

**TITLE 9. HEALTH SERVICES**  
**CHAPTER 10. DEPARTMENT OF HEALTH SERVICES –**  
**HEALTH CARE INSTITUTIONS: LICENSING**

**ARTICLE 1. GENERAL**

**R9-10-101. Definitions**

In addition to the definitions in A.R.S. § 36-401(A), the following definitions apply in this Chapter unless otherwise specified:

23. "Behavioral health facility" means a behavioral health inpatient facility, a behavioral health residential facility, a substance abuse transitional facility, a behavioral health specialized transitional facility, an outpatient treatment center that provides only behavioral health services, an adult behavioral health therapeutic home, ~~or~~ a behavioral health respite home, or a counseling facility.
27. "Behavioral health paraprofessional" means an individual who is not a behavioral health professional who provides, ~~behavioral health services at or for a health care institution, according to the health care institution's policies and procedures and, if the individual would be required to be licensed as a behavioral professional under A.R.S. Title 32, Chapter 33, if the behavioral health services were provided in a setting other than a licensed health care institution, are provided~~ under supervision by a behavioral health professional, the following services to a patient to address the patient's behavioral health issue:
  - a. Services that, if provided in a setting other than a health care institution would be required to be provided by an individual licensed under A.R.S. Title 32, Chapter 33; or
  - b. Health-related services.
31. ~~"Behavioral health services" means medical services, nursing services, health related services, or ancillary services provided to an individual to address the individual's behavioral health issue.~~
32. "Behavioral health staff" means a:
  - a. Behavioral health paraprofessional,
  - b. Behavioral health technician, or
  - c. Personnel member in a nursing care institution or assisted living facility who provides behavioral care.

33. "Behavioral health technician" means an individual who is not a behavioral health professional who provides, ~~behavioral health services~~ at or for a health care institution, ~~according to the health care institution's policies and procedures~~ with clinical oversight by a behavioral health professional, the following services to a patient to address the patient's behavioral health issue:
- a. Services that, if provided in a setting other than a health care institution would be required to be provided by an individual licensed under A.R.S, Title 32, Chapter 33; or
  - b. Health-related services.
52. "Counseling facility" means a ~~facility~~ health care institution that only provides counseling, which may include, ~~and was licensed as a behavioral health outpatient clinic before October 1, 2013 to provide, one or more of the following services:~~
- ~~a.~~ Counseling;
  - ~~b.a.~~ DUI screening, education, or treatment according to the requirements in 9 A.A.C. 20, Article 1; or
  - ~~e.b.~~ Misdemeanor domestic violence offender treatment according to the requirements in 9 A.A.C. 20, Article 2.

**R9-10-109. Changes Affecting a License**

- A. A licensee shall ensure that the Department is notified in writing at least 30 calendar days before the effective date of:
  - 1. A change in the name of:
    - a. A health care institution, or
    - b. The licensee; or
  - 2. A change in the address of a health care institution that does not provide medical services, nursing services, or health-related services on the premises.
- B. If a licensee intends to terminate the operation of a health care institution either during or at the expiration of the health care institution's license, the licensee shall ensure that the Department is notified in writing of:
  - 1. The termination of the health care institution's operations, as required in A.R.S. § 36-422(D), at least 30 calendar days before the termination, and
  - 2. The address and contact information for the location where the health care institution's medical records will be retained as required in A.R.S. § 12-2297.
- C. If a licensee is an adult behavioral health therapeutic home or a behavioral health respite home, the licensee shall ensure that:

1. The Department is notified in writing if the licensee does not have a written agreement with a collaborating health care institution, as required in R9-10-1603(A)(4) or R9-10-1803(A)(5) as applicable; and
2. The adult behavioral health therapeutic home or behavioral health respite home does not accept an individual as a resident or recipient, as applicable, or provide services to a resident or recipient, as applicable, until:
  - a. The adult behavioral health therapeutic home or behavioral health respite home has a written agreement with a collaborating health care institution;
  - b. The collaborating health care institution has approved the adult behavioral health therapeutic home's or behavioral health respite home's:
    - i. Scope of services, and
    - ii. Policies and procedures; and
  - c. The collaborating health care institution has verified the provider's skills and knowledge.

D. If a licensee is an affiliated outpatient treatment center, the licensee shall ensure that if the affiliated outpatient treatment center:

1. Plans to begin providing administrative support to a counseling facility at a time other than during the affiliated outpatient treatment center's initial or renewal license application process, the following information for each counseling facility is submitted to the Department before the affiliated outpatient treatment center begins providing administrative support:
  - a. The counseling facility's name,
  - b. The license number assigned to the counseling facility by the Department; and
  - c. The date the affiliated outpatient treatment center will begin providing administrative support to the counseling facility; or
2. No longer provides administrative support to a counseling facility previously identified by the affiliated outpatient treatment center as receiving administrative support from the affiliated outpatient treatment center, at a time other than during the initial or renewal license application process, the following information for each counseling facility is submitted to the Department within 30 calendar days after the affiliated outpatient treatment center no longer provides administrative support:
  - a. The counseling facility's name,
  - b. The license number assigned to the counseling facility by the Department; and

c. The date the affiliated outpatient treatment center stopped providing administrative support to the counseling facility.

E. If a licensee is a counseling facility, the licensee shall ensure that if the counseling facility:

1. Plans to begin receiving administrative support from an affiliated outpatient treatment center at a time other than during the counseling facility's initial or renewal license application process, the following information for the affiliated outpatient treatment center is submitted to the Department before the counseling facility begins receiving administrative support:

a. The affiliated outpatient treatment center's name,

b. The license number assigned to the affiliated outpatient treatment center by the Department; and

c. The date the counseling facility will begin receiving administrative support; or

2. No longer receives administrative support from an affiliated outpatient treatment center previously identified by the counseling facility as providing administrative support to the counseling facility, at a time other than during the counseling facility's initial or renewal license application process, the following information for the affiliated outpatient treatment center is submitted to the Department within 30 calendar days after the counseling facility no longer receives administrative support from the affiliated outpatient treatment center:

a. The affiliated outpatient treatment center's name,

b. The license number assigned to the affiliated outpatient treatment center by the Department; and

c. The date the counseling facility stopped receiving administrative support from the affiliated outpatient treatment center.

3. Plans to begin sharing administrative support with an affiliated counseling facility at a time other than during the counseling facility's initial or renewal license application process, the following information for each affiliated counseling facility sharing administrative support with the counseling facility is submitted to the Department before the counseling facility and affiliated counseling facility begin sharing administrative support:

a. The affiliated counseling facility's name,

b. The license number assigned to the affiliated counseling facility by the Department; and

c. The date the counseling facility and the affiliated counseling facility will begin sharing administrative support; or

2. No longer shares administrative support with an affiliated counseling facility previously identified by the counseling facility as sharing administrative support with the counseling facility at a time other than during the counseling facility's initial or renewal license application process, the following information is submitted for each affiliated counseling facility within 30 calendar days after the counseling facility and affiliated counseling facility no longer share administrative support:

a. The affiliated counseling facility's name.

b. The license number assigned to the affiliated counseling facility by the Department; and

c. The date the counseling facility and affiliated counseling facility will no longer be sharing administrative support.

~~D.G.~~ A governing authority shall submit an initial license application required in R9-10-105 for:

1. A change in ownership of a health care institution;
2. A change in the address or location of a health care institution that provides medical services, nursing services, health-related services, or behavioral health services on the premises; or
3. A change in a health care institution's class or subclass.

~~E.H.~~ A governing authority is not required to submit documentation of a health care institution's architectural plans and specifications required in R9-10-105(A)(5) for an initial license application if:

1. The health care institution has not ceased operations for more than 30 calendar days,
2. A modification has not been made to the health care institution,
3. The services the health care institution is authorized by the Department to provide are not changed, and
4. The location of the health care institution's premises is not changed.

~~F.I.~~ The Department shall approve or deny a request for a change in services or another modification described in this Section according to R9-10-108.

~~G.J.~~ A licensee shall not implement a change in services or another modification described in this Section until an approval or amended license is issued by the Department.

**~~R9-10-117. Counseling Facilities~~**

~~An administrator of a counseling facility shall ensure that the counseling facility complies with the requirements in this Article and Article 10 of this Chapter.~~

## ARTICLE 10. OUTPATIENT TREATMENT CENTERS

### R9-10-1002. Supplemental Application Requirements

B. In addition to the license application requirements in A.R.S. § 36-422 and 9 A.A.C. 10, Article 1, a governing authority of an affiliated outpatient treatment center, as defined in R9-10-1901, applying for an initial or renewal license for the affiliated outpatient treatment center shall submit, in a format provided by the Department, the following information for each counseling facility for which the affiliated outpatient treatment center is providing administrative support:

1. Name,
2. Either:
  - a. The license number assigned to the counseling facility by the Department; or
  - b. If the counseling facility is not currently licensed, the:
    - i. Counseling facility's street address, and
    - ii. Date the counseling facility submitted to the Department an initial application for a health care institution license.

### R9-10-1003. Administration

G. If an outpatient treatment center is an affiliated outpatient treatment center as defined in R9-10-1901, an administrator shall ensure that the outpatient treatment center complies with the requirements for an affiliated outpatient treatment center in 9 A.A.C. 10, Article 19.

## ARTICLE 19. COUNSELING FACILITIES

### Section

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## ARTICLE 19. COUNSELING FACILITIES

### **R9-10-1901. Definitions**

In addition to the definitions in A.R.S. § 36-401 and R9-10-101, the following definitions apply in this Article:

1. "Affiliated counseling facility" means a counseling facility that shares administrative support with one or more other counseling facilities that operate under the same governing authority.
2. "Affiliated outpatient treatment center" means an outpatient treatment center authorized by the Department to provide behavioral health services that provides administrative support to a counseling facility or counseling facilities that operate under the same governing authority as the outpatient treatment center.

### **R9-10-1902. Supplemental Application Requirements**

In addition to the license application requirements in A.R.S. § 36-422 and 9 A.A.C. 10, Article 1, a governing authority applying for an initial license as a counseling facility shall submit, in a format provided by the Department:

1. The days and hours of clinical operation and, if different from the days and hours of clinical operation, the days and hours of administrative operation;
2. If applicable, a request to provide one of more of the following:
  - a. DUI screening,
  - b. DUI education,
  - c. DUI treatment, or
  - d. Misdemeanor domestic violence offender treatment;
3. Whether the counseling facility has an affiliated outpatient treatment center;
4. If the counseling facility has an affiliated outpatient treatment center:
  - a. The affiliated outpatient treatment center's name; and
  - b. Either:
    - i. The license number assigned to the affiliated outpatient treatment center by the Department; or
    - ii. If the affiliated outpatient treatment center is not currently licensed, the:
      - (1) Street address of the affiliated outpatient treatment center, and
      - (2) Date the affiliated outpatient treatment center submitted to the Department an initial application for a health care institution license;



5. Whether the counseling facility is sharing administrative support with an affiliated counseling facility; and
6. If the counseling facility is sharing administrative support with an affiliated counseling facility, for each affiliated counseling facility sharing administrative support with the counseling facility:
  - a. Name; and
  - b. Either:
    - i. The license number assigned to the affiliated counseling facility by the Department; or
    - ii. If the affiliated counseling facility is not currently licensed, the:
      - (1) Street address of the affiliated counseling facility, and
      - (2) Date the affiliated counseling facility submitted an initial application for a health care institution license.

**R9-10-1903. Administration**

- A. A governing authority shall:
  1. Consist of one or more individuals accountable for the organization, operation, and administration of a counseling facility;
  2. Establish, in writing:
    - a. A counseling facility's scope of services, and
    - b. Qualifications for an administrator;
  3. Designate, in writing, an administrator who has the qualifications established in subsection (A)(2)(b);
  4. Adopt a quality management program according to R9-10-1904;
  5. Review and evaluate the effectiveness of the quality management program in R9-10-1904 at least once every 12 months;
  6. Designate, in writing, an acting administrator who has the qualifications established in subsection (A)(2)(b) if the administrator is:
    - a. Expected not to be present on the premises for more than 30 calendar days, or
    - b. Not present on the premises for more than 30 calendar days; and
  7. Except as provided in subsection (A)(6), notify the Department according to A.R.S. § 36-425(I) when there is a change in an administrator and identify the name and qualifications of the new administrator.
- B. An administrator:
  1. Is directly accountable to the governing authority for the daily operation of the

counseling facility and all services provided by or at the counseling facility;

2. Has the authority and responsibility to manage the counseling facility; and
3. Except as provided in subsection (A)(6), designates in writing, an individual who is present on the counseling facility's premises and accountable for the counseling facility when the administrator is not available.

C. An administrator or the administrator of the counseling facility's affiliated outpatient treatment center shall establish policies and procedures to protect the health and safety of a patient that:

1. Cover job descriptions, duties, and qualifications, including required skills, knowledge, education, and experience, for personnel members, employees, volunteers, and students;
2. Cover orientation and in-service education for personnel members, employees, volunteers, and students;
3. Include how a personnel member may submit a complaint relating to services provided to a patient;
4. Cover the requirements in Title 36, Chapter 4, Article 11;
5. Cover patient screening, admission, assessment, discharge planning, and discharge;
6. Cover medical records;
7. Cover the provision of counseling and any services listed in the counseling facility's scope of services;
8. Include when general consent and informed consent are required;
9. Cover telemedicine, if applicable;
10. Cover specific steps for:
  - a. A patient or a patient's representative to file a complaint, and
  - b. A counseling facility to respond to a complaint; and
11. Cover how personnel members will respond to a patient's sudden, intense, or out-of-control behavior to prevent harm to the patient or another individual.

D. An administrator shall ensure that:

1. Policies and procedures established according to subsection (C) are documented and implemented;
2. Counseling facility policies and procedures are:
  - a. Reviewed at least once every three years and updated as needed, and
  - b. Available to personnel members and employees;
3. Unless otherwise stated:
  - a. Documentation required by this Article is maintained and provided to the Department within two hours after a Department request; and



3. Document:
  - a. The suspected abuse, neglect, or exploitation;
  - b. Any action taken according to subsection (F)(1); and
  - c. The report in subsection (F)(2);
4. Maintain the documentation in subsection (F)(3) for at least 12 months after the date of the report in subsection (F)(2);
5. Initiate an investigation of the suspected abuse, neglect, or exploitation and document the following information within five working days after the report required in subsection (F)(2):
  - a. The dates, times, and description of the suspected abuse, neglect, or exploitation;
  - b. A description of any injury to the patient related to the suspected abuse or neglect and any change to the patient's physical, cognitive, functional, or emotional condition;
  - c. The names of witnesses to the suspected abuse, neglect, or exploitation; and
  - d. The actions taken by the administrator to prevent the suspected abuse, neglect, or exploitation from occurring in the future; and
6. Maintain a copy of the documented information required in subsection (F)(5) and any other information obtained during the investigation for at least 12 months after the date the investigation was initiated.

**R9-10-1904. Quality Management**

An administrator shall ensure that:

1. A plan is established, documented, and implemented for an ongoing quality management program that, at a minimum, includes:
  - a. A method to identify, document, and evaluate incidents;
  - b. A method to collect data to evaluate services provided to patients;
  - c. A method to evaluate the data collected to identify a concern about the delivery of services related to patient care;
  - d. A method to make changes or take action as a result of the identification of a concern about the delivery of services related to patient care; and
  - e. The frequency of submitting a documented report required in subsection (2) to the governing authority;
2. A documented report is submitted to the governing authority that includes:
  - a. An identification of each concern about the delivery of services related to patient care, and



- a. Provide the counseling in the counseling facility's scope of services.
  - b. Meet the needs of a patient, and
  - c. Ensure the health and safety of a patient;
4. At least one personnel member with cardiopulmonary resuscitation training is present on a counseling facility's premises during hours of clinical operation;
5. At least one personnel member with first aid training is present on a counseling facility's premises during hours of clinical operation;
6. A personnel member only provides counseling the personnel member is qualified to provide;
7. A plan is developed, documented, and implemented to provide orientation specific to the duties of personnel members, employees, volunteers, and students;
8. A personnel member completes orientation before providing counseling to a patient;
9. An individual's orientation is documented, to include:
  - a. The individual's name,
  - b. The date of the orientation, and
  - c. The subject or topics covered in the orientation;
10. A plan is developed, documented, and implemented to provide in-service education specific to the duties of a personnel member;
11. A personnel member's in-service education is documented, to include:
  - a. The personnel member's name,
  - b. The date of the in-service education, and
  - c. The subject or topics covered in the in-service education;
12. A personnel member who is a behavioral health technician or behavioral health paraprofessional complies with the applicable requirements in R9-10-115;
13. A record for a personnel member, an employee, a volunteer, or a student is maintained that includes:
  - a. The individual's name, date of birth, and contact telephone number;
  - b. The individual's starting date of employment or volunteer service and, if applicable, the ending date; and
  - c. Documentation of:
    - i. The individual's qualifications, including skills and knowledge applicable to the individual's job duties;
    - ii. The individual's education and experience applicable to the individual's job duties;

- iii. The individual's completed orientation and in-service education as required by policies and procedures;
- iv. The individual's license or certification, if the individual is required to be licensed or certified in this Article or policies and procedures;
- v. If the individual is a behavioral health technician, clinical oversight required in R9-10-115;
- vi. The individual's compliance with the fingerprinting requirements in A.R.S. § 36-425.03, if applicable;
- vii. If applicable, cardiopulmonary resuscitation training; and
- viii. If applicable, first aid training; and

14. The record in subsection (13) is:

- a. Maintained while an individual provides services for or at the counseling facility and for at least 24 months after the last date the individual provided services for or at the counseling facility; and
- b. If the ending date of employment or volunteer service was 12 or more months before the date of the Department's request, provided to the Department within 72 hours after the Department's request.

**R9-10-1907. Patient Rights**

A. An administrator shall ensure that at the time of admission, a patient or the patient's representative receives a written copy of the requirements in subsection (B) and the patient rights in subsection (C).

B. An administrator shall ensure that:

- 1. A patient is treated with dignity, respect, and consideration;
- 2. A patient as not subjected to:
  - a. Abuse;
  - b. Neglect;
  - c. Exploitation;
  - d. Coercion;
  - e. Manipulation;
  - f. Sexual abuse;
  - g. Sexual assault;
  - h. Restraint or seclusion;
  - i. Retaliation for submitting a complaint to the Department or another entity; or
  - j. Misappropriation of personal and private property by a counseling facility's

personnel member, employee, volunteer, or student; and

3. A patient or the patient's representative:
  - a. Either consents to or refuses counseling;
  - b. May refuse or withdraw consent for receiving counseling before counseling is initiated;
  - c. Is informed of the following:
    - i. The counseling facility's policy on health care directives, and
    - ii. The patient complaint process;
  - d. Consents to photographs of the patient before the patient is photographed, except that a patient may be photographed when admitted to a counseling facility for identification and administrative purposes; and
  - e. Except as otherwise permitted by law, provides written consent to the release of information in the patient's:
    - i. Medical record, or
    - ii. Financial records.

C. A patient has the following rights:

1. Not to be discriminated against based on race, national origin, religion, gender, sexual orientation, age, disability, marital status, or diagnosis;
2. To receive counseling that supports and respects the patient's individuality, choices, strengths, and abilities;
3. To receive privacy during counseling;
4. To review, upon written request, the patient's own medical record according to A.R.S. §§ 12-2293, 12-2294, and 12-2294.01;
5. To receive a referral to another health care institution if the counseling facility is not authorized or not able to provide the behavioral health services needed by the patient;
6. To participate or have the patient's representative participate in the development of, or decisions concerning, the counseling provided to the patient;
7. To participate or refuse to participate in research or experimental treatment; and
8. To receive assistance from a family member, the patient's representative, or other individual in understanding, protecting, or exercising the patient's rights.

**R9-10-1908. Medical Records**

A. An administrator shall ensure that:

1. A medical record is established and maintained for each patient according to A.R.S. Title 12, Chapter 13, Article 7.1;



2. An entry in a patient's medical record is:
    - a. Recorded only by a personnel member authorized by policies and procedures to make the entry;
    - b. Dated, legible, and authenticated; and
    - c. Not changed to make the initial entry illegible;
  3. An order is:
    - a. Dated when the order is entered in the patient's medical record and includes the time of the order;
    - b. Authenticated by a medical practitioner or behavioral health professional according to policies and procedures; and
    - c. If the order is a verbal order, authenticated by the medical practitioner or behavioral health professional issuing the order;
  4. If a rubber-stamp signature or an electronic signature is used to authenticate an order, the individual whose signature the rubber-stamp signature or electronic signature represents is accountable for the use of the rubber-stamp signature or electronic signature;
  5. A patient's medical record is available to an individual:
    - a. Authorized according to policies and procedures to access the patient's medical record;
    - b. If the individual is not authorized according to policies and procedures, with the written consent of the patient or the patient's representative; or
    - c. As permitted by law; and
  6. A patient's medical record is protected from loss, damage, or unauthorized use.
- B. If a counseling facility maintains patients' medical records electronically, an administrator shall ensure that:
1. Safeguards exist to prevent unauthorized access, and
  2. The date and time of an entry in a medical record is recorded by the computer's internal clock.
- C. An administrator shall ensure that a patient's medical record contains:
1. Patient information that includes:
    - a. The patient's name and address, and
    - b. The patient's date of birth;
  2. A diagnosis or reason for counseling;
  3. Documentation of general consent and, if applicable, informed consent for counseling by the patient or the patient's representative;

4. If applicable, the name and contact information of the patient's representative and:
  - a. If the patient is 18 years of age or older or an emancipated minor, the document signed by the patient consenting for the patient's representative to act on the patient's behalf; or
  - b. If the patient's representative:
    - i. Has a health care power of attorney established under A.R.S. § 36-3221 or a mental health care power of attorney executed under A.R.S. § 36-3282, a copy of the health care power of attorney or mental health care power of attorney; or
    - ii. Is a legal guardian, a copy of the court order establishing guardianship;
5. Documentation of medical history;
6. Orders;
7. Assessment;
8. Interval notes;
9. Progress notes;
10. Documentation of counseling provided to the patient;
11. The name of each individual providing counseling;
12. Disposition of the patient upon discharge;
13. Documentation of the patient's follow-up instructions provided to the patient;
14. A discharge summary; and
15. If applicable, documentation of any actions taken to control the patient's sudden, intense, or out-of-control behavior to prevent harm to the patient or another individual.

**R9-10-1909. Counseling**

- A. An administrator of a counseling facility shall ensure that:
  1. Counseling provided at the counseling facility is provided under the direction of a behavioral health professional;
  2. A personnel member who provides counseling is:
    - a. At least 21 years of age, or
    - b. At least 18 years of age and is licensed or certified under A.R.S. Title 32 and providing services within the personnel member's scope of practice; and
  3. If a counseling facility provides counseling to a patient who is less than 18 years of age, an employee or a volunteer and the owner comply with the fingerprint clearance card requirements in A.R.S. § 36-425.03.
- B. An administrator of a counseling facility shall ensure that:

1. Before counseling for a patient is initiated, there is a behavioral health assessment for the patient that complies with the requirements in this Section that is:
  - a. Available:
    - i. In the patient's medical record maintained by the counseling facility;
    - ii. If the counseling facility is an affiliated counseling facility, in the patient's integrated medical record; or
    - iii. If the counseling facility has an affiliated outpatient treatment center, in the patient's integrated medical record maintained by the counseling facility's affiliated outpatient treatment center;
  - b. Completed by a personnel member at the counseling facility;
  - c. Obtained from a behavioral health provider other than the counseling facility; or
2. A behavioral health assessment, obtained from a behavioral health provider other than the counseling facility or available in a medical record or integrated medical record, was completed within 12 months before the date of the patient's current admission;
3. If a behavioral health assessment is obtained from a behavioral health provider other than the counseling facility or is available as stated in subsection (B)(1)(a), the information in the behavioral health assessment is reviewed and updated if additional information that affects the patient's behavioral health assessment is identified;
4. The review and update of the patient's assessment information in subsection (B)(3) is documented in the patient's medical record within 48 hours after the review is completed;
5. If a behavioral health assessment is conducted by a:
  - a. Behavioral health technician or a registered nurse, within 72 hours after the behavioral health assessment is conducted, a behavioral health professional certified or licensed to provide the counseling needed by the patient reviews and signs the behavioral health assessment to ensure that the behavioral health assessment identifies the counseling needed by the patient; or
  - b. Behavioral health paraprofessional, a behavioral health professional certified or licensed to provide the counseling needed by the patient supervises the behavioral health paraprofessional during the completion of the behavioral health assessment and signs the behavioral health assessment to ensure that the assessment identifies the counseling needed by the patient;
6. A behavioral health assessment:
  - a. Documents a patient's:
    - i. Presenting issue;

- ii. Substance use history;
  - iii. Co-occurring disorder;
  - iv. Medical condition and history;
  - v. Legal history, including:
    - (1) Custody,
    - (2) Guardianship, and
    - (3) Pending litigation;
  - vi. Criminal justice record;
  - vii. Family history;
  - viii. Behavioral health treatment history; and
  - ix. Symptoms reported by the patient or the patient's representative and referrals needed by the patient, if any;
- b. Includes:
- i. Recommendations for further assessment or examination of the patient's needs;
  - ii. A description of the counseling, including type, frequency, and number of hours, that will be provided to the patient; and
  - iii. The signature and date signed of the personnel member conducting the behavioral health assessment; and
- c. Is documented in patient's medical record;
7. A patient is referred to a medical practitioner if a determination is made that the patient requires immediate physical health services or the patient's behavioral health issue may be related to the patient's medical condition;
  8. A request for participation in a patient's behavioral health assessment is made to the patient or the patient's representative;
  9. An opportunity for participation in the patient's behavioral health assessment is provided to the patient or the patient's representative;
  10. Documentation of the request in subsection (B)(8) and the opportunity in subsection (B)(9) is in the patient's medical record;
  11. A patient's behavioral health assessment information is documented in the medical record within 48 hours after completing the assessment;
  12. If information in subsection (B)(4)(a) is obtained about a patient after the patient's behavioral health assessment is completed, an interval note, including the information, is documented in the patient's medical record within 48 hours after the information is

obtained;

13. Counseling is:

- a. Offered as described in the counseling facility's scope of services;
- b. Provided according to the type, frequency, and number of hours identified in the patient's assessment; and
- c. Provided by a behavioral health professional or a behavioral health technician;

14. A personnel member providing counseling to address a specific type of behavioral health issue has the skills and knowledge necessary to provide the counseling that addresses the specific type of behavioral health issue; and

15. Each counseling session is documented in the patient's medical record to include:

- a. The date of the counseling session;
- b. The amount of time spent in the counseling session;
- c. Whether the counseling was individual counseling, family counseling, or group counseling;
- d. The treatment goals addressed in the counseling session; and
- e. The signature of the personnel member who provided the counseling and the date signed.

C. An administrator may request authorization to provide any of the following to individuals required to attend by a referring court:

- 1. DUI screening,
- 2. DUI education,
- 3. DUI treatment, or
- 4. Misdemeanor domestic violence offender treatment.

D. An administrator of a counseling facility authorized to provide the services in subsection (C):

- 1. Shall comply with the requirements for the specific service in 9 A.A.C. 20, and
- 2. May have a behavioral health technician who has the appropriate skills and knowledge established in policies and procedures provide the services.

**R9-10-1910. Physical Plant, Environmental Services, and Equipment Standards**

A. An administrator shall ensure that a counseling facility has either:

- 1. Both of the following:
  - a. A smoke detector installed in each hallway of the counseling facility that is:
    - i. Maintained in an operable condition;
    - ii. Either battery operated or, if hard-wired into the electrical system of the outpatient treatment center, has a back-up battery; and



1. A counseling facility's premises are:
  - a. Sufficient to provide the counseling facility's scope of services;
  - b. Cleaned and disinfected to prevent, minimize, and control illness and infection;  
and
  - c. Free from a condition or situation that may cause an individual to suffer physical injury;
2. If a bathroom is on the premises, the bathroom contains:
  - a. A working sink with running water,
  - b. A working toilet that flushes and has a seat,
  - c. Toilet tissue,
  - d. Soap for hand washing,
  - e. Paper towels or a mechanical air hand dryer,
  - f. Lighting, and
  - g. A means of ventilation;
3. If a bathroom is not on the premises, a bathroom is:
  - a. Available for a patient's use,
  - b. Located in a building in contiguous proximity to the counseling facility, and
  - c. Free from a condition or situation that may cause an individual using the bathroom to suffer a physical injury; and
4. A tobacco smoke-free environment is maintained on the premises.

**R9-10-1911. Integrated Information**

- A. An administrator of an affiliated outpatient treatment center may maintain the following information, required in this Article for a counseling facility for which the affiliated outpatient treatment center provides administrative support, integrated with information required in 9 A.A.C. 10, Article 10 for the outpatient treatment center:
  1. Quality management plan, documented incidents, and reports required in R9-10-1904;
  2. Contracted services information in R9-10-1905;
  3. Orientation plan, in-service education plan, and personnel records in R9-10-1906; and
  4. Medical records in R9-10-1908.
- B. An administrator of an affiliated counseling facility that shares administrative support with one or more other affiliated counseling facilities may maintain the information in subsections (A)(1) through (A)(4) integrated with information maintained by the other affiliated counseling facilities.
- C. If an administrator of an affiliated outpatient treatment center or an affiliated counseling facility maintains integrated information according to subsection (A) or (B), the administrator shall

develop, document, and implement a method to ensure that:

1. If the quality management plan is integrated, the incidents documented, concerns identified, and changes or actions taken are identified for each facility;
2. If a person provides contracted services at more than one facility, the types of services the person provides at each facility is identified in the contract information;
3. If an orientation plan is applicable to more than one facility, the orientation a personnel member is expected to obtain for each facility is identified in the orientation plan;
4. If an in-service education plan is applicable to more than one facility, the in-service education a personnel member is expected to obtain for each facility is identified in the orientation plan;
5. If a personnel member provides counseling at more than one facility, the following is identified in the personnel member's record:
  - a. The days and hours the personnel member provides counseling for each facility;
  - b. If the personnel member's job description is different for each facility:
    - i. Each job description for the personnel member; and
    - ii. Verification of the skills and knowledge to provide counseling according to each of the personnel member's job descriptions; and
  - c. If a personnel member is a behavioral health technician, documentation of the clinical oversight provided to the personnel member, based on the number and acuity of the patients to whom the personnel member provided counseling at each facility; and
6. If a patient receives counseling at more than one facility, the counseling received and any information related to the counseling received at each facility is identified in the patient's medical record.

D. An administrator of a counseling facility receiving administrative support from an affiliated outpatient treatment center or an affiliated counseling facility shall ensure that if the counseling facility:

1. Has integrated information, the integrated information is provided to the Department for review within two hours after the Department's request:
  - a. In a written or electronic format at the counseling facility's premises; or
  - b. Electronically directly to the Department.
2. No longer receives or shares administrative support that includes integrating the information in subsection (A), the information for the counseling facility required in this



Article is maintained by the counseling facility and provided to the Department according to the requirements in this Article.

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