

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

LCB File No. R053-99

July 26, 1999

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

AUTHORITY: §§2 and 3, NRS 439.150, 449.037 and 449.050; §§1, 4-10, NRS 449.037; §11,
NRS 449.165.

Section 1. NAC 449.01225 is hereby amended to read as follows:

449.01225 ~~["Freestanding facility"]~~ *“Facility* for hospice care” has the meaning ascribed to it
in NAC 449.0172.

Sec. 2. 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 medical facilities or facilities for the dependent must pay to the
health division a nonrefundable fee of \$50 for each bed in the facility and the following
nonrefundable fees:

- (a) A skilled nursing facility\$1,200
- (b) A hospital1,200
- (c) An intermediate care facility for the mentally retarded or persons with
developmental disabilities.....750
- (d) An intermediate care facility, other than an intermediate care facility for
the mentally retarded or persons with developmental disabilities1,200

- (e) A residential facility for groups500
- (f) A facility for the treatment of abuse of alcohol or drugs500
- (g) A ~~freestanding~~ facility for hospice care1,200

2. An applicant for the renewal of such a license must pay to the health division a nonrefundable fee of \$35 for each bed in the facility and the following nonrefundable fees:

- (a) A skilled nursing facility\$1,100
- (b) A hospital1,100
- (c) A rural hospital600
- (d) An intermediate care facility for the mentally retarded or persons with developmental disabilities.....600
- (e) An intermediate care facility, other than an intermediate care facility for the mentally retarded or persons with developmental disabilities600
- (f) A residential facility for groups300
- (g) A facility for the treatment of abuse of alcohol or drugs300
- (h) A ~~freestanding~~ facility for hospice care600

3. 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 submits his application, he must submit a new application and pay the required fee to be considered for licensure.

Sec. 3. NAC 449.0168 is hereby amended to read as follows:

449.0168 1. Except as otherwise provided in subsection 2, a holder of a license to operate a medical facility, facility for the dependent or program of hospice care who wishes or is

required pursuant to NAC **449.190**, 449.307, 449.7473 or 449.758 to modify his license to reflect:

- (a) A change in the name of the facility or program;
- (b) A change of the administrator of the facility or program; ~~(c)~~
- (c) A change in the number of beds in the facility ~~(d)~~;
- (d) A change in the type of facility licensed or the addition of another type of facility to be licensed; or*
- (e) A change in the category of residents who may reside at the facility,*

FLUSH must submit an application for a new license to the health division and pay to the health division a fee of \$160.

2. An applicant who applies for a license pursuant to paragraph (c) of subsection 1 because of an increase in the number of beds in the facility must pay to the health division:

- (a) A fee of \$160; and
- (b) A fee of \$50 for each additional bed in the facility.

3. If the address of the home office of a home health agency has not changed, a holder of a license to operate a subunit agency or branch office of the home health agency who wishes or is required pursuant to NAC 449.758 to modify his license to reflect a change in the address of the subunit agency or branch office of the home health agency must:

- (a) Submit an application for a new license to the health division; and
- (b) Pay to the health division a fee of \$160.

4. A fee paid pursuant to this section is nonrefundable.

5. As used in this section, “administrator” means the person who is responsible for the daily management of a medical facility, facility for the dependent or program of hospice care.

Sec. 4. NAC 449.0172 is hereby amended to read as follows:

449.0172 ~~["Freestanding facility"]~~ **"Facility** for hospice care" has the meaning ascribed to it in ~~[NRS 449.006.]~~ *section 3 of chapter 93, Statutes of Nevada 1999.*

Sec. 5. NAC 449.0173 is hereby amended to read as follows:

449.0173 "Governing body" means the person or group of persons responsible for carrying out and monitoring the administration of a program of hospice care or for the operation of a ~~[freestanding]~~ facility for hospice care.

Sec. 6. NAC 449.0181 is hereby amended to read as follows:

449.0181 The health division shall not issue a license to operate a ~~[freestanding]~~ facility for hospice care unless the program of hospice care which it provides complies with the requirements of NAC 449.017 to 449.0188, inclusive.

Sec. 7. NAC 449.0187 is hereby amended to read as follows:

449.0187 A ~~[freestanding]~~ facility for hospice care must comply with the following requirements:

1. A program of hospice care must be provided for each inpatient pursuant to a written plan of care established pursuant to NAC 449.0186.
2. Nursing services must be provided 24 hours per day in accordance with the plan of care for each patient.
3. Medication must be dispensed to each patient according to the instructions of the patient's physician or the medical director.
4. Treatment must be administered to a patient pursuant to the instructions of the physician of the patient or the plan of care for the patient.
5. Each patient must be maintained in a clean and well-groomed manner.

6. Each patient must be protected from accidents, injuries and infections.
7. At least one registered nurse must be on duty for each work shift, providing direct care to patients.
8. A written plan of the procedures to be followed during a local disaster, a widespread disaster or a disaster which occurs within the ~~freestanding~~ facility for hospice care must be adopted. The plan must:
 - (a) Provide procedures designed to protect each patient and to care for any casualty which may arise from such a disaster;
 - (b) Be reviewed and the procedures set forth therein rehearsed by all members of the staff at least once in each quarter of the year; and
 - (c) Be approved by the health division.
9. A private room with an adjoining bath must be provided for each patient.
10. An anteroom, a room adjoining the room of each patient or a private area must be provided and furnished with a bed and chairs for use by the members of the patient's family.

Sec. 8. NAC 449.0188 is hereby amended to read as follows:

449.0188 A person licensed to administer a program of hospice care or to operate a ~~freestanding~~ facility for hospice care shall maintain the continuity of service provided to each patient pursuant to NAC 449.017 to 449.0188, inclusive, during the term of his license.

Sec. 9. NAC 449.677 is hereby amended to read as follows:

449.677 1. A facility ~~must~~ *shall* maintain methods of administrative management which assure that:

- (a) There are on duty, all hours of each day, members of the staff sufficient in number and qualifications to carry out the policies, responsibilities and programs of the facility; *and*

(b) The numbers and categories of personnel are adequate for the number of residents and their particular needs.

2. There must be an orientation program for all new employees that includes the review of all policies of the facility. An educational program must be planned and conducted for the development and improvement of skills of all of the facility's personnel. Records must be maintained which indicate the content of and participation in all orientation and developmental programs.

3. The administrator or ~~any~~ a person on the professional staff of the facility must be designated as resident services director and assigned the responsibility for the coordination and monitoring of the overall plan of care for the residents.

4. The facility ~~must~~ shall maintain effective arrangements for required institutional services. There must be written agreements with outside resources in those instances where the facility does not employ a qualified professional person to render a required institutional service. The responsibilities, functions, objectives and terms of the agreement with each outside resource must be delineated in writing and signed by the administrator or authorized representative and the outside resource. These services may include physical, occupational or speech therapy and social, dental or dietetic services.

5. A designated member of the staff who is suited by training or experience must be responsible for arranging social services and for the integration of social services with other elements of the overall plan of care.

6. A member of the staff who is qualified by experience or training in directing group activities must be responsible for the program of activities.

7. A designated member of the staff who is suited by training or experience in food management or nutrition must be responsible for planning and supervising menus and meals.

8. The facility ~~[must]~~ *shall* furnish the health division with such information from payroll records as may be requested regarding staffing patterns.

Sec. 10. NAC 449.884 is hereby amended to read as follows:

449.884 1. A surgical suite must be located to prevent through traffic.

2. The number of operating rooms must be determined by the expected surgical workload.

3. Each operating room must have ~~[a]~~ :

(a) A clear area of at least 360 square feet (33.44 square meters) exclusive of fixed and movable equipment ~~[. The]~~ ;

(b) A minimum dimension ~~[must be]~~ *of* 18 feet (5.49 meters) ~~[. Each operating room must have an]~~ ;

(c) An emergency communication system ~~[connecting]~~ *that is connected* to the control station of the surgical suite ~~[. Each room must have an]~~ ;

(d) An X-ray illuminator ~~[for]~~ *that is capable of illuminating* at least two X-ray films ~~[. Storage]~~ ; *and*

(e) *If appropriate, storage* space for splints and traction equipment ~~[must be provided in the appropriate rooms.] unless such space is provided elsewhere within the surgical suite.~~

4. If a cystoscopic room is provided, it must have ~~[a]~~ :

(a) A minimum of 250 square feet (23.23 square meters) exclusive of fixed and movable equipment ~~[. Each cystoscopic room must have an]~~ ;

(b) An X-ray illuminator ~~[for]~~ *that is capable of illuminating* at least two X-ray films ~~[. A]~~ ;

(c) A scrub sink ; and ~~[facilities]~~

(d) *Facilities* for the disposal of liquid waste . ~~[must be provided.]~~

5. A recovery room must be provided if there is at least an average of 10 daily surgical procedures. The recovery room must contain a station for distributing drugs, facilities for washing hands, a clinical sink with a device for flushing bedpans, and storage space for supplies and equipment. Each recovery station must contain a nurses' call system, medical suction, oxygen, emergency power outlets and a high intensity light.

6. Service areas must include the following:

(a) A control station located to permit visual surveillance of all persons who enter the surgical suite.

(b) A high speed autoclave conveniently located to serve all operating rooms. If adequate provisions have been made to replace sterile instruments during surgery, sterilizing facilities in the surgical suite are not required.

(c) A station for distributing drugs with double-locked storage for controlled substances.

(d) Two scrub stations which are to be located near the entrance to the operating rooms. The stations may serve no more than four operating rooms. Viewing panels must be installed to permit the observation of the operating room from the scrub area.

(e) A soiled workroom with a clinical sink, work counter, receptacles for waste and soiled linen and facilities for washing hands with blade-type faucets.

(f) A clean workroom with facilities for washing hands with blade-type faucets, a work counter and space for clean and sterile supplies.

(g) An anesthesia workroom with a work counter and sink.

(h) Space for storing medical gas if the gases are not piped into the surgical suite.

(i) Adequate storage for equipment and supplies.

(j) Appropriate areas for changing clothing for males and females. These areas must be designed with a pattern of traffic going one way so that ~~{people}~~ *a person* going into surgery ~~{are}~~ *is* not contaminated by ~~{those}~~ *a person* returning from surgery. These areas must contain lockers, showers, toilets, lavatories equipped for washing hands and space for donning scrub suits and boots.

(k) If there are two or more operating rooms, an alcove for patients awaiting surgery. This area must be in view from the control station of the surgical suite.

(l) A separate lounge and toilet facilities.

~~{(h)}~~ 7. Surgical suites for special purposes must be designed to accommodate special equipment and provide adequate space for its efficient functioning.

Sec. 11. NAC 449.99829 is hereby amended to read as follows:

449.99829 “Medicaid facility” means a facility that has entered into an agreement to provide care, services or treatment paid under the joint federal-state Medicaid program described in 42 U.S.C. §§ 1396 et seq. ~~{and NRS 422.234.}~~