

**MINIMUM STANDARDS**

**RULES AND**

**REGULATIONS**

of the

**STATE DEPARTMENT**

**OF HEALTH**

for the

**LICENSING OF NURSING**

**HOMES**

Article IV

Part 3



September 23, 1953

The Twenty-first Legislature of the State of Arizona passed in regular session House Bill Number 134; Chapter 130, An Act relating to nursing homes; providing for the inspection, regulation and licensing thereof, and providing for an Advisory Council.

On the recommendation of the Nursing Home Advisory Council the State Department of Health adopted the following rules and regulations for the licensing of nursing homes on September 23, 1953.

## **TITLE OF ACT**

An Act relating to Nursing Homes; providing for the Inspection, Regulation and Licensing thereof; providing for a Advisory Council; and prescribing penalties.

## **DEFINITION**

A nursing home is defined as an institution which gives nursing care to two or more unrelated persons. The term nursing home includes sanatoriums, rest-homes, nursing homes, homes for aged and infirm persons, and related institutions which render nursing care, but which do not receive acutely ill patients or patients such as surgical or maternity cases.

## **NURSING HOME LICENSE**

No person, partnership, association or corporation, nor any state, county or local governmental units, nor any division, department, board or agency thereof, shall establish, conduct, or maintain in the State of Arizona any nursing home, rest-home, sanatorium, home for the aged or infirm or related institution for the care of two or more non-related human beings without first obtaining a license in the manner provided hereinafter.

The State Department of Health shall issue a nursing home license to an institution which complies with the provisions of the act.

Existing nursing homes to obtain licenses: No persons, partnership, association or corporation, nor any state, county or local government units, nor any division, department, board or agency thereof, may continue to operate an existing nursing home, rest-home, sanatorium, home for the aged or infirm or related institution after June 30, 1953, unless such operation shall have been approved and regularly licensed by the State Department of Health.

## **APPLICATION FOR LICENSE**

Any person, partnership, association, or corporation, including state, county or local governmental units, or any division, department, board, or agency thereof, desiring a license hereunder shall apply to the State Department of Health on a prescribed form which shall state:

1. The full name and address of the institution for which a license is sought.
2. The full name and address of the owners.
3. The names of persons who control the institution, and the type of institution to be operated.

4. Such other information as the State Department of Health may deem necessary.
5. The application shall be signed, in the case of an individual or partnership, by the owner of the institution; in the case of a corporation, by two of the officers thereof, and, in the case of a governmental unit, by the head of the governmental department having jurisdiction thereof.
6. The application shall be filed under oath with the State Department of Health and a fee of five dollars (\$5.00) paid. In the event license is denied, the fee shall be refunded to the applicant.
7. To receive approval for a license the institution must meet the standards set up in the rules and regulations with relation to construction, sanitation, lighting, ventilation, fire protection, accommodation for patients, and personnel requirements.
8. License shall be issued only for the premises and to the persons named in the application and shall not be transferrable or assignable.
9. A license shall expire one year from the date of issuance, and a fee of five dollars (\$5.00) shall be charged for the renewal thereof.
10. Each institution shall post its license in a conspicuous place.

### **DENIAL, SUSPENSION AND REVOCATION OF LICENSE**

The State Department of Health may deny, suspend, or revoke the license of any institution issued under the provisions of this Act which:

1. Violates any provision of this Act or the rules and regulations adopted thereunder.
2. Permits, aids or abets the commission of an unlawful act.
3. Indulges in conduct or practice detrimental to the health or safety of the patients or employees of the institution.

“When the State Department of Health denies, suspends or revokes a license it shall send notice hereof, by registered mail, to the nursing home concerned, setting forth the reasons for the action taken. Within thirty (30) days after the date of notice, the applicant or licensee may give written notice of desire for hearing, and a hearing, at which the applicant or licensee shall have the right to present evidence, shall be held before the state board of health. The state board of health shall render its decision on the basis of the evidence presented and shall send a copy thereof by registered mail to the applicant or licensee. The decision shall be final, subject to the right of appeal.”

Hearing before the state board of health shall be conducted according to the rules and regulations adopted by the State Department of Health with the advice of the hospital advisory council. A record of the proceeding shall be kept but need not be transcribed unless the decision is appealed or a transcript is requested by an interested party, who shall bear the cost of transcription.

Witnesses may be subpoenaed by either party to the hearing and shall receive the fees and mileage allowed a witness in civil cases.

## **APPEAL**

Within thirty (30) days from the date of a decision by the board, an applicant or licensee may appeal the decision to the superior court of the county in which the institution concerned is situated. The board shall certify and file with the clerk of the court a transcript of the hearing.

Findings of fact made by the board shall be deemed conclusive unless contrary to the weight of evidence. The court may remand the case to the board for further evidence or for rehearing or may affirm, modify or reverse the decision of the board. Appeal from the decision may be taken by either party.

## **MINIMUM STANDARDS — RULES AND REGULATIONS**

The owner and/or operator shall be responsible for maintaining a desirable standard of resident care and environmental sanitation.

### **I. LOCATION**

1. Nursing homes should be located so that objectionable environmental factors are reduced to a minimum.
2. The location should be accessible to medical services.
3. There shall be at least one telephone on the premises, and such extensions as may be necessary for emergency.

### **II. CONSTRUCTION**

1. The walls, floors and ceiling should be constructed of material that will permit frequent washing, cleaning and painting.
2. The construction of the building should prevent the entrance and harborage of rodents, insects, etc.
3. All buildings shall be kept in good repair so far as this relates to comfort and safety of its occupants.

4. Patients' rooms shall have not less than one window with unobstructed natural light. The number of windows will depend upon the number of patients in the room. Windows shall open and close easily.
5. All stairs and ramps shall be provided with handrails. All open stairways shall be protected with guard rails.
6. Plans shall be submitted to the State Department of Health for review and approval before construction is begun or contracts awarded for any new buildings, additions or major alterations to existing buildings, or any material changes in facilities, involving patient care. Approval must be given to owner and/or operator before any construction work is started.

### III. SANITATION

1. There shall be an ample supply of water of a safe, sanitary quality. The water supply shall be obtained from a system approved by the State Department of Health.
2. Hot and cold water under pressure shall be distributed through taps, conveniently located in the building.
3. Sewage and other liquid wastes shall be discharged into a public sewage system where such a system is available; or the sewage and other liquid wastes shall be collected, treated and/or disposed of in an independent sewerage system which meets the approval of the State Department of Health.
4. Toilet stools, lavatories and baths shall be provided in reasonable ratio to the number and kind of patients cared for in the institution.
5. The plumbing fixtures provided for the disposal of excreta, infectious discharges, and institutional wastes shall be in accordance with local regulations.
6. All garbage shall be kept in tight, non-absorbent, and easily washable containers which shall be covered with close-fitting covers while pending removal.
7. All garbage, trash, and other waste material shall be removed from the premises as frequently as may be necessary to prevent nuisance and unsightliness and shall be disposed of in a manner approved by the state or local health department.
8. All outside doors, windows and other openings shall be effectively screened with wire screen. All screen doors shall open outward and shall be equipped with a self closing device.
9. Floors, walls and ceilings shall be maintained in a clean and sanitary condition.

10. The kitchen and other rooms in which food is prepared and served shall meet the requirements for not less than Grade B in the 1943 edition of the United States Public Health Service Ordinance and Code Regulating Eating and Drinking Establishments, or local regulations.
11. All patients trays set up with dishes before meals shall have cups and glasses inverted and the plates inverted over silverware, or else the whole tray shall be covered with a clean cloth.
12. A separate storage space should be provided for mops, brooms, and other cleaning equipment.

#### IV. LIGHTING

1. Adequate natural and artificial lighting shall be provided in each occupant's room. Every room, including store rooms and basement, must have sufficient artificial lighting. It is especially important that hallways, stairways, ramps, entrances and medicine cabinets shall be well lighted day and night in order to prevent accidents.
2. Lighting fixtures should be selected and located with a view to the comfort and safety of patients and personnel.
3. Emergency lights, such as battery flash lights, shall be provided and located so as to be readily available to employees on duty. No open flame lights shall be used.

#### V. VENTILATION

1. Buildings shall be adequately ventilated at all times and heated or cooled as the season requires.
2. Stoves, individual room heaters, hot water heaters, and ranges **must** be adequately vented to carry the products of combustion to the outside atmosphere.
3. All heating units **must** be provided with a sufficient supply of outside air to support combustion.
4. There shall be a cut-off valve in the rigid pipes for all gas stoves and hot plates.

#### VI. FIRE PROTECTION

1. Every effort shall be made to eliminate fire hazards in connection with the buildings by complying with requirements of local ordinances and suggestions of the local fire department.
2. Fire inspections shall be made at least once each year by the Fire Department having jurisdiction.
3. All parts of the heating system shall be installed and maintained so as to reduce fire hazards.

4. Heating appliances shall be properly vented with a return fresh air vent and shall be attached by rigid pipe. No portable heaters of any kind shall be used.
5. Empty boxes, papers, old clothes, and other combustible materials shall not be allowed to accumulate in store rooms, basements, attics, lockers and closets.
6. Paints, varnishes, oil, oily cloths and similar substances shall be stored in covered metal containers away from patients' rooms.
7. Heating apparatus and boiler and furnace rooms, basements, work rooms such as carpenter, paint and upholstery rooms, and storerooms for combustible materials shall be classified as hazardous areas.
8. Hazardous areas named in (7) shall be separated from other areas by construction having at least a one hour fire resistant rating.
9. Fire extinguishers shall be approved by the Fire Department having jurisdiction and shall be so located that a person shall not have to travel more than 75 feet from any point to reach the nearest fire extinguisher. An additional extinguisher shall be provided in or adjacent to the kitchen and basement storage room.
10. Each occupied floor of the building shall have more than one exit leading to the outside of the building and should be located as near opposite ends of the building as possible. Exit doors shall swing with egress travel and shall be of such number and so located that the distance travel from one door of any occupied room shall not exceed fifty feet.
11. Except at doors leading obviously to the outside, "Exit" signs shall be placed at each exit opening and directional signs when needed.
12. Corridors and passageways used as exits shall be at least 36 inches in width, and unobstructed at all times.
13. The aggregate width of exit stairs and ramps shall be such as to provide sufficient 22-inch exit units, at the rate of fifteen persons per exit unit for the maximum number of persons that may occupy any floor. Minimum width of doors to be not less than 36 inches.
14. Lighting shall be by electricity and shall be maintained in a safe condition. No extension cords shall be used. There shall be an exterior service disconnect switch provided.
15. All verticle openings such as laundry chutes, dumbwaiter shafts, and interior stairways shall be enclosed, by partitions and doors with a fire resistant rating of at least one hour. No storage under stairs unless of one hour fire resistant construction.

16. Walls and ceiling surfaces shall be nonflammable or treated to prevent flame spread.
17. All combustible decorative and acoustical material, including textile floor coverings and curtains in corridors, passageways, or stairway enclosures and in lobbies, or other rooms or spaces used for visitors or occupants shall be rendered and maintained flame proof.
18. Every nursing home, convalescent home or old age home, shall have an evacuation plan and every employee shall be instructed and kept informed respecting their duties under the plan.
19. Smoking shall be permitted where proper facilities are provided. Smoking shall not be permitted in sleeping areas unless proper supervision is provided.
20. There shall be at least one attendant on duty at all times and at least one standby attendant for each 25 persons or fraction thereof, if within an area served by a fire department. If outside a protected area, there shall be one attendant on duty, awake, and at least one standby attendant for each 15 persons or fraction thereof.

## **VII. PATIENT ACCOMMODATION**

1. Multiple bed rooms shall be of sufficient size to allow not less than sixty (60) square feet of floor space per bed, with at least three (3) feet between beds. Single rooms should have at least 100 square feet. Non-ambulant patients shall be on first floor only and no patient bed room shall be in basements.
2. Nursing homes are limited to the number of patients specified on the license.
3. A sitting room, with a sufficient number of comfortable chairs, should be provided for ambulatory patients. This room should have facilities for games and other types of recreation.
4. It is recommended that a dining area be provided for ambulatory patients.
5. Individual beds shall be used.
6. A clean, sanitary mattress and pillow must be provided for each patient. Moisture proof covers shall be provided when necessary to keep mattresses clean and pillows dry. Mattresses and pillows shall be aired out of doors before being used by another patient.
7. A sufficient supply of clean bedding and bed linen shall be kept on hand for use at all times. Individual towels, wash cloths and bedpan covers must be provided for each patient.

8. Beds, bedside tables and other furniture used by patients shall be kept clean.
9. There shall be a satisfactory storage space for clothing, toilet articles and other personal belongings of patients.
10. It is recommended that means of signaling attendance should be provided at the bedside of each patient, who is confined to bed.
11. There shall be a sufficient number of wash basins, mouthwash cups, drinking glasses, urinals and bedpans, clearly marked, for use of each bed patient. When utensils are treated with an approved disinfectant after each use, individual ones need not be used.
12. There shall be a sufficient number of thermometers to permit disinfection before use.
13. Hot water bottles must be covered before being placed in beds. Great care should be exercised in using hot water bottles to see that water is not too hot and bags are not leaking. An uncovered hot water bag must not be placed in direct contact with the body of a patient. Great care shall be taken in checking and using electric hot pads.
14. Supplies and equipment for first aid must be available at all times.
15. There shall be space and facilities for cleaning and storing nursing supplies and other equipment.
16. Medicines, solutions and prescriptions shall be clearly and accurately labeled and stored in a locked cabinet. Out-dated medications and old prescriptions shall be destroyed.
17. Arrangements shall be made to secure sterile dressings as required.
18. An adequate diet shall be furnished to all patients, according to their needs.
19. No patient shall be restrained except on written and signed order of a physician. If a patient becomes suddenly disturbed, so that he becomes a menace to himself or others, safe restraint may be applied by the person in charge, but the physician's order shall be secured at the earliest possible opportunity. In applying restraints consideration should be given to the method so they can be speedily removed in case of fire or other emergency.
20. It is recommended that the nursing home operator obtain a statement from a physician on the health condition and needs of a patient on admission.