

**PROPOSED REGULATION OF THE
STATE BOARD OF HEALTH**

LCB File No. R046-14

April 14, 2014

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

AUTHORITY: §§1 and 3-34, NRS 449.0302 and 449.0303; §§2, 35 and 36, NRS 439.150, 449.0302, 449.0303 and 449.050.

A REGULATION relating to public health; establishing requirements for the licensure of psychiatric residential treatment facilities; establishing grounds for the suspension and revocation of such a license; imposing certain fees for the issuance and renewal of such a license; and providing other matters properly relating thereto.

Section 1. Chapter 449 of NAC is hereby amended by adding thereto the provisions set forth as sections 2 to 34, inclusive, of this regulation.

Sec. 2. *“Psychiatric residential treatment facility” has the meaning ascribed to it in section 5 of this regulation.*

Sec. 3. *As used in sections 3 to 34, inclusive, of this regulation, unless the context otherwise requires, the words and terms defined in sections 4, 5 and 6 of this regulation have the meanings ascribed to them in those sections.*

Sec. 4. *“Administrator” means the person who is appointed by a psychiatric residential treatment facility to have primary responsibility for the operations of the overall program of the facility.*

Sec. 5. *“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 years on an inpatient basis under the direction of a physician.*

Sec. 6. *“Resident” means a person who resides in a psychiatric residential treatment facility and receives psychiatric services at the facility.*

Sec. 7. *A person or a public or private facility shall not operate or provide the services of a psychiatric residential treatment facility or represent that the person or the public or private entity 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 pursuant to sections 3 to 34, inclusive, of this regulation to operate the psychiatric residential treatment facility.*

Sec. 8. 1. *If a person or a public or private facility wants to operate a psychiatric residential treatment facility, the person or the public or private facility must:*

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

(b) Include with the application proof of accreditation by:

(1) The Joint Commission;

(2) The Commission on Accreditation of Rehabilitation Facilities;

(3) The Council on Accreditation; or

(4) Any other accrediting organization with comparable standards that is approved by the Board pursuant to subsection 2; and

(c) Demonstrate that the proposed psychiatric residential treatment facility is able to comply with the requirements set forth in sections 3 to 34, inclusive, of this regulation.

2. *An organization which accredits psychiatric residential treatment facilities that wishes to be recognized by the Board as an accrediting organization for the 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 Board 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 a psychiatric residential treatment facility to meet minimum requirements necessary to ensure a high level of quality. The Board may approve or deny an application submitted pursuant to this subsection.

Sec. 9. 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. 10. The Division shall issue a license to operate a psychiatric residential treatment facility to the applicant if, after investigation, the Division finds that the applicant is in substantial compliance with the provisions of sections 3 to 34, inclusive, of this regulation.

Sec. 11. 1. A psychiatric residential treatment facility must be administered in a manner that enables the psychiatric residential treatment facility to use its resources effectively and efficiently to meet the needs of and provide quality care to its residents. The psychiatric residential treatment facility shall develop and provide services for the care of its residents based on the identified needs of those residents.

2. A psychiatric residential treatment facility must define in writing the scope of services provided by each department, unit or service within the psychiatric residential treatment facility. The written scope of services must be approved by the administration and the medical staff of the psychiatric residential treatment facility. Each department, unit or service within a psychiatric residential treatment facility shall provide residents care in accordance with its scope of services. The policies and procedures of a psychiatric residential treatment facility and of each department, unit or service within the psychiatric residential treatment facility

must, to the extent necessary, be integrated with the policies and procedures of the other departments, units and services within the psychiatric residential treatment facility.

3. The administrator of a psychiatric residential treatment facility shall:

(a) Ensure that the competence of all members of the staff of the psychiatric residential treatment facility is assessed, maintained, demonstrated and improved;

(b) Provide an orientation process for persons hired to work at the psychiatric residential treatment facility that includes initial job training and information; and

(c) Assess the ability of the members of the staff of the psychiatric residential treatment facility to fulfill their specified responsibilities.

4. The administrator of a psychiatric residential treatment facility shall ensure that the psychiatric residential treatment facility is staffed by a sufficient number of personnel, whose qualifications are consistent with their job responsibilities, to provide care to the residents of the psychiatric residential treatment facility.

Sec. 12. *1. The administrator of a psychiatric residential treatment facility shall ensure that the psychiatric residential treatment facility has an effective, comprehensive quality improvement program to evaluate the provision of care to its residents.*

2. 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.

3. The committee to oversee the program shall:

(a) Take and document appropriate remedial action to address deficiencies found through the quality improvement program;

(b) Document the outcome of any remedial action taken; and

(c) Initiate any assessments required by the quality improvement program.

4. 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. 13. A psychiatric residential treatment facility shall not have more residents than the number of beds for which it is licensed.

Sec. 14. 1. The buildings of a psychiatric residential treatment facility must be solidly constructed with adequate space and safeguards for each resident. The condition of the physical plant and the overall environment of the psychiatric residential treatment facility must be developed and maintained in a manner so that the safety and well-being of residents are ensured.

2. A 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.

3. A psychiatric residential treatment facility shall ensure that the staff and residents of the psychiatric residential treatment facility are adequately protected from fire and other disasters.

Sec. 15. 1. A psychiatric residential treatment facility shall provide residents access to their belongings as is appropriate based on the needs of the residents and the phase of treatment of the residents.

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

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

4. A psychiatric residential treatment facility shall provide:

(a) Adequate lighting levels; and

(b) Comfortable and safe temperature levels.

Sec. 16. 1. A 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 psychiatric residential treatment facility free from offensive odors, accumulations of dirt, rubbish and dust and safety hazards.

2. The psychiatric residential treatment facility shall ensure that cleaning is performed in a manner that minimizes the spread of pathogenic organisms.

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

(a) Meet standards for a safe work environment for employees; and

(b) Address issues relating to the control of infections.

4. A psychiatric residential treatment facility shall develop and carry out written policies relating to the handling, storage, transportation and processing of its linens.

Sec. 17. *A psychiatric residential treatment facility shall:*

1. Provide a sanitary environment to avoid sources and transmission of infections and communicable diseases;

2. Develop and carry out an active program for the prevention, control and investigation of infections and communicable diseases;

3. Develop a system for identifying, reporting, investigating and controlling infections and communicable diseases of residents and personnel of the psychiatric residential treatment facility; and

4. Maintain a record of incidents within the psychiatric residential treatment facility related to infections and communicable diseases.

Sec. 18. *A psychiatric residential treatment facility shall:*

1. Develop and carry out policies and procedures for admitting residents; and

2. Ensure that each resident, or the parent, guardian or other person legally responsible for the resident, receives information about the proposed care of the resident.

Sec. 19. *A psychiatric residential treatment facility shall:*

1. Have a process for discharge planning that applies to all residents;

- 2. Develop and carry out policies and procedures regarding the process for discharge planning;*
- 3. Ensure activities relating to discharge planning are conducted in a manner that does not contribute to delays in the discharge of the resident;*
- 4. Ensure the evaluation of the needs of a resident relating to discharge planning and the discharge plan for the resident are documented in his or her record; and*
- 5. Ensure the discharge plan is discussed with the resident or the person acting on behalf of the resident.*

Sec. 20. *A psychiatric residential treatment facility shall:*

- 1. Provide each resident with a nourishing, palatable, well-balanced diet that meets the daily nutritional and dietary needs of the resident.*
- 2. Ensure that the menu for a resident meets the nutritional needs of the resident in accordance with:*
 - (a) Recognized dietary practices; and*
 - (b) The orders of the practitioners responsible for the care of the resident.*
- 3. Ensure that not less than three meals are served daily to residents and not more than 15 hours elapse between the evening meal and breakfast served the following day.*
- 4. Ensure that nourishment is provided between meals as required by diet prescription and is available to each resident unless otherwise ordered by the physician of the resident.*
- 5. Except as otherwise provided in this subsection, ensure that 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 service.*

6. A psychiatric residential treatment facility shall ensure that persons who are responsible for therapeutic diets have sufficient knowledge of food values to make appropriate substitutions when necessary.

Sec. 21. *A psychiatric residential treatment facility shall ensure that:*

- 1. Adequate space for the preparation and service of food is provided;*
- 2. Adequate space is maintained to accommodate equipment, personnel and procedures necessary for the proper cleaning and sanitizing of dishes and other utensils; and*
- 3. In providing for the preparation and serving of food, the facility:*
 - (a) Complies with the standards prescribed in chapter 446 of NRS and chapter 446 of NAC; and*
 - (b) Obtains the necessary permits from the Division.*

Sec. 22. *1. A psychiatric residential treatment facility shall 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 psychiatric residential treatment facility.*

2. The psychiatric residential treatment facility shall ensure that the personnel who provide the dietary service are trained in basic techniques of food sanitation.

Sec. 23. *A psychiatric residential treatment facility shall ensure that a resident receives a therapeutic diet when it is determined that he or she has a nutritional problem.*

Sec. 24. *1. A psychiatric residential treatment facility shall store, prepare, distribute and serve food under sanitary conditions.*

2. A psychiatric residential treatment facility shall 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. 25. 1. *Except as otherwise provided in this section, an order for a medication or biological for a resident 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 resident.*

2. When a telephone or verbal order is used to order a medication or biological, the order must be:

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

(b) Signed or initialed by the prescribing practitioner in accordance with the policies and procedures of the psychiatric residential treatment facility.

3. An order for a medication or 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. 26. 1. *Errors in administering a drug to a resident, adverse reactions by a resident to a drug and incompatibilities between a drug and resident must be immediately reported to the attending physician of the resident and, if appropriate, to the committee that oversees the quality improvement program established pursuant to section 12 of this regulation.*

2. Abuses and losses of controlled substances must be reported, in accordance with all applicable state and federal laws, to the person responsible for the pharmaceutical service and the administrator of the psychiatric residential treatment facility.

3. 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 of the psychiatric residential treatment facility.

Sec. 27. 1. Only members of the staff of the psychiatric residential treatment facility who are legally authorized to administer medications may do so.

2. Security of all medications must be maintained in accordance with applicable state law.

Sec. 28. 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, age, gender or disability.

Sec. 29. 1. To provide a resident with the appropriate care at the time that the care is needed, the needs of the resident must be assessed by qualified personnel of the psychiatric residential treatment facility throughout the resident's stay with the facility. The assessment must be comprehensive and accurate as related to the condition of the resident.

2. Each resident must receive, and the psychiatric residential treatment facility shall provide, individualized care and treatment based on the assessment of the resident that is appropriate to the needs of the resident and the severity of the condition from which the resident is suffering.

3. Each resident must be reassessed according to the policy of the psychiatric residential treatment facility:

(a) When there is a significant change in the resident's condition;

(b) When there is a significant change in the resident's diagnosis; or

(c) To determine the resident's response to the care that he or she is receiving.

Sec. 30. *A psychiatric residential treatment facility shall develop and carry out policies and procedures that protect and support the rights of residents in the same manner as set forth for medical facilities and facilities for the dependent in NRS 449.700 to 449.730, inclusive.*

Sec. 31. 1. *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 psychiatric residential treatment facility, including the licensure and certification of each employee when required by law.*

2. The written policies must provide for the orientation of all employees to the policies and objectives of the psychiatric residential treatment facility.

3. The psychiatric residential treatment facility shall have evidence of a current license or certification on file at the psychiatric residential treatment facility for each person employed by the psychiatric residential treatment facility, or under contract with the psychiatric residential treatment facility, who is required to be licensed or certified by law to perform his or her job.

4. The psychiatric residential treatment facility shall ensure that the health records of its employees contain documented evidence of surveillance and testing of those employees for tuberculosis in accordance with chapter 441A of NAC.

Sec. 32. *A psychiatric residential treatment facility shall:*

1. Maintain a record for each resident evaluated or treated in the psychiatric residential treatment facility.

2. Ensure that each record is accurately written, promptly completed, properly filed and retained and accessible. A psychiatric residential treatment 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 record.

3. Ensure that the record of a resident is retained in accordance with the provisions of NRS 629.051.

4. Ensure that each record of a resident includes information:

(a) Demonstrating the justification for the admission of the resident;

(b) Supporting the diagnosis of the resident; and

(c) Describing the progress of the resident and his or her response to the medication and services received.

5. Ensure all entries to a record of a resident are legible and complete, and authenticated and dated promptly by the person who is responsible for ordering, providing or evaluating the services provided. In authenticating the 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.

6. Ensure all records of a resident document the following information, as appropriate:

(a) The diagnosis of the resident at the time of admission;

(b) The results of all consultative evaluations of the resident and the appropriate findings by clinical and other staff involved in caring for the resident;

(c) Documentation of any complications suffered by the resident;

(d) All orders of practitioners, reports of treatment, records of medication and other information necessary to monitor the condition of the resident;

(e) A discharge summary that includes a description of the outcome of the stay at the psychiatric residential treatment facility, the disposition of the case and the provisions for follow-up care that have been provided to the resident; and

(f) The final diagnosis of the resident.

7. Ensure that the record of a resident is completed not later than 30 days after the date on which he or she is discharged from the psychiatric residential treatment facility.

Sec. 33. *1. During the term of a license to operate a psychiatric residential treatment facility, the licensee shall continuously maintain the psychiatric residential treatment facility in conformance with the provisions of sections 3 to 34, inclusive, of this regulation.*

2. Each psychiatric residential treatment facility shall comply with the requirements set forth in 42 C.F.R. §§ 441.150 to 441.156, inclusive, and 483.350 to 483.376, inclusive.

3. In addition to the requirements of subsections 1 and 2, each psychiatric residential treatment facility shall comply with all applicable:

(a) Federal and state laws;

(b) Local ordinances, including, without limitation, zoning ordinances; and

(c) Environmental, life safety, fire, health and local building codes.

4. Any violation of this section may result in the suspension or revocation of the license to operate the psychiatric residential treatment facility.

Sec. 34. *The Division may suspend or revoke a license issued pursuant to sections 3 to 34, inclusive, of this regulation 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, and sections 3 to 34, inclusive of this regulation, or chapter 449 of NRS.*

Sec. 35. NAC 449.012 is hereby amended to read as follows:

449.012 As used in NAC 449.012 to 449.0169, inclusive, *and section 2 of this regulation*, unless the context otherwise requires, the words and terms defined in NAC 449.01205 to 449.0127, inclusive, *and section 2 of this regulation*, have the meanings ascribed to them in those sections.

Sec. 36. NAC 449.016 is hereby amended to read as follows:

449.016 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 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 an intellectual disability or persons with a developmental disability.....	2,018	280
(e) An intermediate care facility, other than an intermediate care facility for persons with an intellectual disability or persons with a developmental disability	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

	Fee per facility	Fee per bed in the facility
(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 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 an intellectual disability or persons with a developmental disability	1,009	140

(e) An intermediate care facility, other than an intermediate care facility for persons with an intellectual disability or persons with a developmental disability	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 Division must be refunded to the applicant.