

ARTICLE 14. RECOVERY CARE CENTERS

R9-10-1401. Definitions [These terms are no longer used or are defined in R9-10-101, which contains definitions used in more than one Article in the Chapter.]

In this Article, unless the context otherwise requires:

1. ~~"Advance directives" means a living will, prehospital medical care directive, or health care power of attorney.~~
2. ~~"Basic life support procedures" means emergency services that include the administration of oxygen and cardiopulmonary resuscitation.~~
3. ~~"Chemical abuse" means the use of a pharmacologic drug administered for purposes of discipline or convenience, which is not required to treat the patient's medical symptoms.~~
4. ~~"Disaster" means an unforeseen event such as a fire or flood which may result in the facility, or a portion thereof, becoming uninhabitable and which necessitates evacuation of patients to another location.~~
5. ~~"Licensed nurse" means an individual licensed pursuant to A.R.S. Title 32, Chapter 15.~~
6. ~~"Medical peer review" means the participation by a physician in the review and evaluation of the medical management of a patient and the use of resources for patient care.~~
7. ~~"Medical staff" means physicians and other health care providers as defined in medical staff bylaws.~~
8. ~~"Nursing personnel" means a licensed nurse or a nurse aide.~~
9. ~~"Patient's representative" means a person acting on behalf of a patient under the written consent of the patient or the patient's legal guardian.~~
10. ~~"Postdiagnostic" means the medical and nursing care given following a diagnostic procedure.~~
11. ~~"Postsurgical" means the medical and nursing care given following a surgical procedure.~~

R9-10-1402. Administration

A. ~~The~~ A governing authority shall:

1. ~~consist~~ Consist of one or more persons ~~who shall be~~ responsible for the organization and administration of the recovery care center following:
 1. ~~Organizing the facility;~~
 2. Approve recovery care center policies and procedures;
 3. ~~Adopting~~ Approve medical staff bylaws and regulations ~~facility policies and procedures;~~

- ~~3.4.~~ Approving membership on the medical staff; Grant, deny, suspend, or revoke the clinical privileges of a medical staff member according to medical staff bylaws;
4. ~~Delineating, in writing, the clinical privileges of each medical staff member;~~
5. ~~Ensuring~~ Ensure that one or more physicians who are medical staff members conduct medical peer reviews under A.R.S. Title 36, Chapter 4, Article 5 in accordance with according to the medical staff bylaws;
6. Appoint an administrator who has the authority and responsibility for managing the recovery care center;
7. Ensure that an on-going quality management program is established that complies with R9-10-1408; and
- ~~6.8.~~ Ensuring compliance with state laws, rules, and local ordinances Establish the scope of services provided by the recovery care center.

B. ~~The governing authority shall appoint an administrator who shall have the authority and responsibility to manage the facility. The An~~ administrator shall:

1. Be directly responsible to the governing authority for all services provided at the recovery care center;
2. Act as a liaison between the governing authority, medical and facility staff, and employees;
- ~~2.3.~~ Establish, document, and implement written facility policies and procedures governing that:
 - a. ~~Personnel employment~~ Include employee job descriptions, duties, and qualifications;
 - b. Cover employee, orientation, and in-service education for employees and volunteers;
 - c. Cover staffing, and recordkeeping;
 - ~~b.d.~~ Cover Patient patient admissions, rights and responsibilities, medical treatment, transport, transfer, discharge planning, discharge, and recordkeeping;
 - e. Cover the provision of medical services, nursing services, and health-related services in the recovery care center's scope of services;
 - f. Cover when informed consent is required and by whom informed consent may be given;
 - g. Cover the receipt of and process for resolving grievances;
 - h. Cover health care directives;
 - i. Cover food services;

- e.j. ~~Cover contract~~ Contract services;
 - d.k. ~~Food services, housekeeping, maintenance, and infection control~~ Cover environmental services;
 - l. Cover infection control;
 - e.m. ~~Cover quality~~ Quality management, and recordkeeping including incident documentation;
 - f.n. ~~Cover emergency~~ Emergency treatment provided at the recovery care center; and
 - o. Include a disaster plan; and
 - g. ~~Equipment inspection; and~~
- 3.4. Designate, in writing, an individual to be on duty, in charge, and ~~have~~ with access to all areas related to patient care and operation of the recovery care center when the administrator is not present.
- C. The administrator may contract for services including dietary, pharmaceutical, and laboratory services and shall ensure that contractual services are provided in accordance with the facility's written policies and procedures. Copies of current written agreements containing the terms and conditions for the delivery of contract services shall be kept at the facility.

R9-10-1403. Patient Rights

- A. ~~The~~ An administrator shall ensure that ~~each patient or patient's representative is given a list of patient rights and responsibilities at the time of, or prior to, admission. The patient or patient's representative shall acknowledge, in writing, receipt of patient rights and responsibilities.:~~
- 1. Policies and procedures for patient rights include how and when a patient or the patient's representative is informed of the patient's rights in subsection (C); and
 - 2. A patient or the patient's representative receives a written statement of the patient's rights.
- B. ~~The~~ An administrator shall post a list of patient rights ~~and responsibilities in a conspicuous~~ an area that may be viewed by individuals entering or leaving the recovery care center.
- C. ~~The administrator and staff shall ensure that language barriers or physical handicaps do not prevent each patient or patient's representative from becoming aware of patient rights.~~
- ~~D.C.~~ Each patient shall have the following rights An administrator shall ensure that a patient:
- 1. ~~To be treated with consideration, respect, and full recognition of the patient's dignity and individuality, including~~ Has privacy in treatment and care for personal needs;
 - 2. ~~To be~~ Is free from the following:
 - a. ~~Medical, psychological, physical, and chemical abuse; and~~

- b. ~~Physical restraints, with the exception of an emergency when a restraint is necessary to protect the patient from injury to self or others, and is authorized by the attending physician;~~
- a. The intentional infliction of physical, mental, or emotional pain unrelated to the patient's medical condition;
- b. Exploitation;
- c. Seclusion or restraint if not medically indicated or necessary to prevent harm to self or others;
- d. Sexual abuse according to A.R.S. § 13-1404; and
- e. Sexual assault according to A.R.S. § 13-1406;
- 3. Either consents to or refuses treatment, if capable of doing so;
- ~~3.4.~~ To ~~May~~ refuse treatment or withdraw consent for treatment before treatment is initiated;
- 4. ~~To have medical and financial records kept in confidence. The release of such records shall be by written consent of the patient or the patient's representative except as otherwise required or permitted by law;~~
- 5. ~~To have~~ Has access to the patient's medical record;
- 6. ~~To be informed of rates and charges, in writing, within two weeks prior to admission for the services offered, and advised of possible third party coverage;~~
- ~~7.6.~~ To be ~~is~~ advised ~~on~~ of the facility's recovery care center's policy regarding ~~advance~~ health care directives;
- 8. ~~To be included in decisions regarding care and treatment;~~
- ~~9.7.~~ To ~~May~~ associate and communicate privately with ~~persons~~ individuals of the patient's choice;
- ~~10.8.~~ To have ~~Has~~ access to a ~~public~~ telephone, ~~unless bedside telephones are provided~~; and
- ~~11.9.~~ To ~~May~~ submit grievances without retaliation.
- ~~E.~~ Facility staff shall assist each patient to exercise patient rights.

R9-10-1404. Personnel

- A. An administrator shall ensure that:
 - 1. Personnel are available to meet the needs of a patient for medical services, nursing services, and health-related services listed in the recovery care center's scope of services;
 - 2. Personnel provide medical services, nursing services, and health-related services according to the recovery care center's policies and procedures;

3. Personnel, ~~prior to before~~ being employed and ~~annually thereafter~~ every 12 months after the date of employment, shall submit one of the following as provide evidence of freedom from pulmonary infectious tuberculosis as required in R9-10-1?? [Updated requirements that will be applicable to all health care institutions in which TB testing is required will be in Article 1.]; and
 4. Within the first week of employment, an employee receives orientation that:
 - a. Is specific to the duties to be performed by the employee; and
 - b. Includes training on personnel policies and patient rights.
1. ~~A report of a negative Mantoux skin test taken within six months of submitting the report; or~~
 2. ~~A written statement from a physician stating that, upon an evaluation of a positive Mantoux skin test taken within six months of submitting the physician's statement or a history of a positive Mantoux skin test, the individual was found to be free from tuberculosis.~~
- B.** ~~Personnel shall attend orientation within the first week of employment. Orientation shall include personnel policies and procedures and patient rights.~~
- C.B.** ~~Nursing personnel shall~~ An administrator shall ensure that licensed nurses and nursing assistants:
1. Be ~~Are~~ 18 years of age or older;
 2. Be ~~Are required to be~~ certified in cardiopulmonary resuscitation within the first month of employment;
 3. ~~and maintain~~ Maintain current certification in cardiopulmonary resuscitation thereafter;
 - 3.4. Attend additional orientation that includes ~~which shall include~~ patient care and infection control policies and procedures; and
 - 4.5. Attend 12 hours of in-service ~~training~~ education per year, which may include time spent in orientation.
- D.C.** ~~The~~ An administrator shall ensure that ~~personnel records for each employee are maintained which include:~~
1. Include:
 - a. ~~Application~~ The employee's application for employment;
 - 2.b. Verification of training, registration, certification, or licensure;
 - 3.c. ~~Initial proof~~ Evidence of freedom from infectious tuberculosis and annual verification statement thereafter as required in subsection (A)(3); and
 - 3.d. Orientation and in-service ~~training~~ education records ~~that include;~~
 - a. Subject matter,

- b. ~~Date and length of in service, and~~
- e. ~~Signatures of those who attend.~~
- 2. Are maintained by the recovery care center for at least two years after the last date the employee worked in the recovery care center; and
- 3. Are provided upon request to the Department within four hours after the Department's request.

R9-10-1405. Nursing Services

A. ~~The An~~ administrator shall appoint a registered nurse as the director of nursing ~~who shall~~ to be responsible for the management and supervision of nursing services in the recovery care center. ~~which shall include the following:~~

B. A director of nursing shall:

- 1. Ensure that policies and procedures are developed, documented, and implemented for ~~Developing and implementing nursing and patient care policies and procedures for all nursing services, including that cover:~~
 - a. Admission nursing assessments,
 - b. Administration of medications to ensure that medications are given according to the physician's order,
 - c. Storage of medication to ensure the security and efficacy of the medication, and
 - d. Disposal of medication;
- 2. ~~Designating~~ Designate, in writing, a registered nurse to act in the absence of the director of nursing;
- 3. ~~Staffing the facility~~ Ensure that the recovery care center is staffed with nursing personnel licensed nurses and nursing assistants according to the number of patients and their health care needs;
- 4. ~~Ensuring~~ Ensure that each patient receives ~~care and services~~ medical services, nursing services, and health-related services based on the admission nursing assessment and the physician's orders; and
- 5. ~~Ensuring~~ Ensure that medications are administered by a nurse licensed ~~pursuant~~ according to A.R.S. Title 32, Chapter 15 or as otherwise provided by law.

B. An administrator shall ensure that a ~~A~~ registered nurse ~~shall complete~~ completes a nursing assessment of each patient, which addresses all patient care needs, ~~upon the patient's admission~~ when the patient is admitted to the facility recovery care center.

- C. An administrator shall ensure that a licensed A-license nurse shall provide the provides a patient with written discharge instructions, based on the patient's health care needs and physician's instructions, before the patient is discharged from the recovery care center.

R9-10-1406. Admissions

- A. An administrator shall ensure that a A physician shall admit only admits patients to the facility recovery care center only those patients who require recovery care services pursuant to A.R.S. § 36-448.51(2) as defined in A.R.S. § 36-448.51.

- B. Facility staff shall comply with the admission policies and procedures of the facility in providing postsurgical and postdiagnostic medical and nursing services.

- C.B. The An administrator shall ensure that the following documents are in the a patient's medical record at the time of admission the patient is admitted to the recovery care center:

1. A current medical history and physical examination performed or approved by members a member of the recovery care center's medical staff within 30 days of before the patient's admission to the recovery care center,
2. A discharge summary from the referring facility health care institution or physician,
3. Physician orders, and
4. Documentation concerning advance directives health care directives.

R9-10-1407. Ancillary Services

- A. An administrator shall ensure that:

1. Laboratory services shall be are provided on the premises, or are available through contract, with a laboratory licensed or exempt from licensure pursuant to A.R.S. Title 36, Chapter 4.1. that holds a certificate of accreditation or certificate of compliance issued by the U.S. Department of Health and Human Services under the 1988 amendments to the Clinical Laboratories Improvement Act of 1967; and

- B.2. Pharmaceutical services shall be are provided on the premises, or are available through contract, by a pharmacy registered by the state of Arizona pursuant to licensed according to A.R.S. Title 32, Chapter 18.

- C.B. The An administrator shall designate a food service manager who shall ensure that:

1. Each A patient receives a diet based on the patient's nutritional needs and, if applicable, physician's order;
2. Food services are provided in compliance with the facility's recovery care center's policies and procedures;

3. Staff Sufficient individuals are employed to ensure the preparation and delivery of food to patients of the recovery care center; and
4. ~~An updated~~ A current therapeutic diet reference manual is available; and
5. Onsite or catered food preparation, storage, and handling ~~shall~~ comply with applicable food and drink rules of Chapter 8, Article 1 of this Title in 9 A.A.C. 8, Article 1.

R9-10-1408. Quality Management

- ~~A.~~ The administrator ~~shall ensure implementation and maintenance of a quality management program that monitors and evaluates the provision of all aspects of patient care including contracted and physician services.~~
- ~~B.~~ The quality management plan shall be in writing and describe the objectives, organization, scope, and process for improving quality of care ~~which shall include the monitoring activities.~~
- ~~C.~~ The administrator ~~shall maintain a record of quality management activities and ensure that any conclusions and recommendations on findings of quality management activities are reported to the governing authority.~~

An administrator shall require 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 related to patient care;
 - 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
 - b. Any changes made or actions taken as a result of the identification of a concern about the delivery of services related to patient care; and
3. The report required in subsection (2) and the supporting documentation is:
 - a. Maintained for 12 months after the date the report is submitted to the governing authority; and

- b. Except for information or documents that are confidential under federal or state law, provided upon request to the Department within two hours after the Department's request.

R9-10-1409. Medical Records

- A. ~~The An~~ administrator shall ensure that a medical record is established and maintained for each patient ~~in accordance with~~ according to A.R.S. § 12-2297 and the facility's recovery care center's policies and procedures.
- B. An administrator shall ensure that a medical record ~~A Medical records for each a patient shall include~~ includes the following information, ~~where applicable:~~
 - 1. Patient name and address,
 - 2. Admitting diagnosis,
 - 3. Discharge summary from the referring ~~facility~~ health care institution or physician,
 - 4. ~~Written acknowledgment of the receipt of copies a copy of patient rights and responsibilities;~~
 - ~~5.4.~~ Consent forms,
 - ~~6.5.~~ Documentation concerning advance directives health care directives,
 - ~~7.6.~~ Medical history and physical examination,
 - ~~8.7.~~ Physician orders and progress notes,
 - ~~9.8.~~ Nursing assessment and progress notes,
 - ~~10.9.~~ Documentation of medication Medication and treatment record provided to the patient,
 - ~~11.10.~~ Laboratory and diagnostic reports, and
 - ~~12.11.~~ Documentation that the patient received A copy of the discharge instructions required in R9-10-1405(C).
- C. ~~The An~~ administrator shall ensure that ~~the a patient's~~ a patient's medical record ~~of a discharged patient~~ is completed within 30 days ~~of~~ after the patient's discharge.
- D. ~~Medical records shall be maintained for three years from the patient's discharge except as required by A.R.S. § 36-343. If a facility ceases operation, the recovery care center shall ensure the preservation of records in compliance with this retention requirement.~~

R9-10-1410. Environmental Standards

- A. ~~The An~~ administrator shall ensure the ~~facility's~~ recovery care center's compliance with the recovery care center's infection control policies and procedures, which shall include:
 - 1. Surveillance, prevention, and control of infection;

2. Storage and maintenance of sterile supplies and equipment; and
 3. Disposal of waste, including blood and body fluid.
- B. ~~The~~ An administrator shall ensure that housekeeping and maintenance services are provided to maintain a safe and sanitary environment.
- C. ~~The~~ An administrator shall ensure that equipment is operational, ~~and~~ inspected, and maintained according manufacturer's recommendations and in accordance with the recovery care center's policies and procedures, which shall include the following:
1. Testing, calibrating, servicing, or repairing of equipment to ensure that the equipment is accurate and free from fire and electrical hazards; ~~and~~
 2. Maintaining records documenting the service and calibrating performed;
 3. Use, maintenance, and storage of oxygen and other flammable gases according to A.A.C. R9-1-412; and
 4. Use and maintenance of electrical equipment according to A.A.C. R9-1-412.
- ~~D.~~ ~~Staff shall use, maintain, and store oxygen and other flammable gasses in accordance with A.A.C. R9-1-412(B).~~
- ~~E.~~ ~~Staff shall use and maintain electrical equipment in accordance with A.A.C. R9-1-412(E).~~
- ~~F.~~ ~~The facility shall pass annual inspection for fire safety by the fire authority having jurisdiction.~~

R9-10-1411. Emergency Standards

- A. ~~The governing authority shall adopt~~ An administrator shall ensure that the policies and procedures which that establish the extent of emergency treatment to be performed within the facility including recovery care center include:
1. Basic life support procedures, including the administration of oxygen and cardiopulmonary resuscitation; and
 2. Transfer arrangements for patients who require care ~~above recovery care services~~ not provided by the recovery care center.
- B. An administrator shall ensure that medical staff and personnel of the recovery care center ~~Staff shall~~ provide emergency treatment to a patient admitted to the recovery care center according to the facility's recovery care center's policies and procedures.
- C. ~~The~~ An administrator shall ensure ~~the development of a written disaster plan of operation with that a disaster plan for the recovery care center is developed, documented, and implemented that~~ includes procedures to be followed in the event of threat to patient safety:
1. Procedures for protecting the health and safety of patients and other individuals;
 2. Assigned personnel responsibilities; and

3. Instructions for the evacuation, transport, or transfer of patients, maintenance of medical records, and arrangements to provide any other services related to patient care to meet the patients' needs.
- ~~D.~~ The administrator shall ensure disaster drills are conducted on each shift every three months.
- ~~E.~~ The administrator shall retain records of disaster drills for one year and include the date, time, and critique of the drill.
- D.** An administrator shall ensure that:
1. A floor plan of the recovery care center is posted in each room or hallway of the recovery care center on which lines have been drawn showing the evacuation path from the area of the recovery care center to the outside;
 2. A fire drill is performed on each shift at least once every three months;
 3. A disaster drill is performed on each shift at least once every 12 months;
 4. Documentation of a fire drill required in subsection (D)(2) and a disaster drill required in subsection (D)(3) includes:
 - a. The date and time of the drill;
 - b. A critique of the drill; and
 - c. Recommendations for improvement, if applicable; and
 5. Documentation of a fire drill or a disaster drill is maintained for 12 months after the date of the drill and provided upon request to the Department within two hours after the Department's request.

R9-10-1412. Physical Plant Requirements

- ~~A.~~ Facilities licensed prior to January 1, 1992, shall conform to the requirements of A.A.C. R9-1-412(B), Life Safety Code, Chapter 13, "Existing Health Care Occupancies."
- ~~B.~~ Facilities licensed after January 1, 1992, shall conform to the physical plant health and safety codes and standards referenced in A.A.C. R9-1-412.
- ~~C.~~ Patient rooms and service areas shall comply with the requirements of A.A.C. R9-1-412(F), Guidelines for Construction and Equipment of Hospital and Medical Facilities, specifically Chapter 7, Sections 7.2(A) and (B) for General Hospitals.
- ~~D.~~ Bed capacity shall not exceed two beds per room.
- A.** An administrator shall ensure that the recovery care center complies with the applicable physical plant health and safety codes and standards, incorporated by reference in A.A.C. R9-1-412, that were in effect on the date listed on the building permit or zoning clearance submitted with the architectural plans and specifications submitted before initial licensing.

- B.** An administrator shall ensure that the recovery care center does not provide more than two beds per room.
- C.** An administrator shall provide to the Department for review as soon as possible but not more than four hours after the time of the Department's request, documentation of a current fire inspection conducted by a local jurisdiction.

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