

## DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

### Health Facilities and Emergency Medical Services Division

## STANDARDS FOR HOSPITALS AND HEALTH FACILITIES: CHAPTER 18 - PSYCHIATRIC HOSPITALS

### 6 CCR 1011-1 Chap 18

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

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#### Part 1. STATUTORY AUTHORITY AND APPLICABILITY

##### 1.101 STATUTORY AUTHORITY

- (1) Authority to establish minimum standards through regulation and to administer and enforce such regulations is provided by Sections 25-1.5-103 and 25-3-101, C.R.S., et seq.

##### 1.102 APPLICABILITY

- (1) All psychiatric hospitals shall meet applicable federal and state statutes and regulations, including but not limited to:
  - (a) 6 CCR 1011-1, Chapter II.
  - (b) This Chapter XVIII.
  - (c) Provisions of 6 CCR 1011-1, Chapter IV, General Hospitals, as referenced herein.
- (2) Contracted services shall meet the standards established herein.

#### Part 2. DEFINITIONS.

The definitions under Chapter IV, Part 2, Definitions, apply unless context dictates otherwise. In addition, the following definitions shall apply:

- (1) "Psychiatric hospital" means a health facility planned, organized, operated, and maintained to provide facilities, beds, and services over a continuous period exceeding twenty-four (24) hours to individuals requiring early diagnosis and intensive and continued clinical therapy for mental illness. Services, including but not limited to, inpatient services, continuous nursing services, and necessary ancillary services, shall be provided twenty-four hours per day, seven days per week.
- (2) "Psychiatric emergency" means an acute disturbance of thought, mood, or behavior that requires an immediate intervention to protect the patient or others from harm.
- (3) "Psychiatric patient care unit" means a patient area which includes living, treatment, support, sleeping facilities and services designed and organized to provide adequate clinical management of patients.

## **Part 3. DEPARTMENT OVERSIGHT**

### **3.101 APPLICATION FEES.**

Nonrefundable fees shall be submitted to the department with an application for licensure as follows:

- (1) Initial License. (when such initial licensure is not a change of ownership). A license applicant shall submit a nonrefundable fee with an application for licensure as follows: base fee of \$5,700 and a per bed fee of \$50. The initial licensure fee shall not exceed \$10,500.
- (2) Renewal License. A license applicant shall submit a nonrefundable fee with an application for licensure as follows: base fee of \$1,600 and a per bed fee of \$12. The renewal fee shall not exceed \$8,000.
- (3) Change of Ownership. A license applicant shall submit a nonrefundable fee of \$2,500 with an application for licensure.
- (4) Provisional License. The license applicant may be issued a provisional license upon submittal of a nonrefundable fee of \$2,500. If a provisional license is issued, the provisional license fee shall be in addition to the initial license fee.
- (5) Conditional License. A facility that is issued a conditional license by the Department shall submit a nonrefundable fee ranging from 10 to 25 percent of its applicable renewal fee. The Department shall assess the fee based on the anticipated costs of monitoring compliance with the conditional license. If the conditional license is issued concurrent with the initial or renewal license, the conditional license fee shall be in addition to the initial or renewal license fee.

## **Part 4. FIRE SAFETY AND PHYSICAL PLANT STANDARDS**

### **4.101 COMPLIANCE WITH FGI GUIDELINES**

Effective July 1, 2013, all psychiatric hospitals shall be constructed in conformity with the standards adopted by the Director of the Division of Fire Prevention and Control (DFPC) at the Colorado Department of Public Safety. For construction initiated or systems installed on or after July 1, 2013, that affect patient health and safety and for which DFPC has no applicable standards, each facility shall conform to the relevant section(s) of the Guidelines for Design and Construction of Health Care Facilities, (2010 Edition), Facilities Guidelines Institute. The Guidelines for Design and Construction of Health Care Facilities, (2010 Edition), Facilities Guidelines Institute (FGI), is hereby incorporated by reference and excludes any later amendments to or editions of the Guidelines. The 2010 FGI Guidelines are available at no cost in a read only version at:

[http://openpub.realread.com/rrserver/browser?title=/FGI/2010\\_Guidelines](http://openpub.realread.com/rrserver/browser?title=/FGI/2010_Guidelines)

## **Part 5. FACILITY OPERATIONS.**

The facility shall provide services in accordance with Chapter IV Subpart 5.100 - Central Medical-Surgical Supply Services, Subpart 5.200 - Housekeeping Services, Subpart 5.300 - Maintenance Services, Subpart 5.400 - Waste Disposal Services, and Subpart 5.500 - Linen and Laundry Services.

## **Part 6. GOVERNANCE AND LEADERSHIP.**

The facility shall have a governing board, administrative officer, and medical staff in conformance with the standards established in Chapter IV, Part 6, Governance and Leadership, except that provisions regarding off campus locations, including without limitation, Section 6.102(6) shall not apply.

## **Part 7. PERSONNEL.**

The facility shall have a personnel department in conformance with the standards established in Chapter IV, Part 7, Personnel Department.

## **Part 8. MEDICAL RECORDS DEPARTMENT.**

The facility shall have a medical records department in conformance with the standards established in Chapter IV, Part 8, Medical Records Department. In addition to the aforementioned requirements, the facility shall comply with the following:

- (1) Medical/Surgical Services. If patients are transferred offsite for medical/surgical services, the circumstances and necessity for such transfer shall be documented in the patient's medical record.

## **Part 9. INFECTION CONTROL SERVICES.**

The facility shall have infection control services in conformance with the standards established in Chapter IV, Part 9, Infection Control Services. In addition to the aforementioned requirements, the facility shall comply with the following:

- (1) The medical staff shall judge which patients with communicable diseases are within the capacity of the hospital to treat. Patients with communicable diseases that the facility is not capable of treating shall be transferred to a general hospital for appropriate treatment.

## **Part 10. PATIENT RIGHTS.**

The facility shall be in compliance with 6 CCR 1011-1, Chapter II, Part 6.

## **Part 11. GENERAL PATIENT CARE SERVICES.**

The facility shall provide patient care services in conformance with the standards established in Chapter IV, Part 11, General Patient Care Services, Sections 11.101 and 11.102. In addition to the aforementioned requirements, the facility shall comply with the following:

### **11.102 PROGRAMMATIC FUNCTIONS**

- (1) Medical/Surgical Services
  - (a) The facility shall identify in writing the scope of medical/surgical care provided, including whether services are provided onsite or through contractual arrangements with offsite health care providers. the facility's admission criteria shall reflect its ability to meet the medical/surgical needs of the patient. Transfer protocols shall be developed and implemented for patients whose needs cannot be met by the facility.
  - (b) A qualified licensed independent practitioner shall provide a diagnostic medical examination for a patient upon admission and as needed for an inpatient who experiences a medical illness.
  - (c) Policies and procedures shall be written and implemented regarding when pre-admission assessments will be conducted to exclude medical etiology for mental illness symptoms.
- (2) The facility shall develop and implement a smoking policy in accordance with state and federal law.

- (3) The hospital shall have a system for summoning help from the immediate service area and other areas of the hospital in the event of an emergency.

#### **11.103 EQUIPMENT/FURNITURE AND SUPPLIES**

- (1) Patient bedrooms shall be equipped with furniture and equipment appropriate to the needs and safety of the patient to include, but not be limited to, for each patient:
- (a) a washable bed.
  - (b) a bedside table (or its equivalent).
  - (c) a cabinet.
  - (d) a noncombustible waste receptacle, either seamless or with a removable paper liner.
- (2) If medical/surgical services are provided, there shall be adequate equipment to provide such services.

#### **11.104 FACILITIES**

- (1) Patient care units shall be designed:
- (a) to maximize A home-like appearance by the use of appropriate color, design, and furniture.
  - (b) such that the capacity for self-injury is minimized.
- (2) Patient Bedrooms
- (a) There shall be provision for private or multiple-bed bedrooms to meet the needs of patients and the programs of the psychiatric hospital. For additions of previously uninspected or unlicensed square footage under the license and relocations in whole or in part to another physical plant for which the complete submission of construction plans and documents for plan review was received on or after July, 2011, there shall not be more than two patients per room.
  - (b) Each one-bed bedroom shall contain a minimum floor area of 100 square feet. Each multiple-bed bedroom shall contain a minimum floor area of 80 square feet per bed.
  - (c) The psychiatric hospital shall provide for privacy of patients in multiple-bed bedroom, by, for example, the use or arrangement of furnishings.
  - (d) Each patient bedroom shall have a window. A portion of the window shall be openable sufficient to provide adequate ventilation, unless a mechanical ventilation system is provided. A means of privacy and control of light shall be provided at each window.
  - (e) Artificial light shall be provided in each patient bedroom including: 1) general illumination; 2) other sources of sufficient illumination for reading and observations; and 3) silent operating switches.
  - (f) Each patient bedroom shall be provided with a separate closet space or locker adequate in size for the number of patients assigned to the room. In the case of new psychiatric hospital construction or modification of an existing psychiatric hospital facility, the closet space or locker must open into the patient room.

- (3) Toilet Facilities. Toilet facilities shall be provided in one of two ways:
- (a) Located immediately adjacent to private or multiple-bed bedrooms in the ratio of one facility for not more than four patient beds which include: 1) toilet; 2) incombustible waste paper receptacle, either seamless or with removable impervious liner, and 3) grab bars in some facilities and of a sufficient number to accommodate disabled patients.
  - (b) Separate men's and women's restrooms within the psychiatric patient care unit with toilets in a ratio of one toilet for not more than ten patient beds, providing partitions for privacy, and an incombustible wastepaper receptacle, either seamless or with a removable impervious liner, and grab bars available in some facilities, and of a sufficient number to accommodate disabled patients.
- (4) Handwashing Facilities. Handwashing facilities shall be provided in one of two ways:
- (a) A lavatory complete with soap and sanitary hand-drying accommodations be either provided in each patient bedroom or installed within the toilet room adjacent to bedrooms with no more than four patient beds per lavatory; or
  - (b) By the provision of separate men's and women's restrooms located in the patient care unit and containing a lavatory complete with soap and sanitary hand-drying accommodations in a ratio of at least one lavatory for each ten patient beds.
- (5) Bathing Facilities. Patient bathing facilities with adequate provision for privacy and safety shall be provided in the ratio of one tub or shower for each ten patients. Some bathing facilities shall have grab bars, and there shall be a sufficient number of facilities with grab bars to accommodate disabled patients. Wheelchair accessible facilities shall be available.
- (6) Storage
- (a) Each patient shall be provided with individual locked storage space which is readily accessible to patients at reasonable times. The psychiatric hospital shall establish policies which, if adhered to by patients, will protect patient property against theft or loss.
  - (b) A staff controlled, secured storage area shall be provided for patient's effects determined potentially harmful, such as cigarette lighters, nail files, and patient contraband.
- (7) Patient Care Support Facilities. A psychiatric patient care unit shall, as a minimum, contain or be reasonably accessible to the following patient care support facilities:
- (a) Day-rooms or group-rooms in the ratio of one facility for not more than 25 patient beds.
  - (b) A dining room sufficient in size to meet the needs of the program.
  - (c) An occupational therapy and recreation facility.
  - (d) Conference/interview rooms in the ratio of one facility for not more than 25 patient beds.
  - (e) Seclusion rooms, in the ratio of one seclusion room for not more than 25 patient beds, which shall:
    - (i) be equipped with means for direct observation of occupant, protected lighting source, and other features designed to accommodate a psychiatrically agitated patient.

- (ii) be at least 100 square feet,.
    - (iii) be mechanically ventilated quietly, at the rate of four room changes per hour (unless an outside window is available); air shall be diffused and at a comfortable temperature.
    - (iv) be free of hazardous equipment or devices.
    - (v) be designed to prevent patient hiding, escape, injury, or suicide.
    - (vi) Not have electrical switches or receptacles.
  - (f) A reasonably accessible telephone closet with a seat or telephone equipment enclosed so as to assure privacy.
- (8) Service Facilities. The following service areas shall be provided and located conveniently for patient care:
- (a) Patient care center (nursing station) which provides a communication system with other hospital departments.
  - (b) Medical record recording facilities.
  - (c) Medicine preparation area.
  - (d) Clinical supply area.
  - (e) Soiled linen holding area.
  - (f) Janitor's closet.
  - (g) Nourishment station.
  - (h) Clinical examination and treatment room.
  - (i) Clean linen area.
- (9) Nursing Station. The nursing station shall be adequately designed and equipped to meet patient care and program needs.
- (10) Medication Preparation Area
- (a) The medication preparation area shall, as a minimum, be equipped with:
    - 1) cabinets with suitable locking devices to protect drugs stored therein; 2) refrigerator equipped with thermometer and used exclusively for pharmaceutical storage and powered from the critical branch of the essential electrical system; 3) counter work space; 4) sink, with approved handwashing facilities; 5) antidote, incompatibility, and metri-apothecary conversion charts.
  - (b) Only medications, equipment, and supplies for their preparation and administration shall be stored in the medication preparation area. Test reagents, general disinfectants, cleaning agents, and other similar products shall not be stored in the medication preparation area.

- (11) Clinical Supply Area. There shall be a clinical supply area adequately designed and equipped to meet supply needs of the psychiatric patient care unit.
- (12) Clean Linen Area. There shall be a separate closed area with adequately designed supply space or a separate room for clean linen supplies.
- (13) Soiled Linen Holding Room. There shall be a soiled holding room equipped with: 1) suitable counter sink, mixing faucet, blade controls, soap and sanitary hand-drying facility. (In case of new hospital construction, or modification of an existing hospital facility, the sink must be two compartments); 2) waste container with cover (foot controlled recommended) and impervious disposable liner; 3) soiled linen cart or hamper with impervious liner; 4) adequate shelf and counter space; 5) a clinical flushing sink; 6) continuous mechanical exhaust ventilation to the outside.
- (14) Janitor's Closet. There shall be a janitor's closet equipped with:
  - 1) sink, preferably a floor receptor, with mixing faucet; 2) hook-strip for mop handles from which soiled mopheads have been removed; 3) shelving for cleaning materials; 4) approved handwashing facilities (in case of new hospital construction or modification of an existing hospital facility, the floor receptor cannot be considered as a handwashing facility); and 5) waste receptacle with impervious liner. The floor area should be adequate to store mop buckets on a roller carriage and floor cleaning equipment.
- (15) Nourishment Station
  - (a) A nourishment station where food is prepared shall include a sink equipped for handwashing, equipment for serving nourishment between scheduled meals, refrigerator, and provision for adequate storage.
  - (b) In the case of a patient care unit which includes a dining room conveniently located thereto, the dining room may be equipped to serve as the nourishment station.
- (16) Personnel Toilet Facilities. Toilet facilities shall be provided for personnel on each patient care unit.
- (17) Emergency Equipment and Supplies. The following shall be readily available at all times: 1) oxygen; 2) suction; 3) portable emergency equipment, supplies and medication; 4) automated external defibrillator.
- (18) When medical/surgical services are provided within the facility, there shall be adequate facilities to fulfill the professional, educational and administrative needs of the service.

## **Part 12. NURSING DEPARTMENT.**

The facility shall provide nursing services in conformance with the standards established in Chapter IV, Part 12, Nursing Services.

## **Part 13. PHARMACEUTICALSERVICES.**

The facility shall provide pharmaceutical services in conformance with the standards established in Chapter IV, Part 13, Pharmaceutical Services.

**Part 14. CLINICAL PATHOLOGY SERVICES.**

The facility shall provide clinical pathology services in conformance with the standards established in Chapter IV, Subpart 14.100 Clinical Pathology.

**Part 15. DIAGNOSTIC IMAGING SERVICES.**

The facility shall provide diagnostic imaging services in conformance with the standards established in Chapter IV, Part 15, Diagnostic Imaging Services.

**Part 16. DIETARY SERVICES.**

The facility shall provide dietary services in conformance with the standards established in Chapter IV, Part 16, Dietary Services.

**Part 17. ANESTHESIA SERVICES.**

The facility may provide anesthesia services. If such services are provided, they shall be in conformance with the standards established in Chapter IV, Part 17, Anesthesia Services. In addition to the aforementioned requirements, the facility shall comply with the following:

**17.101 ORGANIZATION AND STAFFING. Reserved.**

**17.102 PROGRAMMATIC FUNCTIONS**

- (1) Electroconvulsive therapy. In facilities in which anesthetic agents are used in electroconvulsive therapy, the administration of anesthesia shall be consistent with written policies and procedures.

**Part 18. OUTPATIENT PSYCHIATRIC EMERGENCY SERVICES**

**18.101 ORGANIZATION AND STAFFING**

- (1) The facility may provide outpatient emergency psychiatric services; however, if the facility does not provide such services it shall develop and implement a written plan regarding the referral to available treatment options for persons who inquire or patients who present for such services. The following standards apply only if the facility provides outpatient psychiatric emergency services.
- (2) The facility shall define, in writing, the scope of outpatient psychiatric emergency services provided by the facility, which may include but are not limited to: triage, comprehensive psychiatric assessment, crisis stabilization, and linkages to ongoing mental health services.
- (3) Outpatient emergency psychiatric services shall be under the direction of a physician who is board eligible or certified in psychiatry.
- (4) Provision shall be made for physician and registered nurse coverage at all hours.
- (5) There shall be sufficient medical, nursing, and other qualified staff with the core competencies necessary to provide for the evaluation and management of psychiatric patients and provide that patients are seen within a period of reasonable time relative to the severity of the psychiatric emergency.
- (6) A roster of on-call personnel, including alternates, shall be posted at all times.



### **18.102 PROGRAMMATIC FUNCTIONS**

- (1) Written policies and procedures shall be developed and implemented for the care of outpatient psychiatric emergencies, including but not limited to:
  - (a) core competencies required for patient care responsibilities.
  - (b) admission and discharge compliant with involuntary commitment law and regulation.
  - (c) accessing additional staff to meet unanticipated needs.
  - (d) the assessment and management of patients with the following behaviors: parasuicidal, suicidal, agitated or violent.
  - (e) patients who present in a state of intoxication.
- (2) Outpatient emergency psychiatric services shall be integrated with other services of the hospital, as appropriate.
- (3) A poison control chart and information providing the location and telephone number of the nearest poison control center shall be posted prominently in the emergency unit.

### **18.103 EQUIPMENT AND SUPPLIES**

- (1) There shall be sufficient equipment and supplies needed to provide adequate crisis stabilization and management of patients.

### **18.104 FACILITIES**

- (1) There shall sufficient space to provide adequate crisis stabilization and management of patients.
- (2) The following public facilities shall be available:
  - (a) An area for conducting interviews with individuals and families.
  - (b) A reception and control area.
  - (c) Communication facilities.
  - (d) A public waiting area with telephone, drinking fountain and toilet facilities.

## **Part 19. OUTPATIENTSERVICES.**

The facility shall provide outpatient services in conformance with the standards established in Chapter IV, Part 19, Outpatient Services. In addition to the aforementioned requirements, the facility shall comply with the following:

### **19.101 ORGANIZATION AND STAFFING**

- (1) Outpatient services shall develop client life skills to maximize individual functioning and include but not be limited to, diagnostic evaluation, individual or group therapy, consultation, and rehabilitative services.

**19.102 PROGRAMMATIC FUNCTIONS. Reserved.**

**19.103 EQUIPMENT. Reserved.**

**19.104 FACILITIES**

- (1) In addition to appropriate interview and treatment facilities, the following shall be provided: 1) a waiting area; 2) public toilet facilities; 3) public phone; and 4) drinking fountain.

**Parts 20 TO 24. Reserved.**

**Part 25. CHILD AND ADOLESCENT SERVICES.**

The facility may provide children and adolescent services. If such services are provided, they shall be in conformance with the standards established in Chapter IV, Part 25, Pediatric Services.

**Part 26. PSYCHIATRIC PATIENT CARE SERVICES.**

The facility shall provide psychiatric patient care services in conformance with the standards established in Chapter IV, Part 26, Psychiatric Patient Care Services, Sections 26.101, and 26.102.

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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 18-31 eff. 01/30/2008.

Chapter 18 Parts 6.6 – 6.7, 6.9.1, 6.11.4, 6.18.1, 15.34, 17, 19.10, 31, 32 eff. 05/15/2008.

Chapter 18 Section 32.2.5 eff. 11/30/2008.

Chapter 18 entire rule eff. 06/30/2011.

Chapter 18 Parts 4, 11.104(2) – 11.104(3) eff. 08/14/2013.