

R432. Health and Human Services, Family Health and Preparedness, Licensing.

R432-104. Specialty Hospital - Long-Term Acute Care.

R432-104-1. Legal Authority.

This rule is adopted pursuant to Title 26, Chapter 21, Health Care Facility Licensing and Inspection Act.

R432-104-2. Purpose.

The purpose of this rule is to promote the public health and welfare through the establishment and enforcement of program standards for the operation of long-term acute care (LTAC) hospitals.

R432-104-3. License.

(1) To be licensed as an LTAC hospital, the facility shall:

- (a) have a constituted governing body with overall administrative and professional responsibility;
- (b) have an organized medical staff that provides 24-hour inpatient care;
- (c) have a chief executive officer to whom the governing body delegates responsibility for operation of the hospital;

and

(d) maintain at least one nursing unit containing patient rooms, patient care spaces, and service spaces defined in construction Rule R432-10.

(2) Each nursing unit shall contain at least six patient beds in rooms and spaces that are organized in a contiguous arrangement.

(3) The LTAC licensee shall provide onsite basic services required of a general hospital that are needed for the diagnosis, therapy, and treatment offered or required by any patient admitted to the hospital, and the following:

- (a) current and complete medical records;
- (b) continuous registered nurse and nursing services supervision;
- (c) pharmacy services;
- (d) laboratory services;
- (e) nursing services;
- (f) occupational, physical, respiratory and speech therapies;
- (g) dietary services;
- (h) social services; and
- (i) specialized diagnosis and therapeutic services.

R432-104-4. Definition.

"Ostomy" is a medical term meaning a semi-permanent opening leading from the outside to the inside of the body.

R432-104-5. General Design Requirements.

- (1) Rule R432-10, Long-Term Acute Care Hospital Construction Rules additionally apply to a LTAC.
- (2) The LTAC hospital may be located within an existing licensed health care facility or be freestanding.

R432-104-6. Hospital Located Within an Acute Care Hospital.

If an LTAC is located within a licensed acute care hospital, the licensee shall:

- (1) have a separate governing body, chief executive officer, chief medical officer, and medical staff from the co-located hospital;
- (2) perform basic functions independently from the host hospital;
- (3) incur not more than 15% of its total inpatient operating costs for items and services supplied by the host hospital;
- (4) admit 75% of patients from sources other than the host hospital;
- (5) maintain admission and discharge records separately from those of the hospital where it is co-located;
- (6) not commingle beds with host hospital beds; and
- (7) be serviced by the same Medicare fiscal intermediary as the host hospital.

R432-104-7. Organization and Staff.

The LTAC licensee shall ensure that services and policies comply with the following sections of Rule R432-100:

- (1) Governing Body;
- (2) Administrator;
- (3) Medical and Professional Staff;
- (4) Nursing Care Services;
- (5) Personnel Management Services;
- (6) Infection Control;
- (7) Quality Improvement Plan; and
- (8) Patient Rights.

R432-104-8. Admission and Discharge Policy.

- (1) The LTAC licensee shall implement an average inpatient length of stay greater than 25 days, in the admission policy of the hospital..
- (2) Patients who have one or more of the following conditions may be admitted to an LTAC:
 - (a) medical instability due to chronic illness requiring weekly physician visits;
 - (b) a requirement of continuous drug therapy monitoring by a licensed healthcare professional;
 - (c) a condition that requires dangerous drug therapy, continuous use of a respirator or ventilator, or suctioning or nasopharyngeal aspiration at least once per nursing shift; or
 - (d) a condition that requires skilled nursing services and care that requires a registered nurse present for care 24 hours a day for at least three of the following treatments at the specified frequency:
 - (i) daily extensive dressings for deep decubiti, surgical wounds, or vascular ulcers;
 - (ii) 24-hour isolation for infectious disease;
 - (iii) suctioning three days per week;
 - (iv) occupational therapy, physical therapy, or speech therapy five days per week;
 - (v) respiratory therapy;
 - (vi) daily special ostomy care;
 - (vii) daily oxygen;
 - (viii) traction; or
 - (ix) daily catheter or wound irrigation.
- (3) Within 24 hours of admission, the attending physician shall document:
 - (a) the patient's current medical and respiratory status, including pertinent clinical parameters;
 - (b) treatment plan and goals;
 - (c) estimated length of stay; and
 - (d) anticipated discharge plan.
- (4) The LTAC licensee shall discharge the patient from the facility if:
 - (a) the physician documents that the patient:
 - (i) requires additional intensive services in an acute hospital;
 - (ii) exhibits no evidence of progress toward current, documented goals over an eight-week period and a medically appropriate alternative for discharge exists; or
 - (iii) has met documented goals established at or modified following admission and medically appropriate alternatives for discharge exist; or
 - (b) the patient or caregiver exhibits the ability to care for the patient's physical needs.

R432-104-9. Clinical Services.

- (1) The licensee shall provide the following onsite clinical services, as outlined by the hospital governing body and medical staff, in compliance with the following sections of Rule R432-100:
 - (a) Pharmacy Service;
 - (b) Laboratory Service;
 - (c) Rehabilitation Therapy Services;
 - (d) Dietary Service; and
 - (e) Social Services.
- (2) The licensee shall ensure that occupational therapy services are available for any patient who requires the service.
 - (a) An occupational therapist with administrative responsibility for the occupational therapy department shall direct the occupational therapy services.
 - (b) The licensee shall ensure that staff occupational therapists are licensed by the Utah Department of Commerce.
 - (i) A licensed therapist shall supervise any occupational therapy assistants that provide patient services.
 - (ii) The licensee shall ensure that patient services are provided commensurate with each person's documented training and experience.
 - (c) Medical staff shall initiate occupational therapy services with an order.
 - (d) The governing body shall develop and approve written policies and procedures, in conjunction with the medical staff, to include:
 - (i) methods of referral for services;
 - (ii) scope of services to be provided;
 - (iii) responsibilities of professional therapists;
 - (iv) admission and discharge criteria for treatment;
 - (v) infection control;
 - (vi) safety;
 - (vii) individual treatment plans, objectives, clinical documentation, and assessment;
 - (viii) incident reporting system; and
 - (ix) emergency procedures.
 - (e) The licensee shall ensure that equipment is calibrated to manufacturer's specifications.
 - (f) There licensee shall ensure there is a written individual treatment plan for each patient appropriate to the diagnoses and condition.

- (g) The occupational therapy department staff shall organize and participate in continuing education programs.
- (3) The licensee shall make speech therapy services available for any patient requiring the service.
- (a) A licensed speech pathologist or audiologist with administrative responsibility for the speech-audiology therapy department shall direct the speech pathology language services.
- (b) The licensee shall ensure that staff speech therapists and audiologists are licensed by the Utah Department of Commerce.
 - (i) A licensed therapist shall supervise any speech-language pathology aides or audiology aides that provide patient services.
 - (ii) The licensee shall ensure that patient services are commensurate with each person's documented training and experience.
- (c) Medical staff shall initiate speech and audiology services with an order.
- (d) The licensee shall develop and approve written policies and procedures in conjunction with the medical staff to include:
 - (i) methods of referral for services;
 - (ii) scope of services to be provided;
 - (iii) responsibilities of professional therapists;
 - (iv) admission and discharge criteria for treatment;
 - (v) infection control;
 - (vi) assistive technology;
 - (vii) individual treatment plans, objectives, clinical documentation, and assessment;
 - (viii) incident reporting system; and
 - (ix) emergency procedures.
- (e) The licensee shall calibrate equipment to manufacturer's specifications.
- (f) The licensee shall ensure that there is a written individual treatment plan for each patient appropriate to the diagnoses and condition.
- (g) The speech-language department staff shall organize and participate in continuing education programs.
- (4) The licensee shall ensure that respiratory care services comply with the respiratory care services section of Rule R432-100.

R432-104-10. Emergency Services.

- (1) Each specialty hospital licensee shall have the ability to provide emergency first aid treatment to patients, staff, and visitors and to those who may be unaware of or unable to immediately reach services in other facilities.
- (2) Provisions for emergency services shall include:
 - (a) treatment room;
 - (b) storage for supplies;
 - (c) reception area and control of walk-in traffic;
 - (d) patient toilet room;
 - (e) telephone service to call the poison control center; and
 - (f) staff available in the facility to respond in case of an emergency.
- (3) Each hospital shall have available an automated external defibrillator unit and at least one staff on duty who is competent on its use.

R432-104-11. Complementary Services.

If the following services are provided on site, the licensee shall comply with the following applicable sections of Rule R432-100:

- (1) Radiology Services;
- (2) Outpatient Services;
- (3) Pediatric Services; or
- (4) Surgical Services.

R432-104-12. Ancillary Services.

The licensee shall provide the following services on site in compliance with the applicable sections of Rule R432-100:

- (1) Central Supply;
- (2) Laundry;
- (3) Medical Records;
- (4) Maintenance;
- (5) Housekeeping; and
- (6) Emergency and Disaster Plans.

R432-104-13. Penalties.

Any person who violates any provision of this rule may be subject to the penalties in Sections 26-21-11, 26-21-16, and R432-3-7.

KEY: health care facilities

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