIAL CARE UNIT OR PROGRAM.