

**PROPOSED REGULATION OF THE DIVISION OF PUBLIC AND
BEHAVIORAL HEALTH OF THE DEPARTMENT OF HEALTH AND
HUMAN SERVICES**

LCB File No. R121-16

A REGULATION to establish licensure requirements for Recovery Centers that provide services to persons after surgery in another setting, pursuant to authority established at NRS 449.0303.

EXPLANATION – Matter in *italics* is new.

Section 1. *“Recovery Center” defined. “Recovery Center” means a distinct facility that operates exclusively to provide short term care to persons after surgery.*

Sec. 2. *Persons may only be admitted to a recovery center for less than 72 hours.*

Sec. 3.

1. A recovery center must be designed, constructed, equipped and maintained in a manner that protects the health and safety of the patients and personnel of the facility and members of the general public.

2. Except as otherwise provided in this section:

(a) A recovery center shall comply with the provisions of NFPA 101: Life Safety Code, adopted by reference pursuant to NAC 449.0105.

(b) Any new construction, remodeling or change in use of a recovery center must comply with the nursing facilities section of the Guidelines for Design and Construction of Hospital and Health Care Facilities, adopted by reference pursuant to NAC 449.0105, unless the remodeling is limited to refurbishing an area within the facility, including, without limitation, painting the area, replacing the flooring, repairing windows, or replacing window and wall coverings. All requirements in the Guidelines must be met by the recovery center except 4.1-4.3 Personal Services (Barber/Beauty) Areas.

3. A recovery center shall be deemed to be in compliance with the provisions of subsection 2 if:

(a) The recovery center was licensed prior to the implementation of these regulations, as an intermediate care facility and is changing its licensure to a recovery center, the use of the physical space in the facility is not changed and there are no deficiencies in the construction of the facility that are likely to cause serious injury, harm or impairment to the public health and welfare; or

(b) The recovery center initially applied for licensure as an intermediate care facility prior to implementation of these regulations and has submitted building plans to the Bureau before implementation of these regulations, and:

(1) The Bureau determines that the plans comply with standards for construction of intermediate care facilities with or without approved variances;

(2) The facility is constructed in accordance with those standards;

(3) Construction of the facility is begun before implementation of these regulations; and

(4) There are no deficiencies in the construction of the facility that are likely to cause serious injury, harm or impairment to the public health and welfare.

4. A recovery center shall comply with 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, related to the construction and maintenance of the facility. If there is a difference between state and local requirements, the more stringent requirements apply.*

5. A recovery center shall submit building plans for new construction or remodeling to the entity designated to review such plans by the Division pursuant to NAC 449.0115. The entity's review of those plans is advisory only and does not constitute approval for the licensing of the facility. Before the construction or remodeling may begin, the plans for the construction or remodeling must be approved by the Division. The Bureau shall not approve a facility for licensure until all construction is completed and a survey is conducted at the site of the facility.

Sec. 4. A recovery center shall not admit more patients to the facility than the number of beds for which it is licensed.

Sec. 5. A recovery center shall maintain a contract of insurance to ensure adequate coverage against liabilities resulting from claims incurred in the course of its operation.

Sec. 6. A certificate of insurance must be furnished to the Division as evidence that the contract of insurance is in force, and a license must not be issued until that certificate is furnished. Each certificate of insurance must contain an endorsement providing for a notice of 30 days to the Bureau before the effective date of a cancellation or nonrenewal of the policy.

Sec. 7. A recovery center must have a governing body that is legally responsible for establishing and carrying out policies regarding the management and operation of the facility.

Sec. 8.

1. The governing body shall appoint a qualified administrator for the center. Following his or her appointment, the administrator is responsible for the day to day management of the recovery center. The administrator must be allowed sufficient freedom from other responsibilities to provide adequate attention to the administration and management of the facility.

2. The administrator must:

- (a) Be at least 21 years of age;*
- (b) Possess one of the following qualifications:*
 - (1) Be a physician;*
 - (2) Be a registered nurse;*
 - (3) Have a bachelor's or postgraduate degree in administration or a field related to health care; or*
 - (4) Have at least 1 year of administrative experience in a health care setting;*

Sec. 9.

1. *A facility must have a written disaster preparedness plan.*
2. *There must be written procedures for personnel to follow in an emergency, including:*
 - (a) *The care of the persons admitted to the facility and emergency evacuation;*
 - (b) *The notification of other persons responsible for the persons admitted to the facility; and*
 - (c) *Arrangements for transportation or other appropriate services.*
3. *A facility shall notify the Bureau of the occurrence of a fire or disaster in the facility within 24 hours after the facility becomes aware of the fire or disaster.*

Sec. 10.

1. *A recovery center shall conduct and document an initial and ongoing assessment of the needs of each person admitted to the facility.*
2. *An initial assessment must be completed at the time of admission and must include, without limitation:*
 - (a) *Demographic and other pertinent information required to identify the person;*
 - (b) *The customary routine of the person;*
 - (c) *The physical condition of the person;*
 - (d) *Any problems related to the functional or structural physical condition of the person;*
 - (e) *Medications required to be taken by the person;*
 - (f) *Any special treatments and procedures required by the person; and*
 - (g) *The probability of discharging the person from the facility within 72 hours and any other information related to the discharge of the person from the facility;*
3. *Assessments must be conducted through direct observation of and communication with the person being assessed.*
4. *Assessments must be conducted by a registered nurse or coordinated by a registered nurse with the participation of other appropriate health care professionals. Each person who completes a portion of the assessment shall certify the accuracy of that portion. The registered nurse shall certify that the assessment is completed.*
5. *Assessments must be:*
 - (a) *Maintained in the person's record; and*
 - (b) *Used to develop, review and revise the person's plan of care.*

Sec. 11.

1. *A recovery center shall develop for each person admitted a plan of care.*
2. *A plan of care must include:*
 - (a) *Measurable objectives and timetables to meet the needs of the person identified during assessments; and*
 - (b) *A description of the services that will be provided to the person*
3. *A plan of care must be:*
 - (a) *Developed within the same day after completion of the initial assessment and revised as necessary after subsequent assessments; and*
 - (b) *Prepared by a registered nurse*
4. *Services provided to a person admitted to the facility must:*
 - (a) *Comply with the professional standards of quality applicable to those services; and*
 - (b) *Be provided by qualified persons in accordance with the person's plan of care.*

Sec. 12.

A recovery center shall provide to each person admitted to the facility the services and treatments that are identified in the plan of care and that are necessary ensure proper care while the person is admitted to the facility.

Sec. 13.

1. A recovery center shall prepare a summary of discharge for each person admitted to the facility.

2. Each summary of discharge must include:

(a) A summary of the pertinent information relating to the person's stay at the facility;

(b) A final summary of the person's physical health at the time of discharge; and

(c) A plan of care and follow up for the person after his or her discharge.

Sec. 14.

1. A recovery center shall maintain medical records for each person admitted to the facility in accordance with accepted professional principles.

2. A medical record must be:

(a) Complete;

(b) Accurate;

(c) Organized; and

(d) Readily accessible to those persons who are authorized to review the records.

3. A medical record must include:

(a) Sufficient information to identify the patient;

(b) The assessments of the person; and

(c) The person's plan of care and services and treatments provided to the person;

4. A recovery center shall maintain the medical records of each person admitted to the facility:

(a) For at least 5 years after the discharge of the person; and

(b) For at least 3 years after the patient reaches 18 years of age if the person is a minor.

5. A recovery center shall ensure that:

(a) Information contained in a medical record is not lost, destroyed or used in an unauthorized manner; and

(b) No person willfully and knowingly falsifies or causes another person to falsify information contained in a medical record

6. Information contained in a medical record is confidential and must not be released without the written consent of the person except:

(a) As required by law;

(b) Under a contract involving a third-party payor; or

(c) As required upon the transfer of the patient to another facility.

7. A person who is or was previously admitted to a recovery center or his or her legal representative may submit an oral or written request to the facility to inspect all records relating to the person maintained by the facility. The facility shall, within 24 hours after the receipt of such a request, excluding weekends and holidays, allow the person or his or her legal representative to inspect the records.

8. Upon request, the facility shall furnish to the person who is or was previously admitted to a recovery center or his or her legal representative a copy of the records or any portion thereof

at the cost of obtaining records from a provider of health care set forth in NRS 629.061. The copy must be furnished within 48 hours after the receipt of the request, excluding weekends and holidays.

Sec. 15.

- 1. Prescription medications for persons admitted to a recovery center shall only be administered by the person themselves or by a licensed nurse or other appropriately licensed health care professionals.*
- 2. A recovery center shall ensure that patients are not subjected to errors in administration of their medication.*

Sec. 16.

- 1. A recovery center shall establish and maintain a program for the control of infections within the facility.*
- 2. The program must:*
 - (a) Be designed to provide a safe, sanitary and comfortable environment and to prevent the development and transmission of disease and infection.*
 - (b) Include procedures for the investigation, control and prevention of infections in the facility.*
 - (c) Provide for the maintenance of records of infections and the corrective actions taken when infections occurred.*
- 3. A recovery center shall ensure that:*
 - (a) An employee with a communicable disease or an infected skin lesion does not come into direct contact with persons admitted to the facility or their food if such contact may result in the transmission of the disease.*
 - (b) Employees wash their hands after any direct contact with a person admitted to the facility.*
- 4. Linens must be handled, stored, processed and transported in a manner which prevents the spread of infection.*

Sec. 17.

- 1. A recovery center shall adopt written policies for the personnel employed at the facility.*
- 2. The written policies must:*
 - (a) Include the duties and responsibilities of, and the qualifications required for, each position at the facility;*
 - (b) Include the conditions of employment for each position at the facility;*
 - (c) Include the policies and objectives of the facility related to training while on the job and requirements for continuing education; and*
 - (d) Be periodically reviewed and made available to each employee of the facility.*
- 3. A current and accurate personnel record for each employee of the facility must be maintained at the facility. The record must include, without limitation:*
 - (a) Evidence that the employee has obtained any license, certificate or registration, and possesses the experience and qualifications, required for the position held by the employee;*
 - (b) Such health records as are required by chapter 441A of Nevada Administrative Code.*
 - (c) Documentation that the facility has not received any information that the employee has been convicted of a crime listed in paragraph (a) of subsection 1 of NRS 449.174.*

4. A facility shall make its personnel records available to the Bureau for inspection upon request.

Sec. 18.

1. A person may be admitted to a recovery center only upon the written approval of a physician. Upon a person's admission to the facility, the facility shall ensure that orders for the care of the person have been received from the person's attending physician.

2. A recovery center shall ensure that the medical care of each person admitted to the facility is supervised by a physician. Medical care may be ordered by a physician assistant, nurse practitioner or clinical nurse specialist on behalf of the physician if the physician assistant, nurse practitioner or clinical nurse specialist is acting:

(a) Within the authorized scope of his or her practice and under the supervision of the physician; and

(b) In accordance with state law and the policies of the recovery center.

3. Any orders for the treatment of the person admitted to the facility must be signed and dated.

Sec. 19.

A recovery center shall ensure that there is a sufficient number of members of the staff on duty at all times to provide proper care and services to persons admitted to the facility in accordance with his or her plan of care.

Sec. 20.

1. The recovery center shall ensure that:

(a) Each person admitted to the facility receives meals at regular intervals and a therapeutic diet if such a diet is ordered; and

(b) Food that is prepared to conserve the nutritional value and flavor of the food.

(c) Food that is nourishing, palatable, attractive and served at the proper temperature.

(d) A well-balanced diet that meets the daily nutritional and special dietary needs of the patient.

2. The facility shall provide each person admitted in the facility with sufficient fluids to maintain proper hydration.

3. A facility shall:

(a) Procure food from sources that are approved or considered satisfactory by federal, state and local authorities;

(b) Store, prepare and serve food under sanitary conditions; and

(c) Dispose of refuse and garbage properly.

Sec. 21.

1. A recovery center shall provide to a patient in the facility, according to his or her plan of care, specialized rehabilitative services, including, without limitation, physical therapy and occupational therapy. Such services must be provided by the facility or obtained from qualified outside sources.

2. Specialized rehabilitative services may be provided to a patient in a facility only upon the written order of a physician.

Sec. 22.

1. A recovery center shall provide such pharmaceutical services, including, without limitation, acquiring, receiving, dispensing and administering drugs and biologicals, as are required to meet the needs of the patients in the facility. The facility shall provide such drugs and biologicals as are needed or obtain them from qualified outside sources.

2. A recovery center shall employ or otherwise obtain the services of a registered pharmacist. The registered pharmacist shall:

(a) Provide consultations on all matters relating to the pharmaceutical services provided by the facility;

(b) Establish a system of records for the receipt and disposition of all controlled substances in the facility in sufficient detail to ensure an accurate reconciliation; and

(c) Ensure that those records are in order and that an account of all controlled substances in the facility is maintained and periodically reconciled.

3. The regimen of drugs for each patient in the facility must be reviewed at least once each month by a registered pharmacist. The pharmacist shall report any irregularities he or she discovers to the patient's attending physician and the chief administrative nurse of the facility. The physician and chief administrative nurse shall take such actions as they deem necessary in response to the report.

4. Drugs and biologicals used by a facility must be:

(a) Labeled in accordance with state and federal law and accepted professional standards. Each label must include the appropriate accessory and cautionary instructions and the expiration date, if applicable.

(b) Stored in accordance with state and federal law in locked compartments with proper controls for the temperature. Only authorized personnel may have access to the keys to unlock the compartments. Substances listed as schedule II controlled substances pursuant to chapter 453 of NRS and other drugs that have the potential for abuse must be stored separately in a locked compartment that is immovable, unless the facility uses a system to distribute the substances or drugs in single-unit packages, the quantity stored is minimal and a dosage that is missing can be readily detected.

Sec. 23.

1. A recovery center shall provide laboratory services to meet the needs of the patients in the facility or contract with a laboratory to obtain such services.

2. If a recovery center has its own laboratory, it must be a licensed under the provisions of chapter 652 of NRS and comply with the provisions of 42 C.F.R. Part 493.

3. If the facility contracts with a laboratory for its services, that laboratory must be:

(a) A licensed clinical laboratory under the provisions of chapter 652 of NRS; and

(b) Certified in the specialties and subspecialties required by the facility in accordance with the provisions of 42 C.F.R. Part 493.

4. A recovery center shall:

(a) Provide or obtain only such laboratory tests as are ordered by the attending physician of a patient in the facility;

(b) Promptly notify the attending physician of the results of those tests;

(c) Arrange transportation for a patient to obtain laboratory tests ordered by the patient's attending physician, if the patient requires such assistance; and

(d) Include in the medical records of a patient all reports of the results of laboratory tests ordered for the patient. The reports must include:

- (1) The date on which the tests were performed; and*
- (2) The name and address of the laboratory performing the tests.*

Sec. 24.

1. A recovery center shall provide radiological and other diagnostic services to meet the needs of the patients in the facility or contract with qualified outside sources to obtain such services.

2. If a recovery center provides radiological and other diagnostic services, it shall comply with applicable state law related to the provision of such services.

3. A recovery center shall:

(a) Provide or obtain only such radiological and other diagnostic tests as are ordered by the attending physician of a patient in the facility;

(b) Promptly notify the attending physician of the results of those tests;

(c) Arrange transportation for a patient to obtain radiological and other diagnostic tests ordered by the patient's attending physician, if the patient requires such assistance; and

(d) Include in the medical records of a patient all reports of the results of radiological and other diagnostic tests ordered for the patient. The reports must:

- (1) Include the date on which the tests were performed; and*
- (2) Be signed by the person performing the tests.*

Sec. 25.

A recovery center shall:

1. Provide a safe, functional, sanitary and comfortable environment for the patients in the facility, the members of its staff and members of the general public;

2. Care for each patient in the facility in a manner that promotes the dignity of the patient and his or her quality of life;

3. Ensure that the environment of the facility is free of hazards that would cause accidents;

4. Ensure that each patient in the facility receives adequate supervision and devices to prevent accidents;

5. Provide such housekeeping and maintenance services as are necessary to maintain a sanitary, orderly and comfortable environment;

6. Provide adequate and comfortable levels of lighting in all areas of the facility;

7. Maintain an effective program to control pests in order to ensure that the facility is free from pests and rodents;

8. Have adequate outside ventilation by means of windows or mechanical ventilation, or both; and

9. Provide safe and comfortable levels of temperature in the facility. The temperature of the facility must be maintained at a level that is not less than 71 degrees Fahrenheit and not more than 81 degrees Fahrenheit.

Sec. 26.

1. A recovery center must be designed, constructed, equipped and maintained in a manner that protects the health and safety of the patients and personnel of the facility and members of the general public.

2. *Except as otherwise provided in this section:*
 - (a) *A recovery center shall comply with the provisions of NFPA 101: Life Safety Code, adopted by reference pursuant to NAC 449.0105.*
 - (b) *Any new construction, remodeling or change in use of a recovery center must comply with the Guidelines for Design and Construction of Hospital and Health Care Facilities, adopted by reference pursuant to NAC 449.0105, unless the remodeling is limited to refurbishing an area within the facility, including, without limitation, painting the area, replacing the flooring, repairing windows, or replacing window and wall coverings.*
3. *Except as otherwise provided in subsection 5, a recovery center shall comply with 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, related to the construction and maintenance of the facility. If there is a difference between state and local requirements, the more stringent requirements apply.*
5. *A recovery center shall submit building plans for new construction or remodeling to the entity designated to review such plans by the Division of Public and Behavioral Health pursuant to NAC 449.0115. The entity's review of those plans is advisory only and does not constitute approval for the licensing of the facility. Before the construction or remodeling may begin, the plans for the construction or remodeling must be approved by the Division of Public and Behavioral Health. The Bureau shall not approve a facility for licensure until all construction is completed and a survey is conducted at the site of the facility.*

Sec. 27.

1. *A patient's room within a recovery center must be designed and equipped in a manner that allows adequate nursing care to be provided and provides comfort and privacy for the patient.*
2. *A recovery center shall provide to each patient in the facility:*
 - (a) *A separate bed of proper size and height for the convenience of the patient;*
 - (b) *A clean, comfortable mattress;*
 - (c) *Bedding that is appropriate for the weather and climate;*
 - (d) *Clean linens for his or her bed and bath that are in good condition; and*
 - (e) *Furniture that is appropriate for the patient's needs.*

Sec. 28 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 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 person 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 person 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
(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	4,173	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
(o) A psychiatric residential treatment facility	9,530	62
(p) A recovery center	946	72

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 person 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 person 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
(o) A psychiatric residential treatment facility	4,765	31
(p) A recovery center	473	46

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.