

## DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

### Health Facilities and Emergency Medical Services Division

## STANDARDS FOR HOSPITALS AND HEALTH FACILITIES: CHAPTER 06 - ACUTE TREATMENT UNITS

### 6 CCR 1011-1 Chap 06

*[Editor's Notes follow the text of the rules at the end of this CCR Document.]*

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Copies of these regulations may be obtained at cost by contacting:

Division Director  
Colorado Department of Public Health and Environment  
Health Facilities Division  
4300 Cherry Creek Drive South  
Denver, Colorado 80222-1530  
Main switchboard: (303) 692-2800

These chapters of regulation incorporate by reference (as indicated within) material originally published elsewhere. Such incorporation, however, excludes later amendments to or editions of the referenced material. Pursuant to 24-4-103 (12.5), C.R.S., the Health Facilities Division of the Colorado Department of Public Health And Environment maintains copies of the incorporated texts in their entirety which shall be available for public inspection during regular business hours at:

Division Director  
Colorado Department of Public Health and Environment  
Health Facilities Division  
4300 Cherry Creek Drive South  
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Main switchboard: (303) 692-2800

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### 1.101 STATUTORY AUTHORITY AND APPLICABILITY

- (1) Authority to establish minimum standards through regulation and to administer and enforce such regulations is provided by Section 25-1.5-103, C.R.S.
- (2) Acute treatment units, as defined herein, shall be in compliance with all applicable federal and state statutes and regulations, including but not limited to, the following:
  - (a) This Chapter VI.
  - (b) The following parts of 6 CCR 1011-1, Chapter II, General Licensure Standards:
    - (i) Part 2, Licensure Process.
    - (ii) Part 3.2, Occurrence Reporting

(iii) Part 4, Waiver of Regulations for Health Facilities

- (3) This chapter applies to services provided by acute treatment units, including services provided through contracts.

**1.102 DEFINITIONS.**

For purposes of this chapter, the following definitions shall apply, unless the context requires otherwise:

- (1) "Acute treatment unit" means a facility or a distinct part of a facility for short-term psychiatric care, which may include substance abuse treatment, and which provides a total, twenty-four-hour therapeutically planned and professionally staffed environment for persons who do not require inpatient hospitalization but need more intense and individual services than are available on an outpatient basis, such as crisis management and stabilization services.
- (2) "Auxiliary aid" means any device used by persons to overcome a physical disability and includes but is not limited to a wheelchair, walker or orthopedic appliance.
- (3) "Client" means an individual who is age 18 and over in need of short-term psychiatric care.
- (4) Reserved
- (5) Reserved
- (6) "Deficiency" means a violation of regulatory and/or statutory requirements governing acute treatment units, as cited by the Department.
- (7) "Deficiency list" means a listing of deficiency citations which contains:
  - (a) a statement of the statute or regulation violated; and
  - (b) a statement of the findings, with evidence to support the deficiency.
- (8) "Department" means the Colorado Department of Public Health and Environment or its designee.
- (9) "Director" means a person who is responsible for the overall operation, daily administration, management and maintenance of the facility.
- (10) Reserved
- (11) "Facility" means an acute treatment unit.
- (12) "Governing body" means the board of trustees, directors or other governing body in whom the ultimate authority for the conduct of the facility is vested.
- (13) "Licensee" means the person or entity to whom:
  - (a) a license is issued by the Department pursuant to Section 25-1.5-103 (1) (a), C.R.S., to operate a facility within the definition herein provided, and
  - (b) a "27-10" designation has been granted by the Department of Human Services pursuant to Section 27-10-101, et. seq. and 2 CCR 502-1.
- (14) "Occurrences" means information reported to the Department in accordance with 25-1-124, C.R.S. and Chapter II, General Licensure, Part 3.2 occurrence Reporting.

- (15) Reserved
- (16) "Owner" means the entity in whose name the license is issued. The entity is responsible for the financial and contractual obligations of the facility. Entity means any corporation, limited liability corporation, firm, partnership, or other legally formed body, however organized. For the purposes of this regulation, the term "owner" is used interchangeably with the terms "applicant" and "licensee."
- (17) "Plan of correction" means a written plan to be submitted by facilities to the Department for approval, detailing the measures that shall be taken to correct all cited deficiencies.
- (18) Reserved
- (19) "Seclusion room" means a room where a client is placed alone and from where egress is involuntarily prevented.
- (20) "Short-term psychiatric care" means services provided to treat persons with mental illness for an average of 3-7 days, but generally no longer than 30 days.
- (21) "Staff" means employees; and contract staff intended to substitute for, or supplement staff who provide client care services.
- (22) "Therapeutic diet" means a diet ordered by a physician as part of a treatment of disease or clinical condition, or to eliminate, decrease, or increase specific nutrients in the diet. Examples include, but are not limited to: a calorie counted diet, a specific sodium gram diet, and a cardiac diet.
- (23) "Unit" means a locked treatment setting that serves a maximum of sixteen persons.
- (24) "Warewashing" means the cleaning and sanitizing of equipment and utensils. For the purposes of this definition, equipment includes but is not limited to kitchen appliances and tables with which food normally comes into contact. For the purposes of this definition, utensils are implements used to prepare, store, transport or serve food.

### **1.103 DEPARTMENT OVERSIGHT**

- (1) General
  - (a) Facility Compliance. The governing body shall be responsible for the operation of the facility and for compliance with these regulations. The governing body shall delegate the responsibility for day-to-day operations to the director.
  - (b) Issuing Licenses. The Department shall issue or renew a license after it is satisfied that the license applicant or licensee is in compliance with the requirements set forth in this Chapter VI and the requirements established by the Division of Mental Health, Department of Human Services. Such license issued or renewed pursuant to this section, other than a provisional license, shall expire one year from the date of issuance or renewal.
- (2) Licensure Fees
  - (a) General. Licensure fees are specified in Section 25-3-105 (1)(c), C.R.S.
- (3) Reserved

- (4) Citing Deficiencies
  - (a) The Department is authorized to cite deficiencies.
  - (b) The facility shall respond to a life or limb-threatening deficiency by immediately removing the cause of the life or limb threatening risk and provide evidence, either verbal or written as required by the Department, that the risk has been removed.
- (5) Plans of Correction (POCs). The Department shall require and the facility shall submit a plan of correction in response to cited deficiencies.
  - (a) General
    - (i) The facility shall develop a POC, in the format required by the Department, for every deficiency cited by the Department in the deficiency list.
    - (ii) The POC shall be typed or printed legibly in ink.
    - (iii) The date of correction for deficiencies shall be no longer than 30 calendar days from the date of the mailing of the deficiency list to the facility, unless otherwise required or approved by the Department.
  - (b) Process for Submission and Approval of POC
    - (i) A facility shall submit a POC to the Department no later than ten (10) working days of the date of the deficiency list letter sent by the Department.
    - (ii) If an extension of time is needed to complete the POC, the facility shall request an extension in writing from the Department prior to the POC due date. An extension of time may be granted by the Department not to exceed seven (7) calendar days.
    - (iii) The POC is subject to Department approval.
- (6) Reserved
- (7) Facility Reporting Requirements. The facility shall develop and implement policies and procedures for complying with the following reporting requirements.
  - (a) Occurrences
    - (i) Reporting. The facility shall be in compliance with occurrence reporting requirements pursuant to 6 CCR 1011, Chapter II, Section 3.2.
    - (ii) Facility investigation of occurrences
      - (A) Occurrences shall be investigated to determine the circumstances of the event and institute appropriate measures to prevent similar future situations.
      - (B) Documentation regarding investigation, including the appropriate measures to be instituted, shall be made available to the Department, upon request.

- (C) A report with the investigation findings will be available for review by the Department within five working days of the occurrence.
  - (D) Nothing in this Section 1.103 (7)(a) shall be construed to limit or modify any statutory or common-law right, privilege, confidentiality or immunity.
- (b) Notification Regarding Relocations. The facility shall notify the Department within 48 hours of the relocation of one or more clients occurs due to any portion of the facility becoming uninhabitable as a result of fire or other disaster.
- (c) Facility Closure. If the closure of a facility by a licensee is pending, the licensee shall notify the Department in writing at least 30 days prior to such closure.

**1.104 FACILITY OPERATIONS**

- (1) Medications. Medications shall be stored in a manner that prevents unauthorized access and drug diversion.
- (2) Staffing Requirements: Communicable Diseases
  - (a) General. All staff and volunteers shall be free of communicable disease that can be readily transmitted in the workplace.
  - (b) Tuberculosis
    - (i) All staff shall be required to have a tuberculin skin test prior to direct contact with the clients. In the event of a positive reaction to the skin test, evidence of a chest x-ray and other appropriate follow-up shall be required in accordance with community standards of practice.
    - (ii) The facility personnel files for staff members as well as for volunteers who have direct contact with clients shall include documentation evidencing TB testing and results.
- (3) Emergency Preparedness
  - (a) The facility shall develop, update as necessary, and implement a plan for emergency preparedness that addresses the facility response to the following emergencies:
    - (i) Severe weather, including but not limited to floods, blizzards, and tornados.
    - (ii) Fire.
    - (iii) Bomb threats.
    - (iv) Explosions.
    - (v) Hazardous material spills.
    - (vi) Internal system failures, such as electrical outages.
    - (vii) Communicable disease outbreaks.

- (b) Staff shall receive training regarding their responsibilities under the plan.
  - (i) Within three (3) working days of date of hire or commencement of volunteer service, the facility shall provide training in emergency preparedness.
  - (ii) Every two (2) months, there shall be a review of all components of the emergency preparedness plan, including each individual employee's responsibilities under the plan, with the staff of each shift.
- (4) Infection Control. The facility shall adopt and implement policies and procedures regarding infection control that shall address, at minimum:
  - (a) housekeeping,
  - (b) dietary services, and
  - (c) linen and laundry services.
- (5) Unit Safety Checks. The facility shall conduct unit safety checks every shift to identify and remedy hazards that could be used by clients to harm themselves or others. There shall be documentation of these safety checks.

#### **1.105 DIETARY SERVICES**

- (1) Supervision. The governing body shall appoint an individual to be in charge of dietary services. Such individual shall have knowledge of foodborne disease prevention, including but not limited to hygienic practices and food safety techniques pertaining to preparation, food storage and warewashing.
- (2) Sanitary Conditions. Food shall be prepared, handled and stored in a sanitary manner, so that it is free from spoilage, filth or other contamination, and shall be safe for human consumption.
- (3) Dishwashing. Warewashing shall be conducted in a safe and sanitary manner. Unless commercial grade dishwashers are used, a two-compartment sink or a single-compartment sink shall be used in conjunction with a domestic dishwashing machine. Dishwashing machines shall be used in accordance with manufacturer's instructions.
- (4) Meals and Snacks
  - (a) Meals
    - (i) Menus shall vary daily and shall be adjusted for seasonal changes and holidays.
    - (ii) At least three nutritionally balanced meals in adequate portions, using a variety of foods shall be made available at regular times daily.
    - (iii) In the event the meal provided is unpalatable, a nutritionally balanced substitute shall be available.
  - (b) Snacks. Between meal snacks of nourishing quality shall be available, to the extent that such availability does not conflict with a client's service plan.

- (c) Therapeutic Diets. This provision is only applicable to facilities that admit clients who require therapeutic diets. If the facility admits such clients, the following requirements shall apply.
  - (i) Therapeutic diets shall be prescribed by a physician.
  - (ii) The facility shall implement a system in order to ensure that the proper diet is provided.
- (5) Food Supply. There shall be enough food and water on hand to prepare three nutritionally balanced meals for four days.

#### **1.106 LINEN AND LAUNDRY SERVICES**

- (1) Provision of Laundry Services. The facility shall make laundry services available for clients' personal laundry in one of the following ways, and in accordance with these regulations:
  - (a) Providing laundry service for clients' personal items.
  - (b) Providing a designated laundry room for use by clients. Clients may do their personal laundry as part of their treatment plan.
- (2) Clean Linen Supply. The facility shall maintain a sufficient supply of clean linen, including sheets and towels.
- (3) Sanitary Conditions
  - (a) Linen and laundry services shall be conducted in a manner designed to prevent contamination of patients and personnel.
  - (b) Staff shall wash their hands after handling soiled linen and before handling clean linen.
  - (c) Storage
    - (i) Soiled linen shall be stored separately from clean linen. Soiled linen and clean linen shall be stored in separate enclosed areas.

#### **1.107 INTERIOR AND EXTERIOR ENVIRONMENT**

- (1) Interior Environment
  - (a) General. The facility shall provide a clean, sanitary interior environment, free of hazards to health and safety. The facility shall have a layout, finishes, and furnishings that minimize the opportunity for residents to injure themselves or others.
  - (b) Maintenance. Interior areas shall be in good repair.
  - (c) Finishes
    - (i) All finishes shall promote maintenance of sanitary conditions.
    - (ii) Floor surfaces and coverings shall promote mobility in areas used by individuals and shall promote maintenance of sanitary conditions.

- (d) Furnishings. The furnishings shall be clean, dry, free of foul odors, safe and well-maintained.
- (e) Windows. Windows that can be accessed by clients shall have security glazing or other appropriate security features to reduce the possibility of patient injury or escape.
- (f) Potential Infection/Injury Hazards
  - (i) Sharps. Sharp knives and other objects that could be used for self-harm or harm to others shall be secured in a manner inaccessible to clients.
  - (ii) Insect/rodent infestations. The facility shall be maintained free of infestations of insects and rodents and all openings to the outside shall be screened.
  - (iii) Storage of hazardous substances. Solutions, cleaning compounds and hazardous substances shall be labeled and stored in a safe manner, in an area inaccessible to the clients.
- (g) Heating, Lighting, Ventilation
  - (i) Each room in the facility shall be installed with heat, lighting and ventilation sufficient to accommodate its use and the needs of the clients.
  - (ii) All interior and exterior steps and interior hallways and corridors shall be adequately illuminated.
- (h) Water
  - (i) Potable water. There shall be an adequate supply of safe, potable water available for domestic purposes.
  - (ii) Hot water
    - (A) Hot water shall not measure more than 120 degrees Fahrenheit at taps which are accessible by clients.
    - (B) There shall be a sufficient supply of hot water during peak usage demands.
  - (i) Telephone. There shall be a telephone available for use by residents and staff.
- (2) Exterior Environment
  - (a) General. The facility shall provide a clean, sanitary, and secure, exterior environment, free of hazards to health and safety. In addition to the interior common areas required by this regulation, the facility shall provide a safe and secure outdoor area for the use of clients year round.
  - (b) Potential Hazards. Exterior areas shall be well maintained.
    - (i) Maintenance of the grounds. Exterior premises shall be kept free of high weeds and grass, garbage and rubbish. Grounds shall be maintained to prevent hazardous slopes, holes, or other potential hazards.



- (ii) Staircases. Exterior staircases of three (3) or more steps and porches shall have handrails. Staircases and porches shall be kept in good repair.
- (iii) Fencing or other enclosures that prevent elopement and protect the safety and security of the clients shall be installed around secure outdoor areas.

#### **1.108 PHYSICAL PLANT**

- (1) Compliance with State and Local Laws/Codes. Facilities shall be in compliance with all applicable:
  - (a) Local zoning, housing, fire and sanitary codes and ordinances of the city, city and county, or county where the facility is situated to the extent that such codes are consistent with the federal "Fair Housing Amendment Act of 1988", as amended, 42 U.S.C., sec. 3601, et seq.
  - (b) State and local plumbing laws and regulations. Plumbing shall be maintained in good repair, free of the possibility of backflow and backsiphonage, through the use of vacuum breakers and fixed air gaps, in accordance with state and local codes.
  - (c) Sewage disposal requirements. Sewage shall be discharged into a public sewer system or disposed of in a manner approved by the local health department, or local laws if no local health department exists, and the Colorado Water Quality Control Commission.
- (2) Common Areas
  - (a) Common areas sufficient to reasonably accommodate all clients shall be provided.
  - (b) All common areas and dining areas shall be accessible to clients utilizing an auxiliary aid without requiring transfer from a wheelchair to walker or from a wheelchair to a regular chair for use in the dining area. All doors to those rooms requiring access shall be at least 32 inches wide.
  - (c) A minimum of two entryways shall be provided for access and egress from the building by clients utilizing a wheelchair.
- (3) Dining Areas. A designated dining area accessible by all clients shall be provided in a separate area or areas capable of comfortably seating all clients.
- (4) Bedrooms
  - (a) Bedroom Assignment. No client shall be assigned to any room other than a regularly designated bedroom.
  - (b) Occupancy Ratios. No more than two (2) clients shall occupy a bedroom.
  - (c) Square Footage Requirements
    - (i) Each designated bedroom shall have at least 100 square feet for single occupancy bedrooms and 60 square feet per person for double occupancy bedrooms. Bathroom areas and closets shall not be included in the determination of square footage.

- (d) Storage Space. Each client shall have within his or her room separate storage facilities adequate for clothing and personal articles such as a closet or a locker. When the treatment program indicates, shelves for folded garments shall be used instead of hanging garments.
  - (e) Reserved
  - (f) Furnishings
    - (i) Each client bedroom shall be equipped as follows for each client:
      - (A) A comfortable, standard-sized bed equipped with a comfortable, clean mattress, mattress protector, and pillow. Rollaway type beds, cots, folding beds or bunk beds shall not be permitted.
      - (B) A standard-sized chair in good condition.
      - (C) A safe and sanitary method to store the client's towel, such as a breakaway towel rack.
  - (g) Electrical Hazards. Extension cords and multiple use electrical sockets shall be prohibited in client bedrooms.
- (5) Bathrooms
- (a) Number of Bathrooms Per Client. There shall be at least one full bathroom for every six (6) clients. A full bathroom shall consist of at least the following fixtures: toilet, handwashing sink, toilet paper dispenser, mirror, tub or shower, and towel rack. Bathrooms shall be equipped with soap dispensers or the facility shall have a procedure in place that prevents clients from sharing soap.
  - (b) Bathroom Accessibility. There shall be a bathroom on each floor having client bedrooms which is accessible without requiring access through an adjacent bedroom.
  - (c) Bathrooms for Clients using Auxiliary Aids. The facility shall provide at least one full bathroom as defined herein with fixtures positioned so as to be fully accessible to any client utilizing an auxiliary aid. Grab bars shall be properly installed at each tub and shower, and adjacent to each toilet.
  - (d) Fixtures
    - (i) Non-skid surfaces. Bathtubs and shower floors shall have non-skid surfaces.
    - (ii) Toilet seats. Toilet seats shall be constructed of non-absorbent material and free of cracks.
  - (e) Supplies
    - (i) Individualized supplies. The use of common personal care articles, including soap and towels, is prohibited.
    - (ii) Toilet paper. Toilet paper in a dispenser shall be available at all times in each bathroom of the facility.

- (iii) Liquid soap and paper towels. Liquid soap and paper towels shall be available at all times in the common bathrooms of the facility.
- (6) Seclusion rooms
  - (a) Client Safety
    - (i) The seclusion room shall be constructed to prevent patient hiding, escape, injury, or suicide.
    - (ii) The seclusion room shall be free of all protrusions, sharp corners, hardware, fixtures or other devices, and furnishings which may cause injury to the occupant.
  - (b) Temperature. The seclusion room shall maintain temperatures appropriate for the season.
  - (c) Location. The room shall be located in a manner affording direct observation of the patient by the nursing staff.
  - (d) Square Footage. The seclusion room shall have an area of at least 100 square feet.
  - (e) Windows. The seclusion room shall have a window that allows someone outside to see into all of the corners of the room. Windows in the seclusion room shall be constructed to prevent breakage and otherwise prevent the occupant from harming himself.
  - (f) Doors. Doors to the seclusion room shall be at least 32 inches wide, shall open outward.
  - (g) Electrical Outlets
    - (i) Light fixtures and other electrical outlets in the seclusion room shall be limited to those required and necessary, shall be recessed, and shall be constructed as to prevent the occupant from harming himself.
    - (ii) All electrical outlets, devices, and circuits accessible from inside the seclusion room shall be controlled by on/off switches located outside the seclusion room, in a secure location that is within the line of vision of the seclusion room. The switches shall be durably labeled as to their function.
- (7) Linen and Laundry
  - (a) The facility may have laundry room(s) no larger than 100 square feet in area equipped with residential style washer(s) and one residential style dryer without such laundry rooms being classified as a hazardous area. These laundry rooms shall not be used for storage of soiled or clean linen.
  - (b) Facilities shall have a separate enclosed area for receiving and holding soiled linen until ready for pickup or processing in addition to a separate enclosed area for clean linen storage.
  - (c) There shall be hand-washing facilities in each area where un-bagged, soiled linen is handled.

**1.109 ENVIRONMENTAL SAFETY**

- (1) Reserved
- (2) Reserved
- (3) Reserved
- (4) Emergency Evacuation Drills
  - (a) During the first year of operation, emergency evacuation drills shall be conducted once per shift per month.
  - (b) After the first year of operation, emergency evacuation drills shall be conducted once per shift per quarter.
  - (c) Emergency evacuation drills conducted during normal sleeping hours do not require the activation of the fire alarm system. All other emergency evacuation drills shall include the activation of the fire alarm system.
  - (d) Clients should, whenever possible, participate in daytime emergency evacuation drills. Client participation in emergency evacuation drills conducted during normal sleeping hours is not required.
- (5) Equipment
  - (a) First Aid. First aid equipment shall be maintained on the premises in a readily available location and staff shall be instructed in its use.
  - (b) Telephone
    - (i) There shall be at least one telephone, not powered by the facility's electrical system, for use by the staff for emergencies.
    - (ii) Current phone number and location of the nearest hospital, and current phone numbers of ambulance service, poison control center, fire station and the police shall be readily accessible to staff.

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**Editor's Notes**

6 CCR 1011-1 has been divided into separate chapters for ease of use. Versions prior to 05/01/2009 are located in the main section, 6 CCR 1011-1. Prior versions can be accessed from the All Versions list on the rule's current version page. To view versions effective on or after 05/01/2009, select the desired chapter, for example 6 CCR 1011-1 Chap 04 or 6 CCR 1011-1 Chap 18.

**History**

Chapter 6 entire rule eff. 04/01/2007.

Chapter 6 Sections 1.102, 1.103, 1.109 emer. rule eff. 06/18/2008; expired 09/18/2008.

Chapter 6 Sections 1.102, 1.103, 1.109 eff. 09/30/2008.

Chapter 6 Sections 1.101(2)(b), 1.103(3)(b) eff. 07/30/2010.

Chapter 6 Parts 1.101(2)(b), 1.102(4)-1.102(5), 1.102(10), 1.102(15), 1.102(18), 1.103(2)-1.103(3), 1.103(6), 1.106, 1.107(2), 1.108(4)(e), 1.108(7)(b), 1.109 eff. 08/14/2013; Chapter 6 Part 1.108(6)(h) repealed eff. 08/14/2013.