

Acute Respiratory Care

§ 70401. Acute Respiratory Care Service Definition.

Acute Respiratory Care Service means an intensive care unit in which there are specially trained nursing and supportive personnel and the necessary diagnostic, monitoring and therapeutic equipment to provide specialized medical and nursing care to patients with acute respiratory problems.

§ 70403. Acute Respiratory Care Service General Requirements.

- (a) Written policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the governing body. Procedures shall be approved by the administration and medical staff where such is appropriate.
- (b) The responsibility and accountability of the acute respiratory care service to the medical staff and administration shall be defined.
- (c) The unit shall be used primarily for the care of patients with acute respiratory failure. The unit should contain at least four (4) beds and should treat 100 or more patients per year.
- (d) Data relating to admissions, mortality and morbidity shall be kept and reviewed by an appropriate committee of the medical staff at least quarterly.
- (e) The hospital shall have the capability to perform blood gas analysis and electrolyte determinations at all times.
- (f) The unit shall be located to prevent through traffic.
- (g) Periodically, an appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.

§ 70405. Acute Respiratory Care Service Staff.

- (a) A physician shall have overall responsibility for the acute respiratory care service. When possible this physician shall be certified or eligible for certification in pulmonary disease by the American Board of Internal Medicine or be certified or eligible for certification by the American Board of Anesthesiology. If such specialists are not available, a physician who is certified or eligible for certification as an internist by the American Board of Internal Medicine with interest and experience in acute respiratory care may direct and coordinate the service.
- (b) A minimum of one other physician experienced in acute respiratory care shall be available to the unit.
- (c) Consultants in the specialties of medicine and surgery shall be available to the unit.
- (d) A registered nurse with at least six months nursing experience in the care of acute respiratory failure patients shall be responsible for the nursing care and nursing management of the unit.
- (e) A registered nurse:patient ratio shall be 1:4 or fewer on all shifts.

(f) Sufficient other licensed nursing personnel who have experience in acute respiratory care nursing shall provide additional support in a total nurse:patient ratio of 1:2 or fewer on each shift.

(g) Sufficient respiratory care practitioners and/or respiratory care technicians shall provide support for resuscitation and maintenance of the mechanical ventilators in a ratio of 1:4 or fewer on each shift.

(h) A physical therapist and a social worker should be available on a regular basis.

§ 70407. Acute Respiratory Care Service Equipment and Supplies.

(a) Equipment and supplies shall include at least:

(1) Vertically adjustable beds with immediately removable headboards with trendelenburg position capability.

(2) Bed scales.

(3) One pressure cycle respirator for each bed and one volume-cycle respirator for each four beds.

(4) Endotracheal tubes and tracheostomy sets.

(5) Patient lift.

(6) Respiratory and cardiac monitoring for each bed.

(7) Crash cart or equivalent.

(8) Spirometry equipment.

(9) Resuscitative equipment.

(10) DC defibrillator.

(11) Self-inflating bag and attached mask at each bed.

(b) An acute respiratory care unit is classified as an electrically sensitive area and shall meet the requirements of Section 70853 of these regulations.

§ 70409. Acute Respiratory Care Service Space.

(a) In addition to the construction requirements in Section T17-316, Title 24, California Administrative Code, the following shall be met:

(1) Beds in the acute respiratory care service shall be included in the total licensed bed capacity of the hospital.

(2) Each bed area shall contain at least 12.2 square meters (132 square feet) of floor space with no dimension less than 3.3 meters (11 feet) and with 1.2 meters (4 feet) of clearance at both sides and at the foot of the bed with a minimum of 2.4 meters (8 feet) between beds.

(3) 1.2 meters (4 feet) of floor space shall be provided around nurses' desks and utility areas.

(4) All beds shall be placed in relation to the nurses' station or work area to obtain maximum observation of the patients.

Occupational Therapy

§ 70515. Occupational Therapy Service Definition.

(a) Occupational therapy services means those services provided to a patient by or under the supervision of an occupational therapist with appropriate staff, space, equipment and supplies. These services are used to restore the functional capacity of

those individuals whose abilities to cope with tasks of daily living are threatened or impaired by developmental deficits, the aging process, physical illness or injury or psychosocial disabilities. Occupational therapy services include but are not limited to:

- (1) Providing the physician with an initial evaluation of the patient's level of function by diagnostic and prognostic testing.
- (2) Intervention in acute stages of illness or injury to minimize or prevent disfunction.
- (3) Use of professionally selected self-care skills, daily living tasks and tests and therapeutic exercises to improve function.
- (4) Training in the performance of tasks modified to the patient's level of physical and emotional tolerance.
- (5) Provision of preventive and corrective equipment to promote function and to prevent deformity.
- (6) Reevaluating the patient as changes occur and modifying treatment goals consistent with these changes.
- (7) Psychological conditioning of the patient to prepare him for reentry and integration into his community.
- (8) Use of tests to determine patient's ability in areas of concentration, attention, thought organization, preception and problem solving.
- (9) Prevocational evaluation through the use of specific tasks to determine the patient's potential for vocational performance.

§ 70517. Occupational Therapy Service General Requirements.

- (a) Written policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the governing body. Procedures shall be approved by the administration and medical staff where such is appropriate.
- (b) The responsibility and the accountability of the occupational therapy service to the medical staff and administration shall be defined.
- (c) Occupational therapy shall be given only on the signed order of a person lawfully authorized to give such an order.
- (d) Patients shall be evaluated by the occupational therapist and a treatment program shall be established to include the modalities, the frequency and duration of treatments. This program and any modifications shall be approved in writing by the referring physician.
- (e) Signed notes shall be entered into the record each time occupational therapy service has been performed.
- (f) Progress notes shall be written and signed at least weekly by the occupational therapist and summarized upon completion of the treatment program.
- (g) Occupational therapy staff shall be involved in orientation and in-service training of hospital employees.
- (h) There shall be staff representation at the multidisciplinary conferences in order to plan and review patient treatment.
- (i) Procedures shall be established for outpatient treatment, home visits and referrals to appropriate community agencies.

(j) Periodically, an appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.

§ 70519. Occupational Therapy Service Staff.

- (a) An occupational therapist shall have overall responsibility for the service.
- (b) The occupational therapy director shall be responsible for the coordination of activity therapies which may include but not be limited to recreation, dance, art, music, poetry and drama.
- (c) There shall be sufficient staff to meet the needs of the patients and scope of the services offered. The staff shall consist of occupational therapist(s) and may additionally consist of occupational therapy assistants, occupational therapy aides and other supportive personnel.
- (d) The occupational therapist shall supervise treatment rendered by aides and occupational therapy assistants. When occupational therapy aides are providing treatment, an occupational therapist shall provide direct supervision of the treatment rendered.

§ 70521. Occupational Therapy Service Equipment and Supplies.

- (a) There shall be sufficient equipment and supplies appropriate to the needs of the services offered. In addition there shall be:
 - (1) A telephone.
 - (2) A handwashing sink in the treatment area.
 - (3) Equipment made accessible to patients in wheelchairs, on crutches, or when using other adaptive equipment. This shall include but not be limited to:
 - (A) Adequate width of door openings.
 - (B) Toilets with grab bars on both sides of the commode.
 - (C) Over-sink mirrors.
 - (D) Drinking fountains.
 - (E) Adjustable tables.

§ 70523. Occupational Therapy Service Space.

- (a) Adequate space shall be maintained for the equipment and supplies necessary to provide occupational therapy service. The minimum floor area for occupational therapy service shall be 28 square meters (300 square feet), no dimension of which shall be less than 4 meters (12 feet).
- (b) Office space, separate from the treatment area, shall be provided.
- (c) There shall be adequate ventilation and lighting, and sufficient power outlets, both 110 V and 220 V, for equipment.
- (d) Floor finishes shall be of a nonslip variety to minimize hazard.
- (e) Architectural barriers, as defined by the American National Standards, A117.1, 1961 (reaffirmed 1971), including thresholds and stairways shall be provided with alternate means of access such as ramps.
- (f) Suitable waiting space shall be provided.

Outpatient Service

§ 70525. Outpatient Service Definition.

Outpatient service means the rendering of nonemergency health care services to patients who remain in the hospital less than 24 hours with the appropriate staff, space, equipment and supplies.

§ 70527. Outpatient Service General Requirements.

(a) Written policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the governing body. Procedures shall be approved by the administration and medical staff where such is appropriate.

(b) The responsibility and the accountability of the outpatient service to the medical staff and administration shall be defined.

(c) If outpatient surgery is performed, the written policies and procedures shall make provision for at least the following:

(1) The types of operative procedures that may be performed.

(2) Types of anesthesia that may be used.

(3) Preoperative evaluation of the patient, meeting the same standards as apply to inpatient surgery.

(4) Informed operative consent.

(5) The delivery of all anatomical parts, tissues and foreign objects removed to a pathologist designated by the hospital and a report of findings to be filed in the patient's medical record.

(6) Written preoperative instructions to patients covering:

(A) Applicable restrictions upon food and drugs before surgery.

(B) Any special preparations to be made by the patient.

(C) Any postoperative requirements.

(D) An understanding that admission to the hospital may be required in the event of an unforeseen circumstance.

(7) Examination of each patient by a licensed practitioner whose scope of licensure permits prior to discharge.

(d) A medical record shall be maintained for each patient receiving care in the outpatient service. The completed medical record shall include the following, if applicable:

(1) Identification sheet to include but not be limited to the following patient information:

(A) Name.

(B) Address.

(C) Identification number (if applicable).

1. Hospital number.

2. Social Security.

3. Medicare.

4. Medi-Cal.

(D) Age.

(E) Sex.

(F) Marital status.

(G) Religious preference.

- (H) Date and time of arrival.
- (I) Date and time of departure.
- (J) Name, address and telephone number of person or agency responsible for the patient.
- (K) Initial diagnostic impression.
- (L) Discharge or final diagnosis.
- (2) Medical history including:
 - (A) Immunization record.
 - (B) Screening tests.
 - (C) Allergy record.
 - (D) Nutritional evaluation.
 - (E) Neonatal history for pediatric patients.
- (3) Physical examination report.
- (4) Consultation reports.
- (5) Clinical notes including dates and time of visits.
- (6) Treatment and instructions, including:
 - (A) Notations of prescriptions written.
 - (B) Diet instructions, if applicable.
 - (C) Self-care instructions.
- (7) Reports of all laboratory tests performed.
- (8) Reports of all X-ray examinations performed.
- (9) Written record of preoperative and postoperative instructions.
- (10) Operative report on outpatient surgery including preoperative and postoperative diagnosis, description of findings, techniques used and tissue removed or altered, if appropriate.
- (11) Anesthesia record including preoperative diagnosis, if anesthesia is administered.
- (12) Pathology report, if tissue or body fluid was removed.
- (13) Clinical data from other providers.
- (14) Referral information from other agencies.
- (15) All consent forms.
- (e) Periodically, an appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.

§ 70529. Outpatient Service Staff.

- (a) The outpatient service shall have a person designated to direct and coordinate the service.
- (b) All physicians, dentists and podiatrists providing services in the outpatient unit shall be members of the organized medical staff. All other health care professionals providing services in outpatient settings shall meet the same qualifications as those professionals providing services in inpatient services.
- (c) A registered nurse shall be responsible for the nursing service in the outpatient service.
- (d) There shall be sufficient nursing and other personnel to provide the scope of services offered.

§ 70531. Outpatient Service Equipment and Supplies.

There shall be sufficient and appropriate equipment and supplies related to the scope and nature of the anticipated needs and services.

§ 70533. Outpatient Service Space.

(a) The number of examination and treatment rooms shall be adequate in relation to the volume and nature of work performed.

(b) Waiting areas shall be readily accessible to patients and personnel. Rest rooms, drinking fountain and a public telephone shall be provided.

(c) Laboratory, radiology and pharmacy services shall be readily available to the outpatient service.

(d) If outpatient surgery is performed in the outpatient service area, the basic facilities shall include:

(1) Appropriately equipped and staffed operating room and postanesthesia recovery area.

(2) Appropriate means of control against the hazards of infection, electrical or mechanical failure, fire and explosion.

(3) Provision for sterilizing equipment and supplies and for maintaining sterile technique.

(4) Appropriate equipment and instrumentation for anesthesia, emergency cardiopulmonary resuscitation and other life support systems.

(5) The operating room shall be so located that it does not directly connect with a corridor used for general through traffic. Entry and exit shall be controlled with respect to personnel, patients and materials handling.

(6) Construction of the operating room shall be in conformity with provisions of Division T17, Title 24, California Administrative Code.

(e) If beds are provided in the outpatient unit, they shall not be included in the licensed bed capacity.

(1) Inpatients shall not be allowed to occupy an outpatient bed.

(2) Outpatients shall not be allowed to remain over 24 hours in outpatient beds.

Physical Therapy Service

§ 70555. Physical Therapy Service Definition.

(a) Physical therapy service means those services to a patient by or under the supervision of a physical therapist to achieve and maintain the highest functional level with appropriate staff, space, equipment and supplies. Physical therapy services include but are not limited to:

(1) Providing the physician with an initial written evaluation of the patient's rehabilitation potential.

(2) Applying muscle, nerve, joint and functional ability tests.

(3) Treating patients to relieve pain, develop or restore function.

(4) Assisting patients to achieve and maintain maximum performance using physical means such as exercise, massage, heat, sound, water, light, ice, and electricity.

§ 70557. Physical Therapy Service General Requirements.

- (a) Written policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the governing body. Procedures shall be approved by the administration and medical staff where such is appropriate.
- (b) The responsibility and the accountability of the physical therapy service to the medical staff and administration shall be defined.
- (c) Physical therapy shall be given only on the signed order of a person lawfully authorized to give such an order.
- (d) When physical therapy is ordered, the patient shall be evaluated by the physical therapist and a treatment program shall be established to include the modalities, frequency and duration of treatments. This program and any modifications shall be approved by the person who signed the order for service.
- (e) Signed notes shall be entered into the record each time physical therapy service has been performed.
- (f) Progress notes shall be written and signed at least weekly by the physical therapist and summarized upon completion of the treatment program.
- (g) Physical therapy service staff shall be involved in orientation and in-service training of hospital employees.
- (h) There shall be written techniques for cleaning and culturing of hydrotherapy equipment.
- (i) Procedures shall be established for outpatient treatment, home visits and referrals to appropriate community agencies.
- (j) Periodically, an appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.

§ 70559. Physical Therapy Service Staff.

- (a) A physical therapist shall have overall responsibility for the physical therapy service.
- (b) There shall be sufficient staff to meet the needs of the patients and scope of the services offered. The staff shall consist of physical therapists and may additionally consist of physical therapist assistants, physical therapy aides and other supportive personnel.
- (c) The physical therapist shall supervise treatment rendered by aides and assistants. When physical therapy aides are providing treatment, a physical therapist shall provide direct supervision of the treatment rendered.

§ 70561. Physical Therapy Service Equipment and Supplies.

- (a) There shall be sufficient equipment and supplies appropriate to the needs and the services offered. In addition there shall be:
 - (1) A telephone.
 - (2) A handwashing sink in the treatment area.
 - (3) Equipment accessible to patients in wheelchairs, on crutches, or when using other adaptive equipment. This shall include but not be limited to:
 - (A) Adequate width of door openings.
 - (B) Toilets with grab bars on both sides of the commode.

- (C) Over sink mirrors.
- (D) Drinking fountains.
- (E) Adjustable tables.

§ 70563. Physical Therapy Service Space.

- (a) Adequate space shall be maintained for the equipment and supplies necessary to provide physical therapy service. The minimum floor area for physical therapy service shall be 28 square meters (300 square feet), no dimension of which shall be less than 4 meters (12 feet).
- (b) Office space, separate from the treatment area, shall be provided.
- (c) Floor finishes shall be of a nonslip variety to minimize hazard.
- (d) Architectural barriers as defined in Specifications for Making Buildings and Facilities Accessible and Usable by the Physically Handicapped, A-117.1 1961 (reaffirmed 1971) by the American National Standards Institute, Inc., 1430 Broadway, New York, NY 10018, shall have alternate means of access such as ramps.
- (e) A suitable waiting area shall be provided.

Podiatric Service

§ 70565. Podiatric Service Definition.

Podiatric service means the diagnosis and treatment of disorders of the foot by podiatrists with the appropriate staff, space, equipment and supplies.

§ 70567. Podiatric Service General Requirements.

- (a) Written policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the governing body. Procedures shall be approved by the administration and medical staff where such is appropriate.
- (b) The responsibility and the accountability of the podiatric service to the medical staff and administration shall be defined.
- (c) A physician member of the medical staff shall be responsible for the care of any medical problem arising during the hospitalization of podiatric patients.
- (d) There shall be a record of all podiatric services provided for the patient and this shall be made a part of the patient's medical record.
- (e) Periodically, an appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.

§ 70569. Podiatric Service Staff.

A podiatrist shall have overall responsibility for the service.

§ 70571. Podiatric Service Equipment and Supplies.

There shall be sufficient equipment, instruments, and supplies for the scope of services provided.

§ 70573. Podiatric Service Space.

There shall be adequate space maintained to meet the needs of the service.

Rehabilitation Center

§ 70595. Rehabilitation Center Definition.

Rehabilitation center means a functional unit for the provision of those rehabilitation services that restore an ill or injured person to the highest level of self-sufficiency or gainful employment of which he is capable in the shortest possible time, compatible with his physical, intellectual and emotional or psychological capabilities and in accord with planned goals and objectives.

§ 70597. Rehabilitation Center General Requirements.

(a) Written policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the governing body. Procedures shall be approved by the administration and medical staff where such is appropriate. These policies and procedures shall include but not be limited to:

- (1) Goals and objectives.
- (2) General eligibility and admission criteria.
- (3) Geographic area to be served.
- (4) Scope of services to be provided.
- (5) Rehabilitation staff eligibility requirements.
- (6) Relationships between the hospital and other health facilities in the community.
- (7) Sources and forms used for referral of patients.

(b) The responsibility and the accountability of the rehabilitation service to the medical staff and administration shall be defined.

(c) As a minimum, physical therapy, occupational therapy and speech therapy shall be provide and the requirements for these individual services, as stated elsewhere in these regulations, shall be met.

(d) There shall be preadmission patient screening done by an appropriate individual who may be the director of the service or his designee. Such screening shall include but not be limited to:

- (1) Medical review.
- (2) Rehabilitative potential evaluation.
- (3) Review of future placement resources.

(e) An outpatient service shall be part of the rehabilitation center. This service shall provide continuity of care to patients who have completed inpatient rehabilitation care and will provide comprehensive, integrated care for patients not requiring hospitalization. This service shall have available all of the resources of the rehabilitation center.

(1) A coordinated system of patient scheduling and appointments that serves to minimize waiting time shall be established.

(2) An outpatient medical record shall be maintained for each patient receiving care in the outpatient service. The completed medical record shall include the information required for treatment of all hospital outpatients (Section 70367).

- (f) There shall be a written utilization review plan that outlines the:
 - (1) Organization and composition of the utilization review committee, which shall include at least two physicians who shall be responsible for the utilization review functions.
 - (2) Requirement that the committee shall meet at least once each month.
 - (3) Selection of cases, both inpatient and outpatient, for review on a scientifically selected basis.
 - (4) Summary of the number and types of cases reviewed and the findings on each.
 - (5) Actions to be taken by the rehabilitation center based on the findings and recommendations of the utilization review committee.
- (g) Staff conferences shall be held regularly and include representation and participation by all disciplines involved in the program to assist in the organization and coordination of services offered.
- (h) Patient case conferences shall be held regularly to determine need for modification of treatment plans.
 - (1) There shall be a case conference plan and written minutes of each case conference held.
 - (2) One member of the rehabilitation service team shall be designated as the patient service coordinator.
- (i) Periodically, an appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.

§ 70599. Rehabilitation Center Staff.

- (a) A physician experienced in rehabilitation medicine shall have overall responsibility for the service.
- (b) A registered nurse with training and at least one year of experience in rehabilitation nursing shall be responsible for nursing care and nursing management of rehabilitation services.
- (c) Sufficient registered nurses experienced in rehabilitation nursing shall be employed to meet the needs of the service.
- (d) Other personnel experienced in rehabilitation shall be provided to meet the needs of the service and shall include but not be limited to the following:
 - (1) Full-time physical therapists.
 - (2) Full-time occupational therapists.
 - (3) Speech pathologists.
 - (4) The following personnel shall be available on a consultation or referral basis:
 - (A) Audiologist.
 - (B) Orthotist.
 - (C) Prosthetist.
 - (D) Vocational rehabilitation counselor.
 - (E) Recreational therapist.
 - (F) Psychiatrist.
 - (G) Psychologist.
 - (H) Registered nurse with public health nursing certificate.
 - (I) Learning disability specialist.
 - (J) Social worker

§ 70601. Rehabilitation Center Equipment and Supplies.

- (a) There shall be sufficient equipment and supplies to fulfill the needs of the services provided.
- (b) The equipment shall be of a type, quantity and quality that will provide safe and effective patient care.

§ 70603. Rehabilitation Center Space.

- (a) Rehabilitation beds shall be in a designated area of the hospital and shall be included in the licensed bed capacity of the hospital.
- (b) The following structural features shall be provided in the rehabilitation service area:
 - (1) Flooring in rehabilitation areas, while selected for appearance, durability and ease of cleaning and maintenance, shall also be selected and maintained to minimize slipping hazards.
 - (2) Architectural barriers as defined in Specifications for Making Buildings and Facilities Accessible and Usable by the Physically Handicapped, A-117.1 1961 (reaffirmed 1971) by the American National Standards Institute, Inc., 1430 Broadway, New York, NY 10018, shall have alternate means of access such as ramps.
 - (3) Sturdy handrails shall be provided on both sides of ramps and stairs in areas used by physically handicapped patients.
 - (4) Grab bars on both sides of toilets and supports shall be provided in patient bathrooms so that physically disabled patients may use toilet, handwashing and bathing facilities with minimal or no assistance.
 - (5) Doors and doorways.
 - (A) Doors to be used by ambulatory and wheelchair patients shall be at least 1.1 meters (three feet, eight inches) wide. Doors 0.9 meter (three feet) wide may be permitted at individual toilet rooms adjacent to patient bedrooms.
 - (B) Thresholds at doorways shall be flush with the floor.
 - (C) There should be at least two doors of entry and exit from group activity areas, i.e., craft and workshops. All such exit doors shall be equipped with panic bars.
 - (D) Doors shall not obstruct wheelchair patients' access to toilets and other patient areas.
 - (6) Bathing facilities.
 - (A) Bathtubs shall be of standard height. There shall be access on both sides and one end of bathtub to allow personnel to work on either side or end of tub.
 - (B) Shower stalls shall have minimum dimensions of at least 1.2 meters (four feet), be equipped with handrails and curtains and be designed for easy accessibility. The floor shall be sloped to provide drainage.
 - (7) There shall be at least one training toilet area in each patient unit with minimum dimensions of 1.5 meters (five feet) and 1.8 meters (six feet).
 - (8) Drinking fountains shall be located conveniently in nursing units, treatment areas and the lobby. Fountains shall be usable by wheelchair patients.
 - (9) Telephones shall be accessible to and usable by wheelchair patients.
 - (10) All rooms shall contain a minimum of 10 square meters (110 square feet) of usable floor space per bed with greater space provided for special needs such as circ-o-lectric beds.

- (11) Beds of adjustable height, preferably electrically operated, adequate to the needs of the service shall be provided. Beds shall be adjustable to the heights of wheelchair seats for use in patient transfer.
- (12) A mirror with overhead light, so arranged as to be easily usable by handicapped patients in wheelchairs, shall be provided in patient rooms.
- (13) Dining and lounge or recreation area.
- (A) Space for group dining shall be provided in a minimum amount of at least 2 square meters (20 square feet) per licensed bed for adults and/or children beyond the crib age.
- (B) Space for group recreation or patients lounge shall be provided in the same space ratio as the dining area.
- (C) Dining and recreation areas shall be equipped with appropriate height tables to accommodate patients in wheelchairs.
- (14) Suitable space shall be provided for staff conferences, patient evaluation and progress reports.
- (15) Classroom space.
- (16) An examining room equipped with furnishings, equipment and supplies adjacent or readily accessible to the office of the physician in charge of the outpatient service.
- (17) A waiting room area with coat or locker space, drinking fountain, telephone and men and women toilet facilities in or adjacent to the rehabilitation outpatient service area.
- (18) Access to an outside area to be used in therapeutic procedures for patients.

Respiratory Care

§ 70615. Respiratory Care Service Definition.

(a) Respiratory care service means those diagnostic and therapeutic procedures for ventilatory support and associated services to patients with appropriate staff, space, equipment and supplies. These diagnostic and therapeutic procedures include but are not limited to:

- (1) Measurement of pulmonary function testing and blood gas analyses.
- (2) Procedures to reverse or prevent further physiological abnormalities.
- (3) Treatment or prevention of airway problems of respiratory therapy origin.
- (4) Positive pressure ventilatory therapy.
- (5) Respiratory monitoring.
- (6) Cardiopulmonary resuscitation.
- (7) Physical therapy of the chest including bronchial drainage and percussion.
- (8) Patient instruction.
- (9) Care of the intubated and tracheostomy patient.
- (10) Constant consideration of infection control.

§ 70617. Respiratory Care Service General Requirements.

(a) Written policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the governing body. Procedures shall be approved by the administration and medical staff where such is appropriate.

- (b) The responsibility and the accountability of the respiratory care service to the medical staff and administration shall be defined.
- (c) There shall be clear delineation as to who may perform the various procedures, under what circumstances and under whose supervision, with the important undesirable side effects noted if an emergency arises.
- (d) All services shall be provided on the order of a person lawfully authorized to give such an order and shall specify the type, frequency of treatment, the dose and type of medication, appropriate dilution ratios and which diagnostic procedures are requested.
- (e) A copy of the order shall be available within the respiratory care files in addition to the patient's health record.
- (f) Diagnostic studies and treatment modalities shall be recorded in the patient's medical record including the type of diagnostic or therapeutic procedures, the dates and times of their occurrence and their effects including any adverse reactions.
- (g) Normal range and acceptable deviations from normal will be clearly delineated. Reactions outside the acceptable usual disease range shall be brought to the attention of the referring physician and the nursing service.
- (h) Respiratory care staff shall be involved in orientation and in-service training of hospital employees.
- (i) Periodically, an appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.

§ 70619. Respiratory Care Service Staff.

- (a) A physician shall have overall responsibility for the service. This physician should be certified or eligible for certification by the American Board of Internal Medicine or the American Board of Anesthesiology. His responsibilities shall include:
 - (1) Coordinating with other services.
 - (2) Making services available.
 - (3) Assuring the quality of respiratory care personnel.
 - (4) Developing measures to control nosocomial infections.
- (b) The day-to-day operation of the service shall be under the immediate supervision of a technical director who shall be a respiratory care practitioner, respiratory care technician, cardiopulmonary or pulmonary technologist or a registered nurse with specialized training and/or advanced experience in respiratory care, who shall be responsible for:
 - (1) Supervising the clinical application of respiratory care.
 - (2) Supervising the technical procedures used in pulmonary function testing and blood gas analysis.
 - (3) Supervising the maintenance of equipment.
 - (4) Assuring that national and local safety standards are met.
- (c) Other personnel may include registered nurses, licensed vocational nurses and physical therapists trained in respiratory care, respiratory care practitioners, respiratory care technicians, cardiopulmonary or pulmonary technologists and students.

§ 70621. Respiratory Care Service Equipment and Supplies.

(a) There shall be sufficient types and quantity of equipment to provide the appropriate inhalation of the several gases, aerosols and such other modalities required for the anticipated nature and variety of procedures.

(b) Equipment shall be calibrated in accordance with manufacturer's instructions and records of such calibrations shall be kept.

§ 70623. Respiratory Care Service Space.

(a) There shall be sufficient space maintained for:

(1) Storage of necessary equipment.

(2) Work areas for cleaning, sterilizing and repairing equipment.

(3) Pulmonary function studies and blood gas analysis, if performed in the unit.

(4) Office space.

Social Service

§ 70629. Social Service Definition.

Social service means assisting patients and their families to understand and cope with the emotional and social problems which affect their health status, with appropriately organized staff, space, equipment and supplies. problems of patients.

§ 70631. Social Service General Requirements.

(a) The social service to be provided shall be planned and developed in consultation with the administration, medical staff, nursing staff and other staff as appropriate.

(b) The responsibility and the accountability of the social service to administration and medical staff shall be defined.

(c) Written policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the governing body. Procedures shall be approved by the administration and medical staff where such is appropriate.

(d) When the patient receives social service appropriate entries and progress notes shall be included in the patient's medical record .

(e) Social service staff shall be involved in orientation and in -service training of the staff to assist in identifying social and emotional problems of patients.

(f) Periodically, an appropriate committee of the medical staff shall evaluate the service provided and make appropriate recommendations to the executive committee of the medical staff and administration.

§ 70633. Social Service Staff.

(a) A social worker shall have overall responsibility for the service.

(b) The social service staff shall be sufficient in number and qualifications to effectively provide the service needed. Such personnel may include social work assistants, social work aides and support staff.

§ 70635. Social Service Equipment and Supplies.

Equipment and supplies shall be provided as needed for performance of social service.

§ 70637. Social Service Space.

There shall be sufficient office space and privacy for interviewing and conducting social service.

Speech Pathology and/or Audiology Service

§ 70639. Speech Pathology and/or Audiology Service Definition.

Speech pathology and/or audiology service means diagnostic evaluation, screening, testing and rehabilitation services for individuals with speech, hearing and/or language disorders with appropriate staff, space, equipment and supplies.

§ 70641. Speech Pathology and/or Audiology Service General Requirements.

- (a) Written policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the governing body. Procedures shall be approved by the administration and medical staff where such is appropriate.
- (b) The responsibility and accountability of the speech pathology and/or audiology service to the medical staff and administration shall be defined.
- (c) Periodically, an appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.

§ 70643. Speech Pathology and/or Audiology Service Staff.

- (a) A speech pathologist, audiologist or otolaryngologist shall have overall responsibility for the service.
- (b) There shall be sufficient trained staff to meet the needs of the patients and the scope of the services provided.
- (c) All unlicensed personnel shall work under the direct supervision of a speech pathologist or audiologist.
- (d) There shall be arrangements for consultation with the patient's physician, a physician who is certified or eligible for certification by the American Board of Otolaryngology or other physician specialists as deemed appropriate.

§ 70645. Speech Pathology and/or Audiology Service Equipment and Supplies.

- (a) At least the following equipment shall be provided:
 - (1) An appropriate clinical audiometer.
 - (2) Diagnostic tests and materials.
 - (3) Other equipment and materials deemed necessary by the person having overall responsibility for the service.
- (b) Audiometric equipment shall be calibrated in accordance with Standard S-3.6, 1969, Specifications for Audiometer, of the American National Standards Institute, Inc., 1430 Broadway, New York, NY 10018. Evidence of such calibration shall be available on request.

§ 70647. Speech Pathology and/or Audiology Service Space.

(a) There shall be at least one two-room testing suite that meets Standard S-3.1, 1960 (R-1971), Criteria for Background Noise in Audiometer Rooms, of the American National Standards Institute, Inc., 1430 Broadway, New York, NY 10018.

(b) There shall be the space necessary for the tables and chairs to conduct interviews, consultations, treatment and to accommodate patients in wheelchairs or on stretchers.