ARTICLE 14
BEHAVIORAL HEALTH SPECIALIZED TRANSITIONAL FACILITY

R9-10-1401. Definitions Repealed

R9-10-1402. Administration
A. A governing authority shall:
   1. Consist of one or more persons responsible for the organization and administration of the behavioral health specialized transitional facility;
   2. Adopt policies and procedures for the operation of the behavioral health specialized transitional facility to ensure compliance with state laws, rules, and local ordinances;
   3. Require that policies and procedures be reviewed and, if necessary, updated at least once every 24 months;
   4. Designate the scope of services to be provided by the behavioral health specialized transitional facility;
   5. Appoint an administrator who:
      a. Has a master’s degree or higher in health care administration or a behavioral health field, and
      b. Has the authority and responsibility for managing the behavioral health specialized transitional facility;
   6. Appoint an acting administrator if the administrator will be absent from the behavioral health specialized transitional facility for 30 or more consecutive days;
   7. Except as specified in subsection (A)(6), notify the Department according to § A.R.S. 36-425(I) when there is a change of administrator and provide the name and qualifications of the new administrator;
   8. Appoint a clinical director to direct the medical, nursing, or behavioral health services provided by or at the behavioral health specialized transitional facility who:
      a. Is a psychiatrist, and
      b. Has at least two years of experience providing medical services in an organized psychiatric services unit of a hospital or in a behavioral health inpatient facility;
   11. Approve contracted services or designate an individual to approve contracted services;
   12. Ensure that research is conducted in compliance with U.S. Health and Human Services, Office for Human Research Protections guidelines; and
B. An administrator shall:

1. Be responsible to the governing authority;
2. Designate, in writing, an individual who is available and accountable for services provided by the behavioral health specialized transitional facility when the administrator is not available for a period of less than 30 consecutive days;
3. Develop, document, and implement policies and procedures that:
   a. Include personnel job descriptions, duties, and qualifications including required education, experience, skills, and knowledge for employees, volunteers, and interns;
   b. Cover orientation and in-service education for employees, volunteers, and interns;
   c. Cover staffing and recordkeeping;
   d. Cover patient admission, assessment, treatment plan, transfer, discharge planning, discharge, and recordkeeping;
   e. Cover patient rights and responsibilities;
   f. Cover storage space for a patient’s personal possessions;
   g. Cover the requirements in A.R.S. §§ 36-3708, 36-3709, and 36-3714;
   h. Establish the process for warning an identified or identifiable individual, as described in A.R.S. § 36-517.02 (B)( through (C), if a patient communicates to a personnel member a threat of imminent serious physical harm or death to the identified or identifiable individual and the patient has the apparent intent and ability to carry out the threat;
   i. Cover when informed consent is required and how informed consent is obtained;
   j. Cover the criteria and process for conducting research using patients or patient records;
   k. Include the establishment of, disbursing from, and recordkeeping for a patient personal funds account;
   l. Include a method of patient identification to ensure a patient receives the services ordered for the patient;
   m. Cover contracted services;
   n. Cover health care directives;
   o. Cover medication procurement, storage, inventory monitoring and control, and disposal;
   p. Cover food services, housekeeping, maintenance, and infection control;
q. Cover reporting suspected or alleged abuse, neglect, exploitation, or other criminal activity;

r. Cover quality management, including incident documentation;

s. Cover emergency treatment and disaster plan;

t. Cover restraint and seclusion;

u. Include security of the facility, patients and their possessions, personnel members, and visitors at the behavioral health specialized transitional facility;

v. Include preventing unauthorized patient absences;

w. Cover transportation of patients, including the criteria for using a locking mechanism to restrict a patient's movement during transport;

x. Cover the receipt of and process for resolving complaints;

y. Cover visitation, telephone usage, sending or receiving mail, computer usage, and other recreational activities; and

z. Include equipment inspection and maintenance;

4. Ensure that policies and procedures are available to each personnel member;

5. Ensure that:

a. Laboratory services are provided by a laboratory that holds a certificate of accreditation or certificate of compliance issued by the U.S. Department of Health and Human Services under the 1988 amendments to the Clinical Laboratories Improvement Act of 1967, and

d. Food services are provided as specified in R9-10-114;

6. Ensure that the following individuals have immediate access to a patient:

a. The patient’s representative,

b. An individual assigned by a court of law to provide services to the patient, and

c. An attorney hired by the patient or patient’s family;

7. Ensure that labor performed by a patient for the behavioral health specialized transitional facility is consistent with A.R.S. § 36-510 and applicable state and federal law;

8. Ensure that the following information is posted in an area easily viewed by a patient or an individual entering or leaving the behavioral health specialized transitional facility:

a. Patient rights,

b. Telephone number for the Department and the Office of Human Rights,

c. Location of inspection reports,

d. Complaint procedures, and

e. Visitation hours and procedures;
9. Notify the Department in writing:
   a. Within one working day after a patient's death in the behavioral health specialized transitional facility;
   b. Within two working days after a patient's suicide attempt or infliction of self-injury in the behavioral health specialized transitional facility that results in the patient needing medical services;
   c. Within three working days after a patient has an accident, emergency, or serious injury that results in the patient needing medical services; and
   d. Within one working day after an unauthorized patient absence from the behavioral health specialized transitional facility is discovered;

10. Maintain the documentation required in subsection (B)(9) for at least 12 months after the date of the notification;

11. Ensure that sufficient personnel are present at the behavioral health specialized transitional facility at all times to maintain safe and secure conditions;

12. Ensure that:
   a. Suspected or alleged abuse, neglect, exploitation, or other criminal activity that occurs on the premises of the behavioral health specialized transitional facility is reported to the law enforcement agency having jurisdiction;
   b. If abuse, neglect, or exploitation of a patient is alleged or suspected, immediate action is taken to stop the alleged or suspected abuse, neglect, or exploitation;
   c. Suspected or alleged abuse, neglect, or exploitation is investigated and a written report of the investigation is developed within 48 hours after the report required in subsection (B)(12)(a) that includes:
      i. Dates, times, and description of the alleged or suspected abuse, neglect, or exploitation;
      ii. Description of any injury to the patient and any change to the patient's physical, cognitive, functional, or emotional condition;
      iii. Names of witnesses to the alleged or suspected abuse, neglect, or exploitation; and
      iv. Actions taken by the administrator to prevent the alleged or suspected abuse, neglect, or exploitation from occurring in the future;
   d. A copy of the investigation report required in subsection (B)(12)(c) is submitted to the Department within 48 hours after the report in subsection (B)(12)(a); and
C. A clinical director shall:
   1. Be responsible for the medical services, nursing services, behavioral health services, and health-related services provided to patients;
   2. Ensure that policies and procedures are developed, documented, and implemented that establish:
      a. Criteria and methodologies for assessing the competency and proficiency of a personnel member for each type of service the personnel member provides and each type of patient to which the personnel member is assigned;
      b. Criteria and methodologies for providing:
         i. Supervision to behavioral health paraprofessionals, consistent with R9-10-114(1); and
         ii. Clinical oversight to behavioral health technicians, consistent with R9-10-114(2);
      c. Qualifications for personnel members who provide clinical oversight;
      d. Requirements for the use of restraint or seclusion, consistent with R9-10-316;
      e. The process for patient assessments including the identification of and criteria for the on-going monitoring of a patient’s:
         i. Behavioral health issues,
         ii. Mental disorders, as defined in A.R.S. § 36-501, and
         iii. Physical health conditions;
      f. The process for developing and implementing a patient's treatment plan;
      g. The frequency of and process for reviewing and modifying a patient’s treatment plan, based on the ongoing monitoring of the patient’s response to treatment;
      h. The process for determining whether a patient is eligible for discharge or conditional release to a less restrictive alternative;
      i j. The process for warning an identified or identifiable individual, as described in A.R.S. § 36-517.02(B) through (C), if a patient communicates to a medical staff member or personnel member a threat of imminent serious physical harm or death to the individual and the patient has the apparent intent and ability to carry out the threat;
j. The requirements for dispensing and administration of medications, including the process and criteria for determining whether a patient is capable of and eligible to self-administer medication;

k. The requirements for completion of medication records and recording of adverse events; and

l. The process by which emergency medical treatment will be provided to a patient;

3. Ensure that patient services are provided by personnel competent and proficient in providing the services;

4. Ensure that clinical oversight of personnel members is provided according to the behavioral health specialized transitional facility’s policies and procedures;

5. Ensure that a daily staffing schedule is developed, documented, and implemented that:
   a. Indicates the date, scheduled work hours, and name of each personnel member assigned to work, including on-call personnel members;
   b. Includes documentation of the personnel members who work each day and the hours worked by each personnel member;
   c. Ensures that:
      i. Sufficient personnel members are available to meet the needs of patients of the behavioral health specialized transitional facility;
      ii. A behavioral health medical practitioner is available to admit a patient to the behavioral health specialized transitional facility; and
      iii. A registered nurse is available at all times; and
   d. Is maintained for at least 12 months after the last date on the daily staffing schedule; and

6. Appoint at least one nursing supervisor who is a registered nurse.

R9-10-1403. Contracted Services
An administrator shall ensure that:

1. A contractor provides contracted services according to the applicable requirements in this Article;

2. A contract specifies the responsibilities of the contractor and the behavioral health specialized transitional facility; and

3. A documented list of current contracted services is maintained at the facility and includes:
   a. The name of each contractor, and
b. A description of the contracted services provided by the contractor.

R9-10-1404. Quality Management
An administrator shall ensure that:

1. A plan for a quality management program is established, documented, and implemented that includes:
   a. A method to identify, document, and evaluate incidents;
   b. A method to collect data to evaluate the provision of services related to patient care, including contracted services;
   c. A method to evaluate the data collected to identify a concern about the provision of services;
   d. A method to make changes or take action as a result of the identification of a concern about the provision of services;
   e. A method to determine whether actions taken improved the provision of services; and
   f. The frequency of submitting the documented report required in subsection (2);

2. A documented report is submitted to the governing authority that includes:
   a. Each identified concern in subsection (1)(c), and
   b. Any change made or action taken in subsection (1)(d); and

3. The report in subsection (2) and the supporting documentation are maintained for 12 months after the date the report is submitted to the governing authority.

R9-10-1405. Personnel Requirements and Records
A. An administrator shall ensure that a personnel member:

1. Is at least 21 years of age;

2. Either:
   a. Holds a valid fingerprint clearance card issued under A.R.S. Title 41, Chapter 12, Article 3.1; or
   b. Submits to the administrator a copy of a fingerprint clearance card application showing that the personnel member submitted the application to the fingerprint division of the Department of Public Safety under A.R.S. § 41-1758.02 within seven working days after becoming a personnel member; and
3. Before being employed and annually thereafter, provides evidence of freedom from infectious tuberculosis as required in R9-10-112.

B. An administrator shall ensure that each personnel member submits to the administrator a copy of the individual’s valid fingerprint clearance card:
   1. Except as provided in subsection (A)(2)(b), before the personnel member’s starting date of employment; and
   2. Each time the fingerprint clearance card is issued or renewed.

C. If a personnel member holds a fingerprint clearance card that was issued before the individual became a personnel member, an administrator shall:
   1. Contact the Department of Public Safety within seven working days after the individual becomes a personnel member to determine whether the fingerprint clearance card is valid; and
   2. Make a record of this determination, including the name of the personnel member, the date of the contact with the Department of Public Safety, and whether the fingerprint clearance card is valid.

D. An administrator shall provide orientation training to a personnel member, according to the behavioral health specialized transitional facility policies and procedures and specific to the duties to be performed by the personnel member, within the first week of a personnel member’s employment by the behavioral health specialized transitional facility.

E. An administrator shall ensure that a personnel member receives on-going education according to the behavioral health specialized transitional facility’s training plan in R9-10-1402(C)(3) specific to the duties performed by the personnel member.

F. An administrator shall ensure that a personnel record is maintained for each personnel member that:
   1. Includes:
      a. The personnel member’s name, date of birth, home address, and telephone number;
      b. Documentation of the personnel member’s starting date of employment;
      c. Verification or documentation of the personnel member’s qualifications according to the behavioral health specialized transitional facility’s policies and procedures required in R9-10-1402(B)(3)(a);
      d. Verification or documentation of the personnel member’s competency and proficiency according to the behavioral health specialized transitional facility’s policies and procedures required in R9-10-1402(C)(2)(a);
e. Documentation of granting of clinical privileges, if applicable;
f. Documentation of clinical oversight, if applicable;
g. A copy of the personnel member’s valid fingerprint clearance card;
h. Evidence of freedom from infectious tuberculosis as required in subsection (A)(3);
i. Documentation of completion of cardiopulmonary resuscitation or first aid training, if applicable;
j. Documentation of completion of orientation required in subsection (D); and
k. Documentation of completion of training to maintain competency and proficiency according to the training plan required in R9-10-1402(C)(3), including:
   i. The date of the training,
   ii. The subject matter of the training,
   iii. The number of clock hours of the training, and
   iv. The instructor’s name; and

2. Is maintained for at least two years after the last date the personnel member worked at the behavioral health specialized transitional facility.

R9-10-1406. Admission Requirements

A. An administrator shall ensure that before a patient is admitted to the behavioral health specialized transitional facility that a court of competent jurisdiction has ordered the patient to be:
   1. Detained under A.R.S. § 36-3705(B) or § 36-3713(B); or
   2. Committed under A.R.S. § 36-3707.

B. An administrator shall ensure that, at the time a patient is admitted to the behavioral health specialized transitional facility:
   1. The administrator receives a copy of the court order for the patient to be detained at or committed to the behavioral health specialized transitional facility;
   2. The patient’s possessions are taken to the bedroom to which the patient has been assigned; and
   3. The patient is provided with a written list and verbal explanation of the patient’s rights and responsibilities.

C. Within seven days after a patient is admitted to the behavioral health specialized transitional facility, a clinical director shall ensure that:
   1. A medical history is taken from and a physical examination performed on the patient;
2. The patient receives a test for infectious tuberculosis that complies with the requirements in R9-10-112, unless the patient has documentation of freedom from infectious tuberculosis that meets the requirements in R9-10-112 dated within one year before the date of the patient’s admission to the behavioral health specialized transitional facility; and

3. An assessment for the patient is completed:
   a. According to the behavioral health specialized transitional facility’s policies and procedures;
   b. That includes the patient’s:
      i. Legal history, including criminal justice record;
      ii. Behavioral health treatment history;
      iii. Medical conditions and history; and
      iv. Symptoms reported by the patient and referrals needed by the patient, if any; and
   c. That includes:
      i. Recommendations for further assessment or examination of the patient’s needs;
      ii. The physical health services or ancillary services that will be provided to the patient until the patient’s treatment plan is completed; and
      iii. The signature and date signed of the personnel member conducting the assessment.

R9-10-1407. Patient Rights
An administrator shall ensure that:

1. A patient:
   a. Has privacy in treatment and personal care needs;
   b. Has the opportunity for and privacy in correspondence, communications, and visitation unless:
      i. Restricted by court order, or
      ii. Contraindicated on the basis of clinical judgment, as documented in the patient’s medical record;
   b. Is given the opportunity to seek, speak to, and be assisted by legal counsel:
      i. Whom the court assigns to the patient, or
      ii. Whom the patient obtains at the patient's own expense; and
c. Is free from:
   i. The intentional infliction of physical, mental, or emotional harm when not medically indicated;
   ii. Exploitation;
   iii. Restraint when not medically indicated unless necessary to prevent harm to self or others and the reason for restraint is documented in the patient's medical record;
   iv. Sexual abuse according to A.R.S. § 13-1404; and
   v. Sexual assault according to A.R.S. § 13-1406; and

2. A patient or the patient's representative:
   a. Is provided with the opportunity to participate in the development of the patient’s treatment plan and in treatment decisions before the treatment is initiated, except in a medical emergency;
   b. Is provided with information about proposed treatments, alternatives to treatments, associated risks, and possible complications;
   c. Is allowed to control the patient’s finances and have access to the patient’s personal funds account according to the behavioral health specialized transitional facility’s policies and procedures specified in R9-10-1402(B)(3)(d);
   d. Has an opportunity to review the patient record for the patient according to the behavioral health specialized transitional facility’s policies and procedures; and
   e. Receives information about the behavioral health specialized transitional facility’s policies and procedures for:
      i. Health care directives;
      ii. Filing complaints, including the telephone number of an individual at the behavioral health specialized transitional facility to contact about a complaint and the Department's telephone number; and
      iii. Petitioning a court for a patient’s discharge or conditional release to a less restrictive alternative.

R9-10-1408. Behavioral Health Services

A. A clinical director shall ensure that:

1. A treatment plan is developed, implemented, reviewed, and updated as necessary for the patient:
a. According to the behavioral health specialized transitional facility’s policies and procedures;
b. Based on the assessment conducted under R9-10-1406(C)(3) and on-going changes to the assessment of the patient’s behavioral health issues, mental disorders, and physical health conditions, as applicable; and
c. Including:
   i. The physical health services, behavioral health services, or ancillary services to be provided to the patient until completion of the treatment plan;
   ii. The name, strength, dosage, amount, frequency of administration, and route of administration for each medication ordered for the patient;
   iii. The type, frequency, and duration of counseling or other treatment ordered for the patient;
   iv. The name of each individual who ordered medication, counseling, or other treatment for the patient;
   v. The signature of the patient or the patient's representative and dated signed, or documentation of the refusal to sign;
   vi. The date when the patient's treatment plan will be reviewed;
   vii. If a discharge date has been determined, the treatment needed after discharge; and
   viii. The signature of the personnel member who developed the treatment plan and the date signed; and

2. The patient’s treatment plans reviewed and updated on an on-going basis:
   a. According to the review date specified in the treatment plan,
   b. When a treatment goal is accomplished or changes,
   c. When additional information that affects the patient’s assessment is identified, and
   d. When a patient has a significant change in condition or experiences an event that affects treatment.

B. A clinical director shall ensure that treatment is:
   1. Offered to a patient according to the patient’s treatment plan;
   2. Except for a patient obtaining treatment under A.R.S. § 36-512, only provided after obtaining informed consent to the treatment from the patient; and
C. The clinical director shall ensure that restraint or seclusion is used, performed, and documented according the behavioral health specialized transitional facility’s policies and procedures.

D. A clinical director shall ensure that:
   1. A patient receives the annual examination required by A.R.S. § 36-3708, and
   2. The report of the patient’s annual examination is prepared according to the behavioral health specialized transitional facility’s policies and procedures.

R9-10-1409. Ancillary Services

A. A clinical director shall ensure that:
   1. A patient’s physical health is assessed during the physical examination specified in R9-10-1406(C)(1), and
   2. Any physical health conditions identified through the assessment are addressed in the patient’s treatment plan.

B. A clinical director shall ensure that on-going assessment or treatment of a patient’s physical health condition is:
   1. Offered to a patient according to the patient’s treatment plan;
   2. Except for a patient obtaining treatment under A.R.S. § 36-512, only provided after obtaining informed consent to the assessment or treatment from the patient; and

C. An administrator shall ensure that, if a patient requires assessment or treatment not available at the behavioral health specialized transitional facility, the patient is provided with transportation to the location where assessment or treatment may be provided to the patient.

R9-10-1410. Patient Records

A. An administrator shall ensure that:
   1. A patient record for each patient is established and maintained according to A.R.S. § 12-2297;
   2. A patient record is available to:
      a. Personnel members authorized by the behavioral health specialized transitional facility's policies and procedures to access the patient record, and
      b. The patient or patient’s representative upon request at a time agreed upon by the patient or patient’s representative and the administrator;
3. Information in a patient record is only disclosed to a third party with the written authorization of the patient or the patient's representative or as permitted or required by law;

4. A patient record is protected from loss, damage, or unauthorized use or disclosure;

5. An entry in a patient record:
   a. Is recorded only by an individual authorized by the behavioral health specialized transitional facility's policies and procedures to make the entry;
   b. Is legible, dated, and authenticated; and
   c. Remains legible when a correction to the original entry is made;

6. In addition to the entry requirements in subsection (A)(5), each order is:
   a. Dated when the order is entered in the medical record including the time of the order; and
   b. Authenticated by a behavioral health medical professional according to the behavioral health specialized transitional facility's policies and procedures, if the order is entered by an individual who is not a behavioral health medical professional;

8. If a rubber-stamp signature, electronic signature, or electronic code is used to authenticate an order, the behavioral health medical professional to whom the rubber-stamp signature, electronic signature, or electronic code belongs is responsible for the use of the rubber stamp, electronic signature, or electronic code; and

9. A verbal order is entered and authenticated according to the requirements in subsection (A)(7).

B. If a behavioral health specialized transitional facility maintains patient records electronically, an administrator shall ensure that:
   1. There are safeguards to prevent unauthorized access, and
   2. An internal clock records the date and time of a patient record entry.

C. An administrator shall ensure that a patient record for each patient contains:
   1. A copy of the court order requiring the patient to be detained at or committed to the behavioral health specialized transitional facility;
   2. The date the patient was detained at or committed to the behavioral health specialized transitional facility;
   3. Patient information that includes:
      a. The patient's name and address;
      b. The patient's date of birth;
c. If applicable, the name and telephone number of the patient’s representative; and

d. Any known allergy or sensitivity;

4. A diagnosis or reason for the behavioral health services or physical health services
provided to the patient, including any documentation provided by or obtained from any
other individual or health care institution that provided assessment or treatment to the
patient;

5. Documentation of the patient’s freedom from infectious tuberculosis that complies with
R9-10-112;

6. A medical history and physical examination of the patient required in R9-10-1406(C)(1);

7. An assessment of the patient’s behavioral health needs required in R9-10-1406(C)(3);

8. If applicable, consent forms;

9. A copy of the patient’s current treatment plan and each previous treatment plan prepared
for the patient by the behavioral health specialized transitional facility;

10. Documentation of each review of the patient’s treatment plan;

11. Medication information that includes:

   a. A medication ordered for the patient;

   b. A medication administered to the patient at the behavioral health specialized
      transitional facility, including:

      i. The date and time of administration;

      ii. The name, strength, dosage, amount, vaccine lot number if applicable, and route of administration;

      iii. The identification and authentication of the individual administering the medication; and

      iv. Any adverse event a patient has related to or as a result of the medication;

   c. A patient’s refusal to take medication ordered for the patient; and

   d. A prepackaged or sample medication provided to the patient for self-
      administration including the name, strength, dosage, amount, and route of administration;

12. The name of each individual providing treatment, including counseling, to the patient;

13. Documentation of each order, including an order for restraint, seclusion, or time-out;

14. Documentation of each clinical laboratory test result or radiological or diagnostic
imaging report, if applicable;
15. Documentation of each behavioral health service or physical health service provided to the patient;

16. If applicable, documentation of transportation provided to the patient to:
   a. Obtain an assessment or treatment away from the behavioral health specialized transitional facility, or
   b. Attend a court hearing;

17. Notes by a personnel member about a treatment provided by the behavioral health specialized transitional facility, including:
   a. The date and, if applicable, the duration of the treatment;
   b. The patient's response to the treatment;
   c. If applicable, the treatment goals addressed in a counseling session; and
   d. The signature and professional credential or job title of the personnel member who provided the treatment and the date signed;

18. Any documentation received by the behavioral health specialized transitional facility of treatment provided to the patient by another health care institution or health care provider;

19. If a health care directive is provided by the patient or the patient's representative, a copy of the health care directive signed by the patient or the patient's representative;

20. Documentation of the patient instructions to the patient;

21. Documentation of the annual examination of the patient and report required by A.R.S. § 36-3708;

22. Documentation of the annual written notice to the patient of the patient’s right to petition for:
   a. Conditional release to a less restrictive alternative as required by A.R.S. § 36-3709, or
   b. Discharge as required by A.R.S. § 36-3714;

23. If applicable, a copy of the patient’s petition for discharge or conditional release to a less restrictive alternative and the outcome of the petition;

24. If applicable, documentation of the patient's:
   a. Conditional release to a less restrictive alternative, or
   b. Discharge including the disposition of the patient upon discharge;

25. If applicable, a consultation report; and

26. If applicable, a discharge summary consisting of:
a. The reason the patient was detained at or committed to the behavioral health specialized transitional facility;

b. A summary of the treatment provided to the patient;

c. The patient's progress in meeting treatment goals, including treatment goals that were and were not achieved;

d. The name, dosage, and frequency of each medication for the patient ordered at the time of the patient's discharge from the behavioral health specialized transitional facility;

e. A summary of adverse events associated with the administration of a medication to the patient, if applicable;

f. A description of the disposition of the patient's possessions, funds, or medications; and

g. The date the patient was discharged from the behavioral health specialized transitional facility.

R9-10-1411. Medications

A. An administrator shall ensure that:

1. If pharmacy services that require a pharmacy license are provided on the premises:
   a. The pharmacy services comply with A.R.S. Title 36, Chapter 27; A.R.S. Title 32, Chapter 18; and 4 A.A.C. 23; and
   b. A copy of the pharmacy license is provided to the Department upon request;

2. A medication:
   a. Is maintained at the temperature recommended by the manufacturer of the medication;
   b. When administered to a patient:
      i. Is administered in compliance with an order, and
      ii. Is documented as required in R9-10-1410(C)(11); and
   c. Is stored according to the behavioral health specialized transitional facility’s policies and procedures;

3. A drug reference source, current within one year of the publication date, is available and maintained on the premises or available electronically for use by clinical staff members; and

4. A medication error or an adverse event is reported to the ordering health care provider and documented in the patient record for the patient.
B. A clinical director shall ensure that:
1. Medication is dispensed or administered to a patient according to the behavioral health specialized transitional facility’s policies and procedures;
2. The personnel member dispensing or administering the medication documents the dispensing or administration of the medication according to the behavioral health specialized transitional facility’s policies and procedures, including recording any adverse event; and
3. If an adverse event occurs in connection with a medication, the personnel member dispensing or administering the medication reports the adverse event according to the behavioral health specialized transitional facility’s policies and procedures.

C. A clinical director shall ensure that:
1. A patient who requires assistance in the self-administration of medication receives assistance from a personnel member in one or more of the following, as are applicable to the patient, according to the behavioral health specialized transitional facility’s policies and procedures:
   a. Storage of the patient's medication;
   b. Verification that the medication is taken as directed by the patient's medical practitioner by:
      i. Confirming that a medication is being taken by the patient for whom the medication is prescribed,
      ii. Checking the dosage against the label on the container, and
      iii. Confirming that the patient is taking the medication as directed;
   c. Opening of the medication container for the patient; or
   d. Observation of the patient while the patient removes the medication from the container or takes the medication; and
2. The personnel member assisting a patient in the self-administration of medication documents the personnel member’s assistance according to the behavioral health specialized transitional facility’s policies and procedures.

R9-10-1412. Discharge or Conditional Release to a Less Restrictive Alternative
A. An administrator shall ensure that annual written notice is given to a patient of the patient’s right to petition for:
1. Conditional release to a less restrictive alternative under A.R.S. § 36-3709, or
2. Discharge under A.R.S. § 36-3714.
B. An administrator shall ensure that a patient who is detained at or committed to the behavioral health specialized transitional facility is transported to a hearing to determine the patient’s continued detention at or commitment to the behavioral health specialized transitional facility.

C. An administrator shall ensure that a patient is not discharged or conditionally released to a less restrictive alternative before the behavioral health specialized transitional facility receives documentation from a court of competent jurisdiction of the patient’s:

1. Conditional release to a less restrictive alternative, or
2. Discharge including the disposition of the patient upon discharge.

D. A clinical director shall ensure that before a patient is discharged or conditionally released to a less restrictive alternative:

1. The clinical director or the clinical director’s designee, as specified in the behavioral health specialized transitional facility’s discharge policies and procedures, receives the name of the health care provider or behavioral health professional to whom a copy of the patient’s discharge summary will be sent; and
2. The patient receives:
   a. Written follow-up instructions including as applicable to the patient:
      i. On-going behavioral health issues and physical health conditions;
      ii. A list of the patient’s medications and, for each medication, directions for taking the medication, possible side-effects, and possible results of not taking the medication; and
      iii. Counseling goals; and
   b. A supply of medications sufficient to last the patient for at least 14 days.

R9-10-1413. Environmental and Equipment Standards

A. An administrator shall ensure that:

1. A behavioral health specialized transitional facility's furnishings and premises are:
   a. In good repair;
   b. Cleaned and disinfected according to the behavioral health specialized transitional facility’s policies and procedures to control illness and infection; and
   c. Free of:
      i. Odors, such as from urine or rotting food;
      ii. Insects and rodents;
      iii. Accumulations of garbage or refuse; and
      iv. Hazards;
2. Garbage and refuse are:
   a. Stored in covered containers or in plastic bags, and
   b. Removed from the premises at least once a week;
3. Biohazardous medical wastes are identified, stored, and disposed of according to 18
   A.A.C. 13, Article 14;
4. A heating and cooling system maintains the facility at a temperature between 65° F and
   85° F;
5. Water is available and accessible to a patient at all times unless otherwise indicated in the
   patient's treatment plan;
6. Hot water provided in an area of the facility used by a patient is maintained between 90°
   F and 120° F;
7. The supply of hot water is sufficient to meet:
   a. The personal hygiene needs of each patient, and
   b. The laundry, cleaning, and sanitation requirements of the behavioral health
      specialized transitional facility;
8. Each common area of the facility has lighting sufficient to allow personnel members to
   monitor patient activity;
9. Bathrooms are kept stocked with toilet tissue and dispensed soap; and
10. Pets and animals, except for service animals, are prohibited on the premises.

B. An administrator shall ensure that:
1. Smoking or tobacco products are not permitted within a facility; and
2. Smoking or tobacco products may be permitted on the premises outside a facility if:
   a. Signs designating smoking areas are conspicuously posted, and
   b. Smoking is prohibited in areas where combustible materials are stored or in use.

C. An administrator shall ensure that:
1. A patient's bedroom is provided with:
   a. An individual storage space, such as a dresser or chest;
   b. A bed that:
      i. Consists of at least a mattress and frame; and
      ii. Is at least 36 inches wide and 72 inches long; and
   c. A pillow and linens that include:
      i. A mattress pad;
      ii. A top sheet and a bottom sheet that are large enough to tuck under the
          mattress;
iii. A pillow case;
iv. A waterproof mattress cover, if needed; and
v. A blanket or bedspread sufficient to ensure the patient's warmth;

2. Clean linens and bath towels are provided to a patient as needed and at least once every seven days;

3. A patient’s clothing may be cleaned according to the behavioral health specialized transitional facility’s policies and procedures; and

4. Soiled linen and clothing stored by the behavioral health specialized transitional facility are in covered containers or closed plastic bags away from a food preparation or storage area or a dining area.

D. An administrator shall ensure that:

1. Except as described in subsection (D)(2) or (D)(3), a toxic or other hazardous material stored on the premises is in a labeled container in a locked area other than a food preparation or storage area, a dining area, or a medication storage area;

2. Except for medical supplies needed for a patient, such as oxygen, a highly combustible or flammable material, such as an organic solvent, stored on the premises is stored in the original labeled container or a safety container in a locked area outside of the facility; and

3. Toxic or flammable medical supplies needed for a patient are stored in a locked area according to the behavioral health specialized transitional facility’s policies and procedures.

E. An administrator shall ensure that:

1. A refrigerator used to store medications:
   a. Maintains a temperature of 41° F or below; and
   b. Is only used to store medications;

2. Equipment at the behavioral health specialized transitional facility is:
   a. Used according to the manufacturer's recommendations; and
   c. If applicable, tested and calibrated at least once every 12 months or according to the manufacturer's recommendations; and

3. Documentation of an equipment test, calibration, or repair is maintained for 12 months after the date of testing, calibration, or repair.

F. An administrator shall ensure that a vehicle used to transport a patient:

1. Is safe and in good repair,

2. Is equipped with an operational heater and air conditioning system;
3. Contains a locked first aid kit that holds first aid supplies in a quantity sufficient to meet the needs of the transported patients, including:
   a. Sterile bandages including:
      i. Adhesive bandages of assorted sizes,
      ii. Sterile gauze pads, and
      iii. Sterile gauze rolls;
   b. Antiseptic solution or sealed antiseptic wipes;
   c. A pair of scissors;
   d. Adhesive or self-adhering tape;
   e. Single-use, non-porous gloves; and
   f. Reclosable plastic bags of at least one-gallon size; and
4. When used to transport a patient, contains drinking water sufficient to meet the needs of each patient present.

G. An administrator shall ensure that, for a vehicle used to transport a patient:
1. Documentation of current vehicle insurance is maintained for a vehicle owned or leased by the facility;
2. A driver of the vehicle:
   a. Is 21 years of age or older;
   b. Has a valid driver license;
   c. Does not wear headphones or operate any hand-held wireless communication devices or hand-held electronic entertainment devices while operating the vehicle;
   d. Removes the keys from the vehicle and engages the emergency brake before exiting the vehicle or, if the vehicle locks in the park position, places the gear in the park position;
   e. Does not leave a patient in the vehicle unattended; and
   f. Ensures the safe and hazard-free loading and unloading of patients; and
3. Transportation safety is maintained as follows:
   a. Each individual in the vehicle is sitting in a seat and wearing a working seat belt while the vehicle is in motion; and
   b. Each seat in the vehicle is securely fastened to the vehicle and provides sufficient space for a patient’s body.
A. A clinical director shall ensure that policies and procedures for providing medical emergency treatment to a patient are established, documented, and implemented and include:

1. The medications, supplies, and equipment required on the premises for the medical emergency treatment provided by the behavioral health specialized transitional facility;
2. A system to ensure all medications, supplies, and equipment are available, have not been tampered with, and, if applicable, have not expired;
3. A cart or a container designated for medical emergency treatment that contains all of the medication, supplies, and equipment specified in the behavioral health specialized transitional facility’s policies and procedures; and
4. A mechanism for ensuring a patient may be transported to a hospital or other health care institution to receive emergency medical treatment the behavioral health specialized transitional facility is not able or authorized to provide.

B. An administrator shall ensure that the behavioral health specialized transitional facility has an automatic sprinkler system that complies with applicable standard incorporated by reference in R9-1-412.

C. An administrator shall ensure that:

1. The behavioral health specialized transitional facility meets the fire safety requirements of the local jurisdiction, including that hallways are kept clear of obstructions;
2. A smoke detector, if required by the local jurisdiction, is:
   a. Maintained in an operable condition;
   b. Either battery operated or, if hard-wired into the electrical system of the behavioral health residential facility, has a back-up battery; and
   c. Tested monthly;
3. A fire extinguisher, if required by the local jurisdiction, is:
   a. Maintained in a secure location and accessible to personnel members;
   b. Maintained in working order;
   c. If rechargeable:
      i. Is serviced at least once every 12 months, and
      ii. Has a tag attached to the fire extinguisher that specifies the date of the last servicing and the name of the servicing person; and
   d. If disposable, has a charge indicator showing green or "ready" status; and
4. A current fire inspection report, including documentation of any repairs or corrections required by the fire inspection report, is maintained.
D. An administrator shall ensure that:

1. A disaster plan is developed, documented, and implemented that includes:
   a. Procedures for protecting the health and safety of patients and other individuals at the behavioral health specialized transitional facility;
   b. Assigned responsibilities for each personnel member; and
   c. Instructions for:
      i. The evacuation, transport, or transfer of patients,
      ii. The maintenance of patient records, and
      iii. The provision of any other services required to meet the patients' needs;

2. A plan exists for back-up power and water supply;

3. An evacuation plan is posted in each room and hallway that includes a floor plan of the behavioral health specialized transitional facility on which lines have been drawn through hallways and exits showing the evacuation path;

4. A fire drill is performed on each shift at least once every three months;

5. A disaster drill is performed on each shift at least once every 12 months;

6. Documentation of a fire drill required in subsection (4) and a disaster drill required in subsection (5) includes:
   a. The date and time of the drill;
   b. A list of the individuals who took part in the drill;
   c. A critique of the drill; and
   d. Recommendations for improvement, if applicable; and

7. Documentation of a fire drill or a disaster drill is maintained by the behavioral health specialized transitional facility for 12 months after the date of the drill.

F. An administrator shall ensure that a patient receives orientation to the behavioral health specialized transitional facility’s evacuation plan within 24 hours after the patient’s admission to the behavioral health specialized transitional facility.

R9-10-1415. Physical Plant Standards

A. An administrator shall ensure that:

1. A behavioral health specialized transitional facility complies with the applicable physical plant health and safety codes and standards for secure residential facilities, incorporated by reference in A.A.C. R9-1-412, that were in effect on the date listed on the building permit or zoning clearance submitted as part of the application for approval of the architectural plans and specifications submitted before initial licensing;
2. Before a modification of a behavioral health specialized transitional facility is made, an application for approval of the architectural plans and specifications of the behavioral health specialized transitional facility required in R9-10-104(A):
   a. Is submitted to the Department; and
   b. Demonstrates compliance with the applicable physical plant health and safety codes and standards for secure residential facilities, incorporated by reference in A.A.C. R9-1-412 in effect on the date:
      i. Listed on the building permit or zoning clearance submitted as part of the application for approval of the architectural plans and specifications for the modification, or
      ii. The application for approval of the architectural plans and specifications for the modification, required in R9-10-104(A), is submitted to the Department; and

3. A modification of a behavioral health specialized transitional facility complies with applicable physical plant health and safety codes and standards for secure residential facilities, incorporated by reference in A.A.C. R9-1-412, in effect on the date:
   a. Listed on the building permit or zoning clearance submitted as part of the application for approval of the architectural plans and specifications for the modification, or
   b. The application for approval of the architectural plans and specifications for the modification, required in R9-10-104(A), is submitted to the Department.

B. An administrator shall ensure that the behavioral health specialized transitional facility has:
   1. An area in which a patient may meet with a visitor,
   2. Areas where patients may receive individual treatment,
   3. Areas where patients may receive group counseling or other group treatment,
   4. An area for community dining, and
   5. Sufficient space in one or more common areas for individual and group activities.

C. An administrator shall ensure that the behavioral health specialized transitional facility has:
   1. A bathroom adjacent to a common area for use by patients and visitors that:
      a. Provides privacy to the user, and
      b. Contains:
         i. A working sink with running water
         ii. A working toilet that flushes and has a seat,
         iii. Toilet tissue dispenser,
iv. Dispensed soap for hand washing,
v. Single use paper towels or a mechanical air hand dryer,
vi. Lighting, and
vii. A means of ventilation;

2. An indoor common area that is not used as a sleeping area and that has:
   a. A working telephone that allows a patient to make a private telephone call;
   b. A distortion-free mirror;
   c. A current calendar and an accurate clock;
   d. A variety of books, current magazines and newspapers, and arts and crafts supplies appropriate to the age, educational, cultural, and recreational needs of patients; and
   e. A working television and access to a radio;

3. A dining room or dining area that:
   a. Is lighted and ventilated,
   b. Contains tables and seats, and
   c. Is not used as a sleeping area;

4. An outdoor area that:
   a. Is accessible to patients,
   b. Has sufficient space to accommodate the social and recreational needs of patients, and
   c. Has shaded and unshaded areas;

5. For every six patients, at least one working flushable toilet with a seat and dispensed toilet tissue;

6. For every eight patients, at least one sink with running water, dispensed soap for hand washing, and single use paper towels or a mechanical air hand dryer;

7. For every eight patients, at least one working bathtub or shower with a slip resistant surface; and

8. For each patient, a private bedroom:
   a. Containing at least 60 square feet of floor space, not including the closet;
   b. With walls from floor to ceiling;
   c. With a door that opens into a hallway or common area;
   d. Constructed and furnished to provide unimpeded access to the door;
   e. Not used as a passageway to another bedroom or a bathroom, unless the bathroom is for the exclusive use of a the patient occupying the bedroom; and
f. Containing lighting sufficient for a patient to read.