

OUTPATIENT TREATMENT CENTER GUIDELINE  
UNCLASSIFIED RULES  
ARIZONA ADMINISTRATIVE CODE R9-10-115  
**OUTPATIENT TREATMENT  
CENTER GUIDE**

**Points all Licensed providers will want to be alerted to:**

- There must always be a designated person in charge who know the operation and the survey process.
- Once the surveyors arrive the survey will be completed without delay.
- Entrance conference will take place with the designated person.
- Exit conference will occur at the end of the survey process to share the findings at the time of the survey.
- The survey process is completed annually. The onsite survey will occur at sometime within the licensing period. The survey is unannounced.
- If the survey process determines there are no deficient practices the licensee will not have a compliance survey in the following 12 month licensing period.

**Responses to common questions regarding licensing:**

- Yes, the licensee must keep the department informed of all changes related to hours of operation and days of operation. The surveys are unannounced and the onsite survey schedule is based on the documented hours and days of operation.
- Yes, contact names, phone numbers, and email addresses must be kept current. This is important so that you easily contacted when communication needs to occur between the department and the licensee. Emails can be utilized for emergency public notices. Names and addresses are utilized to send reminders for the application process and other changes that may occur within the licensing rules and statutes.
- Yes, all modification to the licensed space must be reported to the department with an updated floor plan. There are requirements that the space must be contiguous and that there is no cross over between licensed and unlicensed space.
- Yes, the licensee must inform the department of added services that expand your scope of services from the documentation submitted in the initial application or renewal application. Added services may require a focused survey.
- No, the survey cannot be delayed or postponed due to the owner not being present at the time the surveyor arrives to the facility.

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**Example of documents that may be reviewed during the survey process:**

(This basic documentation list will vary based on the scope of services provided and is not an all inclusive list.)

- Organizational Chart
- Policy and Procedure Manuals
- List of all personnel and titles/positions
  - Personnel files will be randomly selected from personnel listed as well as interviews conducted with staff present during the survey process
- Medical Staff Credential files
- Advanced Practitioners credentials
- Job Descriptions
- Preventative Maintenance Logs
- List of all patient seen for a designated period of time
  - Medical records will be randomly selected and reviewed
    - Current patients
    - Past patients
- Fire Inspection reports
- Staff meeting minutes
- Education documentation
- Contract list
  - Current contracts
  - Description of services provided and accountability
- Disaster plans
  - Surveyor will review drill documentation
    - Number of drills
    - Timing of drills
    - Participants in the drills
    - Facility evaluation of the drills
    - Action Plans
- Current floor plans
  - Demonstrate the licensed space and patient flow
- Sterilization Logs
- CLIA Waiver if performing onsite testing (point of care or other testing processes)

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For each of the following rules there are some identified elements that would be recommended that the licensee review on an ongoing basis to maintain compliance. This cannot be an all inclusive list due to the evolving healthcare environment and the changes in the scope and services provided.

**AAC R9-10-115.1**

Be adequately equipped and staffed by qualified personnel to meet the needs and assure the safety of persons attending the facility and conform to all applicable statutory requirements for the provision of health care.

- Adequately equipped - Each licensee must evaluate the scope of services and identify the equipment necessary to provide the services and have that equipment available to meet the patient care needs.
  - Amount of equipment available based on volume
  - Type of equipment available based on services
  - Emergency equipment to meet patient needs and stabilize the patient until a higher level of service is available
  - Equipment functions according to the manufactures guidelines
  - Personnel are trained to use the equipment
- Staffed by Qualified Personnel
  - Job descriptions that define the role of all types of personnel
  - Personnel files that include:
    - Resumes
    - Applications
    - Education
    - Experience
    - Competencies
    - Credentials
    - Licenses
    - Certifications
    - Orientation to the licensee's policies and procedures and environment
- Safety of Persons
  - Personnel Protective Supplies/Equipment available and utilized as appropriate
  - Hazardous waste control
  - Supplies stored in a clean environment
  - Laboratory specimens obtained and placed appropriately to avoid contamination
  - Physical Environment maintained in a safe manner
  - Sterilization procedures followed
    - Autoclave testing according to the manufactures guidelines
  - Medications maintained in a safe environment
    - Secured
    - Limited access - Available to only authorized personnel
    - Correct temperature
    - No expired medications

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**ARC R9-10-115.2**

Establish and maintain a record of each inpatient and outpatient documenting the assessment of the patient's health needs and all health care services the patient receives.

- Maintain a record of assessment and all health care services
  - Content of patient records
    - Assessments by designated personnel
    - Services by designated personnel
    - Treatments provided
    - Evaluation of care and treatment
    - Plans
    - Instructions
    - Follow up services and directions
    - Consents
  - All records must be maintained onsite for at least one year
  - All patient records must be secured and controlled with access to only authorized personnel

**ARC R9-10-115.3**

Maintain all parts of the facility, including its premises and equipment, neat, clean, free of insects, rodents, litter and rubbish. Policies and procedures shall be established and implement for cleaning, sanitizing or sterilizing equipment.

- Facility Maintenance
  - Includes physical plant - patient care areas - equipment
  - Policies and Procedures that cover all elements in the rule
    - Patient care areas - equipment - laundry
      - Cleaning
      - Sanitizing
      - Sterilizing
  - Implementation and Evaluation of effectiveness of the policy and procedure
    - Observation
      - Neat - free of clutter
      - Clean
      - Free of Insects and/or rodents
      - Free of litter
      - Free of trash

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**ARC R9-10-115.4.**

Cause the facility's physical plant and equipment to be periodically inspected and, where appropriate, tested, calibrated, services or repaired to assure that they are functioning properly and reliably. Records shall be maintained to assure that appropriate inspections and maintenance of equipment is periodically accomplished by an appropriately qualified person.

- This rule includes both the physical plant and the equipment
- Policy and procedure for how the physical plant and equipment is to be maintained
- Procedure as to the process for repairing equipment and physical plant
- Education to personnel to know what to do when equipment and the physical plant is identified as needing repair
- Competency of the personnel who are accountable for the repairs
- If completed through contract will need to know if the contracted agency or individuals are competent to complete the repairs
- Documentation of all maintenance must be maintained and available on site
- Electrical safety needs to be considered with this rule
- Observation maintain compliance
  - Tour physical plant
    - Flooring in good repair
    - Walls in good repair and clean
    - Furniture in good repair
    - Use of extension cords limited and safe
    - No frayed electrical cords
    - No exposed wired
    - No fire hazards
- Review for Competency
  - Identify who is doing the repairs and maintenance
    - Experience
    - Background
    - Quality check
    - Awareness of manufactures requirements/guidelines

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**AAC R9-10-115.5.**

Comply with applicable regulations adopted pursuant to ARS 36-136(G) for the control of communicable disease and maintenance of proper sanitation.

- Policy and Procedure for the reporting of communicable diseases
- Individual(s) accountable for the reporting
- Documentation of the reporting and tracking of communicable diseases

**AAC R9-10-115.6.**

Comply with applicable fire and building codes.

- Fire Inspections current
- Fire Extinguishers maintained
- Oxygen tanks maintained
- Exit lights operational
- Hallways free of debris and have clear passage
- Exit door free of obstructions

**AAC R9-10115.7.**

Adopt policies and procedures that delineate the scope of services offered; hours of operations, admission and discharge criteria and type of staff provided.

- Scope of service is defined
  - Hours of operation
  - Days of operation
  - Types of services provided
  - Level of personnel required to provide the services
  - Admission criteria defined
  - Discharge criteria defined

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