

PROPOSED REGULATION OF THE STATE BOARD OF HEALTH

LCB File No. R046-14

A REGULATION to establish licensure requirements of Psychiatric Residential Treatment Facilities in the state of Nevada pursuant to NRS 449.0303.

EXPLANATION – Matter in *italics* is new; matter in brackets ~~omitted material~~ is material to be omitted.

Section 1. *“Psychiatric Residential Treatment Facility” defined. “Psychiatric Residential Treatment Facility” means a facility other than a hospital that provides a range of psychiatric services to treat residents under the age of 21, on an inpatient basis under the direction of a physician.*

Sec. 2. *A person or a public or private facility shall not operate or provide the services of a psychiatric residential treatment facility or represent that it operates or provides the services of a psychiatric residential treatment facility, unless the person or the public or private facility is licensed by the Division of Public and Behavioral Health, to operate a psychiatric residential treatment facility.*

Sec. 3. *If a person or a public or private entity wants to operate a psychiatric residential treatment facility, the person or the public or private entity must:*

(a) File with the Division an application for a license pursuant to NAC 449.011.

(b) Demonstrate that the proposed facility is able to comply with the requirements set forth in sections 2 to 50 of these regulations.

The applicant must also submit proof to the Division of accreditation by: The Joint Commission, The Commission on Accreditation of Rehabilitation Facilities, The Council on Accreditation of Services for Families and Children, or by any other accrediting organization, with comparable standards that is approved by the State Board of Health.

Sec. 4. *An organization not already specified in section 3, which accredits psychiatric residential treatment facilities and wishes to be recognized by the State Board of Health in accordance with section 3 as an accrediting organization for purposes of this section, must submit to the Division an application on a form prescribed by the Division. The Division shall review each application received pursuant to this subsection and shall forward to the State Board of Health each application, including the recommendation of the Division whether to approve or deny the application. The recommendation of the Division must be based upon whether the applicant requires the psychiatric residential treatment facility to meet the minimum requirements necessary to ensure quality services are provided. The State Board of Health may approve or deny an application submitted pursuant to this subsection.*

Sec. 5. *A psychiatric residential treatment facility shall meet all applicable:*

- (a) Federal and state laws;*
- (b) Local ordinances, including, without limitation, zoning ordinances; and*
- (c) Life safety, environmental, health, fire and local building codes.*

Sec. 6. *A psychiatric residential treatment facility must comply with the requirements set forth in 42 CFR, part 441, subpart D, section 441.150 through section 441.156 inclusive, and 42 CFR, part 483, subpart G, section 483.350 through section 483.376 inclusive.*

Sec. 7. *After it receives a properly completed application, accompanied by the appropriate fee, the Division shall conduct an investigation of the applicant and inspect the proposed psychiatric residential treatment facility.*

Sec. 8. *When it is determined that the facility is in substantial compliance with the regulations set forth in sections 2 to 50 of these regulations, the Division will issue a license authorizing the facility to operate as a psychiatric residential treatment facility.*

Sec. 9. *During the term of his or her license, the licensee shall continuously maintain the psychiatric residential treatment facility in conformance with the provisions of sections 2 to 50 of these regulations, inclusive. Any violation of these provisions may result in the suspension or revocation of the license.*

Sec. 10. *The Division may suspend or revoke a license issued pursuant to sections 2 to 50 of these regulations, inclusive, or cancel such a license and issue a provisional license based upon any grounds for such action set forth in NAC 449.002 to 449.99939, inclusive, or chapter 449 of NRS.*

Sec. 11. *A psychiatric residential treatment facility must be administered in a manner that enables the facility to use its resources effectively and efficiently to meet the needs of and provide quality care to its patients. The facility shall develop policies and provide services for the care of its patients based on the identified needs of those patients.*

Sec. 12. *A psychiatric residential treatment facility must define in writing the scope of services provided by each department, unit or service within the facility and must be approved by the administration and the medical staff of the facility. Each department, unit or service within the facility shall provide patient care in accordance with its scope of services. The policies and procedures of the facility and of each department, unit or service within the facility must, to the extent necessary, be integrated with the policies and procedures of the other departments, units and services within the facility.*

Sec. 13. *The administrator of a psychiatric residential treatment facility shall:*

- (a) Ensure that the competence of all members of the facility's staff is assessed, maintained, demonstrated and improved;*
- (b) Provide an orientation process for persons hired to work at the facility that includes initial job training and information; and*

(c) Assess the ability of the members of the facility's staff to fulfill their specified responsibilities.

Sec. 14. *The administrator of a psychiatric residential treatment facility shall ensure that it is staffed by a sufficient number of personnel, whose qualifications are consistent with their job responsibilities, to provide proper care to the patients of admitted to the facility.*

Sec. 15. *The administrator of a psychiatric residential treatment facility shall ensure that the facility has an effective, comprehensive quality improvement program to evaluate the provision of care to its patients. The quality improvement program must:*

(a) Be ongoing;

(b) Include a written plan for carrying out the program; and

(c) Provide for the creation of a committee to oversee the program.

Sec. 16. *The psychiatric residential treatment facility's committee to oversee the quality improvement program shall:*

(a) Take and document appropriate remedial action to address deficiencies found through the quality improvement program and shall document the outcome of any remedial action taken, and

(b) When the findings of an assessment relate to the performance of an individual licensed practitioner, the medical staff shall determine how such a finding will be used in any peer review, ongoing monitoring and periodic evaluations of the competence of the practitioner. If the findings of the assessment relate to the performance of a person who is not a licensed practitioner, the director of the department, unit or service in which that person works shall determine how the finding will be used in evaluating the competence of the person.

Sec. 17. *The psychiatric residential treatment facility shall not have more patients than the number of beds for which it is licensed.*

Sec. 18. *The psychiatric residential treatment facility shall be solidly constructed with adequate space and safeguards for each patient. The condition of the physical plant and the overall facility environment must be maintained in a manner so that the safety and well-being of patients are ensured.*

Sec. 19. *The psychiatric residential treatment facility shall develop and carry out a comprehensive plan for emergency preparedness which:*

(a) Addresses internal and external emergencies, both local and widespread; and

(b) Is based on current standards for disaster management and fire safety.

Sec. 20. *The psychiatric residential treatment facility shall ensure that the facility staff and patients are adequately protected from fire and other disasters.*

Sec. 21. *The psychiatric residential treatment facility shall provide patients access to their belongings as is appropriate based on the needs of the patients and the phase of treatment of the patients.*

Sec. 22. *The psychiatric residential treatment facility shall provide a clean and comfortable bed and mattress for each patient. Bed linen, blankets, pillows, washcloths and towels that are clean and in good condition must be provided to each patient. The facility shall have such systems as are necessary to ensure that an adequate supply of clean linen is provided to each patient.*

Sec. 23. *The psychiatric residential treatment facility shall provide each patient with necessary bedside equipment and supplies based on the needs of the inpatient. The necessary equipment and supplies must include, without limitation, equipment for personal hygiene. The equipment and supplies must be maintained in a sanitary manner.*

Sec. 24. *The psychiatric residential treatment facility shall:*

- (a) Provide adequate lighting levels; and*
- (b) Provide comfortable and safe temperature levels.*

Sec. 25. *The psychiatric residential treatment facility shall establish organized housekeeping services planned, operated and maintained to provide a pleasant, safe and sanitary environment. Adequate personnel, using accepted practices and procedures, shall keep the facility free from offensive odors, accumulations of dirt, rubbish, dust and safety hazards.*

Sec. 26. *The psychiatric residential treatment facility shall ensure cleaning is performed in a manner to minimize the spread of pathogenic organisms.*

Sec. 27. *The psychiatric residential treatment facility shall develop and carry out standards and systems for the operation of laundry services. Laundry services, whether owned by the facility or provided pursuant to a contract, must:*

- (a) Maintain standards for a safe work environment for employees;*
- (b) Address issues relating to the control of infections; and*
- (c) Have written policies relating to the handling, storage, transportation and processing of its linen.*

Sec. 28. *The psychiatric residential treatment facility shall:*

- (a) Provide a sanitary environment to avoid sources and transmission of infections and communicable diseases;*
- (b) Develop and carry out an active program for the prevention, control and investigation of infections and communicable diseases;*
- (c) Develop a system for identifying, reporting, investigating and controlling infections and communicable diseases of patients and personnel of the facility; and*
- (d) Maintain a record of incidents within the facility related to infection and communicable disease.*

Sec. 29. *The psychiatric residential treatment facility shall:*

- (a) Develop and carry out policies and procedures for admitting patients; and*
- (b) Ensure that each patient, or the parent, guardian or other person legally responsible for the patient, receives information about the proposed care of the patient.*

Sec. 30. The psychiatric residential treatment facility shall:

- (a) Have a process for discharge planning that applies to all patients;*
- (b) Develop and carry out policies and procedures regarding the process for discharge planning;*
- (c) Ensure activities related to discharge planning are conducted in a manner that does not contribute to delays in the discharge of the patient;*
- (d) Ensure the evaluation of the needs of a patient relating to discharge planning and the discharge plan for the patient are documented in his or her medical record; and*
- (e) Ensure the discharge plan is discussed with the patient or the person acting on behalf of the patient.*

Sec. 31. The psychiatric residential treatment facility shall:

- (a) Provide each patient with a nourishing, palatable, well-balanced diet that meets the daily nutritional and dietary needs of the patient;*
- (b) Ensure the menu for a patient meets the nutritional needs of the patient in accordance with:
 - (1) Recognized dietary practices; and*
 - (2) The orders of the practitioners responsible for the care of the patient;**
- (c) ensure that not less than three meals are served daily to patients and not more than 15 hours elapse between the evening meal and breakfast served the following day;*
- (d) Ensure Nourishment is provided between meals as required by the diet prescription and must be available to each patient unless otherwise ordered by the physician of the patient;*
- (e) Ensure menus are followed. A meal may vary from the planned menu if the change is noted in writing in the records maintained by the dietary services; and*
- (f) Ensure that persons who are responsible for therapeutic diets have sufficient knowledge of food values to make appropriate substitutions when necessary.*

Sec. 32. The psychiatric residential treatment facility shall:

- (a) Ensure adequate space for the preparation and service of food is provided;*
- (b) Ensure adequate space is maintained to accommodate equipment, personnel and procedures necessary for the proper cleaning and sanitizing of dishes and other utensils;*
- (c) Ensure in providing for the preparation and serving of food, the facility shall:
 - (1) Comply with the standards prescribed in chapter 446 of NRS and the regulations adopted pursuant thereto;*
 - (2) Obtain the necessary permits from the Division;**

Sec. 33. The psychiatric residential treatment facility shall:

- (a) Maintain an organized dietary service that is staffed by an adequate number of personnel. The dietary service must be integrated with the other departments, units and services within the facility; and*
- (b) Ensure dietary staff are trained in basic techniques of food sanitation.*

Sec. 34. *The psychiatric residential treatment facility shall ensure a patient receives a therapeutic diet when it is determined that he or she has a nutritional problem.*

Sec. 35. *The psychiatric residential treatment facility shall:*

(a) Store, prepare, distribute and serve food under sanitary conditions.

(b) Maintain on its premises at least a 1-week supply of staple foods and at least a 2-day supply of perishable foods. The supplies must be appropriate to meet the requirements of the menu. All food must be of good quality and procured from sources approved or considered satisfactory by federal, state and local authorities.

Sec. 36. *An order for medication or biologicals for a patient must be in writing and signed by the practitioner, or other appropriate professional person authorized by state or federal law to order the medication or biological, who is responsible for the care of the patient.*

Sec. 37. *When a telephone or verbal order is used to order medications or biologicals, the order must be:*

(a) Accepted only by a person who is authorized by the policies and procedures of the medical staff, which must be consistent with state law, to accept such an order; and

(b) Signed or initialed by the prescribing practitioner in accordance with facility policy.

Sec. 38. *An order for a medication or a biological must include the name of the medication or biological and the dosage, time or frequency of administration and route of administration of the medication or biological.*

Sec. 39. *Errors in administering a drug to a patient, adverse reactions by a patient to a drug and incompatibilities between a drug and patient must be immediately reported to the attending physician of the patient and, if appropriate, to the committee that oversees the quality improvement program.*

Sec. 40. *Abuses and losses of controlled substances must be reported, in accordance with all applicable state and federal laws. Security of all medications must be maintained in accordance with applicable state law.*

Sec. 41. *Information relating to drug interactions, drug therapy, side effects, toxicology, dosage indications for use and routes of administration must be made available to the professional members of the staff.*

Sec. 42. *Only members of the staff who are legally authorized to administer medications may do so.*

Sec. 43. *A psychiatric residential treatment facility shall not discriminate in the admission of, or the provision of services to, a person on the basis of his or her race, color, religion, national origin, gender or disability.*

Sec. 44. *To provide a patient with the appropriate care at the time that the care is needed, the needs of the patient must be assessed by qualified personnel throughout the patient's stay at*

the facility. The assessment must be comprehensive and accurate as related to the condition of the patient.

Sec. 45. *Each patient must be reassessed according to facility policy:*

- (a) When there is a significant change in the patient's condition;*
- (b) When there is a significant change in the patient's diagnosis; or*
- (c) To determine the patient's response to the care that he or she is receiving.*

Sec. 46. *Each patient must receive, and the facility shall provide for, individualized care, treatment based on the assessment of the patient that is appropriate to the needs of the patient, and the severity of the condition, from which the patient is suffering.*

Sec. 47. *A psychiatric residential treatment facility shall develop and carry out policies and procedures that protect and support the rights of patients as set forth in NRS 449.700 to 449.730, inclusive.*

Sec. 48. *A psychiatric residential treatment facility shall have written policies concerning the qualifications, responsibilities and conditions of employment for each type of personnel employed by the facility, including the licensure and certification of each employee when required by law.*

Sec. 49. *A psychiatric residential treatment facility shall have written policies that provide for:*

- (a) The orientation of all employees to the policies and objectives of the facility; and*
- (b) Ensuring the facility will have evidence of a current license or certification on file at the facility for each person employed, or under contract with the facility, who is required to be licensed or certified by law to perform his or her job.*
- (c) Ensuring the health records of employees contain documented evidence of surveillance and testing of those employees for tuberculosis in accordance with chapter 441A of NAC.*

Sec. 50. *A psychiatric residential treatment facility shall:*

- (a) Maintain a patient record for each person evaluated or treated in the facility;*
- (b) Ensure patient records are accurately written, promptly completed, properly filed and retained, and accessible. A facility shall use a system for identification and record maintenance that ensures the integrity of the authentication of the record and protects the security of all entries to the patient record;*
- (c) Ensure patient records are retained in their original form or in a legally reproduced form for at least 5 years.*
- (d) Ensure patient records include information:*
 - (1) Demonstrating the justification for the admission of a patient;*
 - (2) Supporting the diagnosis of the patient; and*
 - (3) Describing the progress of the patient and his or her response to the medications and services received.*
- (e) Ensure all entries to a patient record are legible and complete, and authenticated and dated promptly by the person who is responsible for ordering, providing or evaluating the service provided. In authenticating a patient record, the person shall include his or her name and*

discipline. Authentication may include the signature or written initials of the person or a computer entry by the person.

(f) Ensure all patient records document the following information, as appropriate:

- (1) The diagnosis of the patient at the time of admission;*
- (2) The results of all consultative evaluations of the patient and the appropriate findings by clinical and other staff involved in caring for the patient;*
- (3) Documentation of any complications suffered by the patient;*
- (4) All orders of practitioners, reports of treatment, records of medication, and other information necessary to monitor the condition of the patient;*
- (5) A discharge summary that includes a description of the outcome of the stay at the facility, disposition of the case and the provisions for follow-up care that have been provided to the patient; and*
- (6) The final diagnosis of the patient.*

(g) Ensure the patient record is completed not later than 30 days after the date on which he or she is discharged from the facility.

Sec. 51. NAC 449.016 is hereby amended to read as follows:

1. Except as otherwise provided in NAC 449.0168, an applicant for a license to operate any of the following facilities must pay to the Health Division the following nonrefundable fees:

	Fee per facility	Fee per bed in the facility
(a) A skilled nursing facility.....	\$2,252	\$108
(b) A hospital, other than a rural hospital.....	14,606	110
(c) A rural hospital.....	9,530	62
(d) An intermediate care facility for persons with mental retardation or developmental disabilities.....	2,018	280
(e) An intermediate care facility, other than an intermediate care facility for persons with mental retardation or developmental disabilities.....	946	72
(f) Except as otherwise provided in subsection 3, a residential facility for groups.....	2,386	200
(g) A facility for the treatment of abuse of alcohol or drugs.....	782	190
(h) A facility for hospice care.....	3,988	352
(i) A home for individual residential care.....	1,764	184
(j) A facility for modified medical detoxification.....	9,960	494
(k) A community triage center.....	782	136
(l) A facility for the treatment of irreversible renal disease.....	4,178	120
(m) A halfway house for recovering alcohol and drug abusers.....	2,800	368
(n) A facility for transitional living for released offenders.....	3,990	146
<i>(o) A psychiatric residential treatment facility.....</i>	<i>9,530</i>	<i>62</i>

2. An applicant for the renewal of such a license must pay to the Health Division the following nonrefundable fees:

	Fee per facility	Fee per bed in the facility
(a) A skilled nursing facility.....	\$1,126	\$54
(b) A hospital, other than a rural hospital.....	7,303	55
(c) A rural hospital.....	4,765	31
(d) An intermediate care facility for persons with mental retardation or developmental disabilities.....	1,009	140
(e) An intermediate care facility, other than an intermediate care facility for persons with mental retardation or developmental disabilities.....	473	46
(f) Except as otherwise provided in subsection 3, a residential facility for groups.....	1,193	100
(g) A facility for the treatment of abuse of alcohol or drugs.....	391	95
(h) A facility for hospice care.....	1,994	176
(i) A home for individual residential care.....	500	92
(j) A facility for modified medical detoxification.....	4,980	247
(k) A community triage center.....	391	68
(l) A facility for the treatment of irreversible renal disease.....	2,089	60
(m) A halfway house for recovering alcohol and drug abusers.....	1,400	184
(n) A facility for transitional living for released offenders.....	1,995	73
<i>(o) A psychiatric residential treatment facility.....</i>	<i>4,765</i>	<i>31</i>

3. An applicant for a license or for the renewal of a license for a residential facility for groups shall pay a fee of \$35 for each bed in the facility if the facility is paid less than \$1,000 per month for services provided to each bed in the facility.

4. An application for a license is valid for 1 year after the date on which the application is submitted. If an applicant does not meet the requirements for licensure imposed by chapter 449 of NRS or the regulations adopted pursuant thereto within 1 year after the date on which he or she submits his or her application, the applicant must submit a new application and pay the required fee to be considered for licensure.

5. Pursuant to NRS 449.050, if an application for a license to operate a facility for transitional living for released offenders or the renewal of such a license is denied, any amount of a fee paid pursuant to paragraph (n) of subsection 1 or paragraph (n) of subsection 2 that exceeds the expenses and costs incurred by the Health Division must be refunded to the applicant.