**Section 250.2710 Special Care and/or Special Service Units**

a) As used in this Part, special care/service units may be or include, but not be limited to units for: intensive care, burn, coronary, neonatal, pulmonary, respiratory, physical therapy, social service, nuclear medicine, occupational therapy, hemodialysis, and other.

b) Special units shall have a defined organization and shall be integrated with other departments and services of the hospital.

c) Each unit shall be under the professional direction of a physician qualified by training and experience in the specialty care.

d) The responsibility and the accountability of the special care/service units to the medical staff and administration shall be defined.

e) The units shall be governed by written policies and procedures specifically relating to utilization of the service/unit.

f) The policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the governing body. Procedures shall be approved by the administration and medical staff where such is appropriate. Policies and procedures shall include, but not limited to:

1) Admission, discharge and transfer policies.

2) Staffing requirements.

3) Routine procedures.

4) Emergency procedures.

5) Isolation procedures.

6) Infection control procedures.

g) Qualified personnel shall be provided based on the scope and complexity of the services provided. (Refer to Subpart D Personnel Service)

h) Patient care provided by the Nursing Service shall be supervised and/or provided by qualified registered professional nurses specifically trained. (Refer to Subpart D Personnel Service)

i) There shall be specific written policies acceptable to medical staff and administration, defining the scope of responsibilities assigned to professional staff personnel.

j) A continuing education program developed specifically for personnel of special care units shall be provided to ensure an optimum level of skills and performance.

k) Periodically, an appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.

(Source: Amended at 5 Ill. Reg. 507, effective December 29, 1980)