

**Advisory
Guide
Series**

A4

**ACUTE PSYCHIATRIC
HOSPITALS**

**PSYCHIATRIC
NURSING UNITS
IN GENERAL
ACUTE CARE
HOSPITALS**

**SPECIAL TREATMENT
PROGRAMS
IN SKILLED NURSING
FACILITIES**

**[OSHPD 1, 2 & 5]
BUILDINGS**

INTRODUCTION

The California Department of Health Care Access and Information (HCAI) – Office of Statewide Hospital Planning and Development (OSHPD), formerly Facilities Development Division, adopted new standards for Acute Psychiatric Hospitals for the 2016 California Building Standards Code – Mid-cycle edition. The new section, 1228, provides standards specifically for behavioral health. In 2018, OSHPD was presented the prestigious Simanek Distinguished Service Award by the California Hospital Association (CHA) for its efforts in bringing forth these much-needed standards.

“The Simanek Distinguished Service Award recognizes leadership that promotes vision and excellence in behavioral health care services; outstanding contributions to hospitals and health care services in either in- or outpatient behavioral health settings; and special achievements as demonstrated by a successful project, program, or action.”

The building standards for Acute Psychiatric Hospitals are now considerably different from what they were in the past. The structural requirements are based on model code with the “Importance Factor” being based on the number of patients served instead of the number of stories in the building. The architectural standards allow for the special needs and risks that must be considered in a behavioral health setting. The fire and life safety standards for locked units and/or buildings have also changed with the incorporation of the I-2 “with restraint” occupancy such that acute psychiatric hospitals are no longer required to be designed to the jail and prison standards of an “I-3” occupancy.

The following *Advisory Guide* is intended to be used for general reference only. The *Guide* addresses projects associated with new facilities and alterations to existing facilities. It is also limited to facilities under the jurisdiction of HCAI. This includes Acute Psychiatric Hospitals, Psychiatric Nursing Units provided within General Acute Care Hospitals, and Special Treatment Programs within Skilled Nursing Facilities licensed under §1250 of the California Health & Safety Code, under the jurisdiction of the California Department of Public Health (CDPH).

Department of Health Care Access and Information (HCAI)
*has drafted this Advisory Guide in consultation with the
California Department of Public Health (CDPH)*

Special thanks to Ferial Asadies, Brian Giebink and Anosha Zanjani of HDR for their contributions to this guide.

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I. BEHAVIORAL HEALTH FACILITY TYPES

Behavioral health facilities in California are regulated by various governmental agencies with different jurisdictional authority:

DDS Regional Centers – The California Department of Developmental Services (DDS) has the authority for regulation of Behavioral Health Care through the Department of Managed Health Care (DMHC). These are not related to the psychiatric facilities under HCAI jurisdiction.

Mental Health Rehabilitation Centers (MHRC), Psychiatric Health Facilities (PHF), and County Lanterman-Petris-Short (LPS) Facilities – Provide Behavioral Health Services licensed by the Department of Health Care Services (DHCS), not CDPH, and are not under HCAI jurisdiction.

Acute Psychiatric Hospital (APH) – 24-hr inpatient care for mentally disordered, or incompetent patients. APH facilities provide medical, nursing, rehabilitative, pharmacy and dietary services and are licensed by CDPH under §1250 of the Health & Safety Code and Title 22 §71000. APH facilities are under HCAI jurisdiction and regulated under CBC Section 1228.

Psychiatric Nursing Unit within a **General Acute Care Hospital (GACH)** – A separate and distinct nursing unit for mentally disordered patients within a licensed GACH provided as a Supplemental Service on the hospital's license. The GACH and the Supplemental Service are licensed by CDPH under §1250 of the Health & Safety Code and Title 22 §70000. Psychiatric Nursing Units are under HCAI jurisdiction and regulated under CBC Section 1224.31 or 1228.

Special Treatment Program (STP) within a **Skilled Nursing Facility (SNF)** – A program to serve patients who have a chronic psychiatric impairment and whose adaptive functioning is moderately impaired provided as an Optional Service on the SNF's license. The SNF and the Optional Service are licensed by CDPH under §1250 of the Health & Safety Code and Title 22 §72000. Special Treatment Programs are under HCAI jurisdiction and regulated under CBC Section 1225.6.6. This *Guide* does not address Special Treatment Programs directly although many concepts would be applicable. The Patient Safety Risk Assessment is required for these units.

Psychology Clinics – A clinic which provides psychology advice, services, or treatment to patients under the direction of a clinical psychologist. The clinic is licensed by CDPH under §1200 of the Health & Safety Code and Title 22 §75000. Requirements for psychology clinics are provided under CBC Section 1226.12, however the permitting and construction are under the local building authority and not under HCAI jurisdiction. This *Guide* does not specifically address these clinics.

This *Guide* is intended primarily for the design and construction of Acute Psychiatric Hospitals, Psychiatric Nursing Units provided within a General Acute Care Hospital, Special Treatment Programs within a Skilled Nursing Facility, and separate, free-standing, Psychology Clinics where relevant.

II. CODE REFERENCES

This *Advisory Guide* is the result of a joint effort between HCAI and other regulatory authorities. Consequently, references from a number of code sources are included:

California Building Standards Code (CBSC) are direct code requirements supported by Title 24, CCR, California Building Standards Code (CBSC) including the California Building Code (CBC), California Electrical Code (CEC), California Mechanical Code (CMC) and California Plumbing Code (CPC). As noted under Section I above:

- **CBC Section 1224.31** relates to medical Psychiatric Nursing Units provided within General Acute Care Hospitals **[OSHPD-1]** as a Supplemental Service.
- **CBC Section 1225.6.6** relates to Special Treatment Programs provided within Skilled Nursing Facilities **[OSHPD-2]** as an Optional Service.
- **CBC Section 1226.12** relates to Psychology Clinics **[OSHPD-3]**
- **CBC Section 1228** relates to Acute Psychiatric Hospitals **[OSHPD-5]** and APUs within a GACH.
- **CEC, CMC, and CPC Sections** amended by HCAI include the acronyms **[OSHPD-1]**, **[OSHPD-2]**, **[OSHPD-3]**, and **[OSHPD-5]** as applicable.

Title 22 Sections relate to the licensing requirements under the California Department of Public Health (CDPH).

- **§70000** – Regulates General Acute Care Hospitals, including any Supplemental Services such as Psychiatric Nursing Units.
- **§71000** – Regulates Acute Psychiatric Hospitals
- **§72000** – Regulates Skilled Nursing Facilities including Optional Services such as Special Treatment Programs

Health & Safety Code (H&SC) Sections relate to chaptered statutory requirements

- **§1200** – Reference to licensed Primary Care, Specialty, and Psychology Clinics
- **§1250** – Reference to licensed General Acute Care Hospitals, Acute Psychiatric Hospitals, and Skilled Nursing Facilities.
- **§129675** – Reference to the Alfred E. Alquist Hospital Facilities Seismic Safety Act of 1983. Defines HCAI mandate for building standards, “hospital buildings” definition, and jurisdictional authority.

This *Guide* is to be used for reference only. Whereas it presents code information regarding key elements of Acute Psychiatric Hospitals, this guide shall not be considered a complete representation of all requirements. Compliance with applicable laws, regulations and codes are the responsibility of the design professional in responsible charge, in accordance with California Administrative Code section 7-115.

III. DEFINITIONS

Acute Psychiatric Hospital: Acute psychiatric hospital means a hospital having a duly constituted governing body with overall administrative and professional responsibility and an organized medical staff which provides 24-hour inpatient care for mentally disordered, incompetent or other patients referred to in Division 5 (commencing with Section 5000) or Division 6 (commencing with Section 6000) of the Welfare and Institutions Code, including the following basic services: medical, nursing, rehabilitative, pharmacy and dietary services. [CBC 1228.3] & [Title 22 §71005]

Basic Services. Basic services mean those essential services required by law for licensure as an acute psychiatric hospital including medical, nursing, rehabilitative, pharmaceutical, dietary and support services. [CBC Section 1228.3] & [Title 22 §71011]

Medical Service. Medical service means those medically and professionally directed services for the diagnosis, therapeutic management, and treatment of mentally disordered patients. For the purposes of these regulations, “mental disorder” is defined as any psychiatric illness or disease, whether functional or of organic origin. [§71201]

Medical Service General Requirements. [Title §71203] (a) The medical service shall consist of the following organized and staffed elements:

- (1) **Psychiatric component** (A) Psychiatrists or clinical psychologists within the scope of their licensure and subject to the rules of the facility shall be responsible for the diagnostic formulation for their patients and the development and implementation of each patient’s treatment plan. (B) A psychiatrist shall be available at all times for psychiatric emergencies.
- (2) **General medicine component.** (A) All incidental medical services necessary for the care and support of patients shall be provided by in-house staff or through the use of outside resources in accordance with Section 71513 of Title 22. (B) Incidental services include but are not limited to: General medicine and surgery; Dental; Radiological; Laboratory; Anesthesia; Podiatry; Physical therapy; Speech therapy; Audiology.
- (3) **Psychological component.** (A) Psychological service shall be provided by clinical psychologists within the scope of their licensure and subject to the provisions of Section 1316.5 of the Health and Safety Code. (B) Staff physicians shall assume responsibility for those aspects of patient care which may be provided only by physicians.
- (4) **Social services component** (A) Social service shall be provided by social workers under the direction of the medical staff.

Distinct Part. Distinct part means an identifiable unit accommodating beds and related facilities including, but not limited to, contiguous rooms, a wing, floor or building that is approved by the Department [of Public Health] for a specific purpose. [Title 22 §70027 & §72041]

General Acute Care Hospital: A hospital licensed by the California Department of Public Health, having a duly constituted governing body with overall administrative and professional responsibility and an organized medical staff which provides 24-hour inpatient care, including the basic services. [CBC 1224.3] & [Title 22 §70005]

Basic Services. Those essential services required for licensure as a hospital, including medical, nursing, surgical, anesthesia, laboratory, radiology, pharmacy, dietary services and support services. See “Supplemental Services.” [CBC Section 1224.3] & [Title 22 §70011]

Medical Service. Medical service means those preventative, diagnostic and therapeutic measures performed by or at the request of members of the organized medical staff. [Title 22 §70201] – note the difference between Acute Psych above and General Acute Care. See additional clarification below for General Acute Care regarding internal medicine.

Medical Service Staff. A physician shall have overall responsibility for the medical service. This physician shall be certified or eligible for certification in internal medicine by the American Board of Internal Medicine. If such an internist is not available, a physician, with training and experience in internal medicine, shall be responsible for the service. [Title 22 §70205]

Nursing Unit. A designated patient care area of the hospital which is planned, organized, operated, and maintained to function as a unit. It includes patient rooms with adequate support facilities, services and personnel providing nursing care and necessary management of patients. [CBC Section 1224.3] & [Title 22 §70049]

Sally Port. A compartment provided with two or more doors where the intended purpose is to prevent continuous and unobstructed passage by allowing the release of only one door at a time. [CBC Section 1228.3]

Supplemental Service. An inpatient or outpatient service which is not required to be provided by law or regulation for licensure. A supplemental service, when provided, must accommodate the provisions of this section. [CBC Section 1224.3] & [Title 22 §70067]

Skilled Nursing Facility. Skilled nursing facility means a health facility or a distinct part of a hospital which provides continuous skilled nursing care and supportive care to patients whose primary need is for availability of skilled nursing care and, as a minimum, includes physician, skilled nursing, dietary, pharmaceutical services and an activity program. [Title 22 §72103]

Optional Service Units – “Optional service unit” means a functional unit of a skilled nursing facility which is organized, staffed, and equipped to provide a specific type or types of patient care. A facility is not required to operate an optional service unit. [Title 22 §72401]

IV. GENERAL ACUTE CARE VS ACUTE PSYCHIATRIC HOSPITALS

Both General Acute Care Hospitals (GACH) and Acute Psychiatric Hospitals (APH) are regulated under section §1250 of the California Health & Safety Code and can serve psychiatric inpatients. Title 22 separates licensing requirements between §70000 (GACH) and §71000 (APH). Title 24 did not until the 2018 Supplement for the 2016 code edition introduced new CBC Section 1228. Acute Psychiatric Hospitals became identified with [OSHPD-5] under the 2019 edition of the code and are no longer subject to [OSHPD-1] requirements.

- 1. Structural Differences.** The “Alquist Act” (H&SC §129680) requires “*proper building standards*” for hospital buildings “*that house patients who have less than the capacity of normally healthy persons to protect themselves, and that must be reasonably capable of providing services to the public after a disaster...*” Subsequent legislation (chaptered as §130000) clarified some of the intent, adding the requirement to upgrade or replace hospital buildings such that the state can “*rely on hospitals to support patients and offer medical aid to earthquake victims.*” Further clarification was added and codified under Chapter 6 of the California Administrative Code. Specifically, it “*precluded hospital buildings that may be licensed under the above-mentioned code sections but provide skilled nursing or acute psychiatric services only.*”

Further examination and alignment resulted in treating SNF and Acute Psych buildings differently from General Acute Care Hospital Buildings under the 2019 edition of the code. SNFs became OSHPD-2 for structural requirements as well as functional requirements, and APHs became OSHPD-5. CBC Chapter 16A (HCAI amendments) was then limited to OSHPD-1 (GACH) buildings, while OSHPD-2 (SNF) and OSHPD-5 (APH) were regulated under Chapter 16 (model code). Under model code, Table 1604.5 establishes the Risk Category of Buildings and Other Structures. Certain I-2 Occupancies under Condition 1 having 50 or more care recipients and under Condition 2 not having emergency surgery or emergency treatment facilities are Risk Category III.

With SNFs and APHs no longer in Chapter 16A, HCAI clarified the Chapter 16 Table’s application to those facilities with an amendment. [OSHPD-2] Skilled Nursing Facilities and [OSHPD-5] Acute Psychiatric Hospitals, having 50 or more care recipients, are listed as Risk Category III. Note that [OSHPD-1] GACHs and [OSHPD-4] Correctional Treatment Centers remain under Chapter 16A and Table 1604A.5, where they are shown as Risk Category IV. This results in a Seismic Importance Factor I_e of 1.25 for SNFs and APHs (as Risk Category III) and I_e of 1.5 for GACHs (as Risk Category IV) per Table 1.5-2 in ASCE 7 *Minimum Design Loads and Associated Criteria for Buildings and Other Structures*. Note that this factor generally results in SNFs and APHs having a structural strength that is 25% stronger than typical buildings, while GACHs have a structural strength that is 50% stronger. This effort brings the structural requirements for Acute Psychiatric Hospitals into closer alignment with the national standards.

- 2. Accessibility.** All new construction and alterations to existing non-residential buildings are required to comply with the accessibility standards presented in Chapter 11B of the California Building Code. Patient safety risk associated with psychiatric patients must be considered when applying accessibility standards. While the standards associated with Chapter 11B address most circumstances, Section 11B-103 states that *“nothing in these requirements prevents the use of designs, products, or technologies as alternative to those prescribed, provided they result in substantially equivalent or greater accessibility and usability.”* The application of accessibility standards must respond to the nature, function and specific use of the building, or portion of building, and not result in a condition that renders that space unusable by the population it is intended to serve.

CBC Section 11B-232 addresses some of the special circumstances associated with “detention facilities and correctional facilities,” however there is no section addressing similar circumstances associated with acute psychiatric facilities. As a subclassification of “hospital”, APHs are governed by Section 11B-232.2 and are required to have at least 10% of patient bedrooms that are accessible in compliance with 11B-805. Section 11B-805 is intended primarily for General Acute Care Hospitals and some consideration must be given to the patient population when applying these standards to Acute Psychiatric Hospitals.

CBC Section 1228.2.1 requires a Functional Program that includes a Patient Safety Risk Assessment in compliance with California Administrative Code Section 7-119. This includes a “Behavioral and Mental Health Risk Assessment” and identification of “Behavioral and Mental Health Elements (Psychiatric Patient Injury and Suicide Prevention),” and appropriate design solution response. Some of these elements are discussed in CBC Section 1228.4 (e.g.: handwashing fixtures under Section 1228.4.22), however *“specific application shall respond to the patient injury and suicide prevention component of the Patient Safety Risk Assessment.”* As an example, accessible showers associated with accessible patient rooms, shall meet the size and configuration compliant with CBC Section 11B-608, however if the folding seat required by Section 608.4 results in ligature attachment points that are in conflict with the Patient Safety Risk Assessment of the intended patient population, an alternate solution should be proposed (e.g.: use of a portable bench). Note also that grab bar requirements in Section 11B-609.2 are modified by Acute Psych requirements under Section 1228.4.18 as ligature resistant.

- 3. Fire & Life Safety.** “Restraint” refers to the physical retention of a person within a room, area, portion of building and/or buildings by means of locked doors inoperable by the person restrained. In addition to general requirements found in CBC Chapters 5 and 6, specific code requirements for construction type, height, and area limitations of facilities that house patients who are restrained are found in CBC Section 407.1. Code requirements for interior finish limitations are found in CBC Section 803 and flooring requirements are addressed in CBC Section 804.4.3 for areas where patients whose personal liberties are restrained in I-2 facilities. This includes an exception to “noncombustible” to allow for other floor coverings

that comply with the requirements of ASTM Standard E648 and the specific optical density smoke ratings. CBC and CFC have specific fire alarm, smoke detection and sprinkler requirements for buildings with restraint, in addition to specific requirements in CBC Section 1010.1.9.7, and in addition to general requirements. CBC Chapter 10 has general requirements for exiting and CBC Sections 1010, 1010.1.9.7 and 1010.1.9.8.1 have specific requirements for controlled egress doors and delayed egress doors. These specific sections listed are in addition to all other applicable code and referenced standards requirements.

4. **Basic and Supplemental Services.** Prior to the 2018 Supplement to the 2016 CBC, “Basic Services” for Acute Psychiatric Hospitals were those associated with General Acute Care Hospitals under CBC Section 1224. *Exception 4* to Section 1224.2 allowed Acute Psychiatric Hospital “*surgical and anesthesia services to be provided by an outside licensed facility when approved by the licensing agency.*” This effectively removed “Surgical Service Space” (1224.15) and “Anesthesia Service Space” (1224.16) from the list of required Basic Services to be located within an Acute Psychiatric Hospital. Section 1224.31 then added requirements for Indoor and Outdoor Activity spaces, occupational therapy, dining, and recreation, for Psychiatric Nursing Units, to bring the Acute Psychiatric Hospital into alignment with the licensing requirements under Title 22 Section §71000.

With the introduction of CBC Section 1228, the requirements for Acute Psychiatric Hospitals are clarified under the new section. Not only were Surgery (1224.15) and Anesthesia (1224.16) removed, but the related support of Clinical Lab (1224.17) and Radiology/Imaging (1224.18) were also removed and shown as “reserved” sections under 1228. The Psychiatric Rehabilitation Activity Service was added as Section 1228.13. The resulting Basic Services under 1228 then aligned with Title 22 and matched the section number sequence of their counterparts under 1224. See the definitions of Basic Services under the definitions of “Acute Psychiatric Hospitals” and “General Acute Care Hospitals”.

Supplemental Services are not required for licensure, however, if provided, they need to comply with the functional requirements for that service space. CBC Section 1224.31 “Psychiatric Nursing Unit” is a Supplemental Service that may be provided by GACHs and CBC Sections 1228.28 “Electroconvulsive Therapy”, 1228.30 “Pediatric and Adolescent Psychiatric Unit”, 1228.31 “Forensic Psychiatric Unit”, 1228.42 “Clinical Lab”, and 1228.43 “Radiological Service” are Supplemental Services that may be provided by an APH as are Outpatient, ICF, and SNF units. Consequently, there is some overlap between GACHs and APHs. The difference, however, is that GACHs are acute medical care facilities in nature that may treat psychiatric patients, and APHs are mental health facilities in nature that may treat the occasional incidental medical issues that their psychiatric patients might present. Title 22 §71203 requires that “*all incidental medical services necessary for the care and support of patients shall be provided by in-house staff or through the use of outside resources...*” Some APHs will be more equipped to keep their patients at the facility and treat the occasional medical issue with in-house staff

than others. Generally, more acute medical issues would be referred and treated in a GACH. Discussion of the intended approach must be included in the Functional Program required by CAC Section 7-119.

5. **MEP Nuances.** The banner acronyms [OSHPD-1], [OSHPD-2] and [OSHPD-5] are used to identify HCAI amendments in the California Electrical Code (CEC), California Mechanical Code (CMC), and California Plumbing Code (CPC). General Acute Care Hospitals [OSHPD-1] are subject to the Alquist Act for health facility delivery of medical aid to earthquake victims. Not only do they need to be 50% stronger than a standard building but they also need to be equipped to provide services for prolonged periods of time despite a lapse in utility service. What is required for a GACH [OSHPD-1] is not necessarily required for an STP in a SNF [OSHPD-2] or for an APH [OSHPD-5].

The California Administrative Code (CAC), Table 11.1 requires GACH [OSHPD-1] hospital buildings to provide onsite supplies of water and holding tanks for sewage and liquid waste, sufficient to support 72 hours emergency operation integrated into the building plumbing system. This requirement does not apply to STPs in a SNF [OSHPD-2] or APHs [OSHPD-5].

CAC Table 11.1 requires an onsite emergency electrical system for essential services with an onsite fuel supply for 72 hours, for GACHs [OSHPD-1]. This is also supported by CEC Article 700.12. CEC Article 700.12 only requires 6 hours of onsite fuel supply for SNF [OSHPD-2] and APH [OSHPD-5] facilities.

CEC Article 517 Part III provides requirements for the Essential Electrical System. Article 517.31 requires three branches for General Acute Care Hospitals: “equipment branch”, “life safety branch”, and “critical branch”. Article 517.42 requires only two branches for Skilled Nursing Facilities and Acute Psychiatric Hospitals: “equipment branch” and “life safety branch,” unless they provide Critical Care (Category 1) and/or General Care (Category 2) services per Article 517.29. Note that Category 1 refers to space in which failure of equipment or a system is likely to cause major injury or death to patients, staff, or visitors and Category 2 refers to space in which failure of equipment or a system is likely to cause minor injury to patients, staff, or visitors. Furthermore, Category 3 refers to “Basic Care” space in which failure of equipment or a system is not likely to cause injury to the patients, staff, or visitors but can cause patient discomfort. Generally, SNF and APH facilities have only Category 3 spaces, not Category 1 or Category 2 spaces, unless they are providing a Supplemental Service with spaces such as Electroconvulsive Therapy or Sub-Acute Units. Most APHs and SNFs will have a two-branch essential electrical system per Article 517.42. Those that provide services with Category 1 and/or Category 2 spaces will need the three-branch essential electrical system to feed those spaces.

CEC Article 517.18 (B) Exception 4 states that “*psychiatric patient bedrooms shall not be required to have receptacle outlets installed in the room. If installed, the receptacles shall be tamper-resistant, controlled by a switch outside the room that*

is under the control of staff, and shall be protected by a ground-fault circuit interrupter.” Article 517.22 (D) requires that “where psychiatric care area is identified in the Patient Safety Risk Assessment as high- or medium-risk, lighting shall be tamper-resistant”; “Acute psychiatric patient bedrooms shall have general lighting and night lighting with at least one nightlight fixture in each bedroom that shall be controlled at the room entrance”; and “corridors in psychiatric nursing units shall have general illumination with provisions for reducing light levels at night”.

Under Article 517.123 “a nurse call is not required in psychiatric units, but if one is included the following shall apply: 1) provisions shall be made for easy removal or for covering of call button outlets; 2) all hardware shall have tamper-resistant fasteners; and 3) cords at all call stations in rooms designated for psychiatric patient use shall be detachable”.

CMC Section 320.5 includes requirements for security diffusers, grilles and registers that must be tamper-resistant for projects associated with psychiatric services.

Airborne Infection Isolation Rooms are required to be provided per CBC Section 1228.14.3. The room shall meet the requirements of CMC Section 414.0.

CPC Section 322.0 includes requirements for plumbing fixtures that must be tamper resistant. CBC Section 1228.4.22 allows the gooseneck spout for handwashing fixtures to be omitted to meet ligature-resistance requirements, provided the handwashing fixtures meet the controls, laminar flow and sink requirements of CPC Section 210. Handwashing stations for psychiatric patient rooms are required to be provided in the patient toilet room and are optional in the patient room as noted in CBC Section 1228.14.1.6. GACHs require the handwashing station in the patient room while a lavatory is required in the patient toilet room.

6. Medical Gas Requirements.

Per CBC Table 1224.4.6.1 one Oxygen and one Vacuum station outlet is required per Electroconvulsive Therapy Procedure Room. Portable equipment is permitted. Though medical gases are not required in psychiatric patient rooms, if provided, they must be tamper-resistant and ligature-resistant in accordance with the Patient Safety Risk Assessment.

V. FUNCTIONAL PROGRAM

PART 1: CALIFORNIA ADMINISTRATIVE CODE §7-119 FUNCTIONAL PROGRAM

“The owner or legal entity responsible for the outcome of the proposed health care facility design and construction project shall be responsible for providing a functional program to the project’s architect/engineer and to the Office.” The following elements of the Functional Program will help define the intended Services, Delivery of Care, and a Behavioral and Mental Health Risk Assessment of the intended patient population.

Environment of care requirements. *The functional program shall describe the functional requirements and relationships between the following environment of care components and key elements of the physical environment:*

A. Delivery of care model (concepts). *This shall include:*

- 1) *A description of the delivery of care model, including any unique features.*
- 2) *A description of the physical elements and key functional relationships necessary to support the intended delivery of care model.*

B. Patients, visitors, physicians, and staff accommodation and flow. *Design criteria for the following shall be described:*

- 1) *The physical environment necessary to accommodate facility users and administration of the delivery of care model.*
- 2) *The physical environment (including travel paths, desired amenities and separation of users and workflow) necessary to create operational efficiencies and facilitate ease of use by patients, families, visitors, staff, and physicians.*

C. Building infrastructure and systems design criteria. *Design criteria for the physical environment necessary to support organizational, technological, and building systems that facilitate the delivery of care model...*

Given the breadth of the delivery of behavioral health care in Acute Psychiatric Hospitals and in General Acute Care Hospitals. The descriptions provided in the Functional Program are vital in order to conduct an appropriate plan review, and for coordination with CDPH for appropriate site survey prior to initial licensure.

Medical Acuity – As discussed under Section IV, the ability for patients to assist in self-preservation relates to structural, fire & life safety, and the provision of Basic and Supplemental Services. While a General Acute Care Hospital (GACH) clearly must respond to higher acuity with some adjustment within a distinct Acute Psych Nursing Unit, the level of medical acuity expected within an Acute Psychiatric Hospital (APH) is less clear and needs definition within the Functional Program. How a facility will respond to the requirement that *“all incidental medical services necessary for the care and support of patients shall be provided by in-house staff or through the use of outside resources,”* will need clarification. Some “incidental” medical issues can easily be treated by an in-house attending physician in a typical treatment room, without any need for adjustments to supporting elements. Other medical issues might arise that require more specialized procedure and patient care

facilities. If these are intended to be treated on-site within an APH as opposed to being referred to a GACH, then appropriate environmental elements must be present. If the ability to transfer onto, and off of, a bed is a requirement for admission, the patient handling in nursing units with 6' wide corridors might be appropriate, however if housing of patients whose ability is compromised, then bed movement within 8' wide corridors would be more appropriate.

Patient Segregation – Some patient populations require segregation such as pediatric, adolescent, general adult, and forensic populations. While these populations would require separate and distinct nursing units, some sharing of common facilities might be practical. Patient flow, travel paths adjacent to other units, and prescribed timing of use to maintain required segregation should be described in detail.

Patient Safety Risk Assessment. *Projects associated with acute psychiatric hospitals, acute psychiatric nursing units in general acute care hospitals, and special treatment programs service units in skilled nursing facilities shall include a patient safety risk assessment. At a minimum, a Behavioral and Mental Health Assessment shall be addressed as part of the Patient Safety Risk Assessment. The Patient Safety Risk Assessment shall be subject to review and approval by the California Department of Public Health.* There are three components to the safety risk assessment: assessment of the patient population, identification of elements that are associated with risk, and appropriate mitigation to reduce risk.

- A. **Behavioral and Mental Health Risk Assessment.** ... shall include evaluation of the population at risk and the nature and scope of the project, taking into account the model of care and operational considerations, and proposed built environment solutions to mitigate potential risks and hazards.
- B. **Behavioral and Mental Health Elements (Psychiatric Patient Injury and Suicide Prevention).** The safety risk assessment report shall identify areas that will serve patients at risk of mental health injury and suicide.
- C. **Behavioral and Mental Health Response.**
 - 1) The safety risk assessment team shall identify mitigating features for the identified at-risk locations.
 - 2) The design of behavioral and mental health patient care settings shall address the need for a safe treatment environment for those who may present unique challenges and risks as a result of their mental condition.
 - i. The patient environment shall be designed to protect the privacy, dignity, and health of patients and address the potential risks related to patient elopement, and harm to self, to others, and to the environment.
 - ii. The design of behavioral/mental health patient areas shall accommodate the need for clinical and security resources.

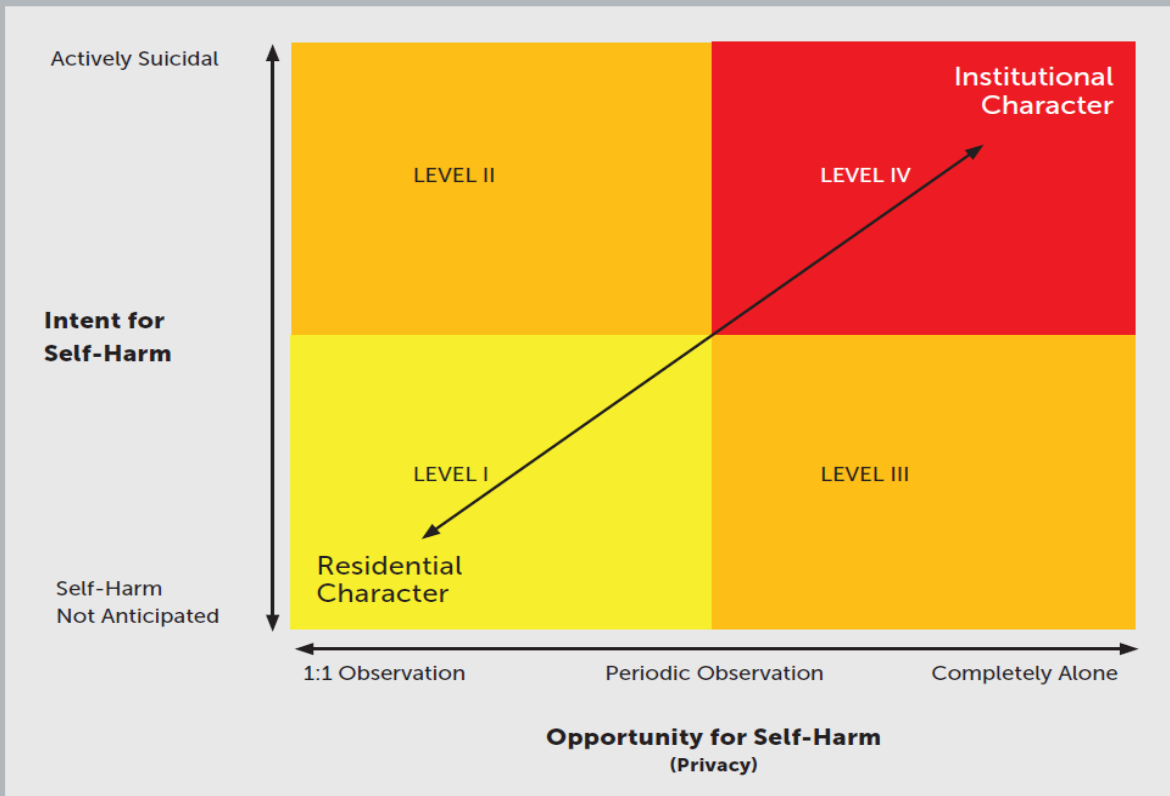
Behavioral and mental risk should be determined through simultaneous consideration of the inherent danger of any individual environmental feature because of patient profile

and acuity, the anticipated level of staff supervision for each area, and space visibility and supervision.

Sources of information that could be considered can be found in *Patient Safety Standards, Materials and Systems Guidelines* published by the New York State Office of Mental Health, and the *Design Guide for the Built Environment of Behavioral Health Facilities*. **(1)**

- (1)** A current, updated edition of the Design Guide, now titled “Behavioral Health Design Guide” is available for download through access from the publisher’s website: Behavioral Health Facility Consulting, LLC at www.bhfllc.com.

Hunt/Sine: Patient Safety Risk Assessment Matrix



Refer to footnote (1) above for access to current, updated edition of this Patient Safety Risk Assessment Matrix

Each area should be evaluated to identify the architectural details, surfaces, and furnishings and exposed mechanical and electrical devices and components to be addressed in the risk assessment. Examples of areas to be included in a mental health risk assessment include the following:

Highest Level of Risk

1. Seclusion rooms (where patient acuity poses an increased risk).
2. Patient bedrooms and toilet rooms (areas where patients spend long periods of time out of direct supervision of the staff).
3. Psychiatric emergency department (comprehensive psychiatric emergency program) and areas under good supervision but dealing with unpredictable patients under initial evaluation and often under heavy medication.

Moderate Level of Risk

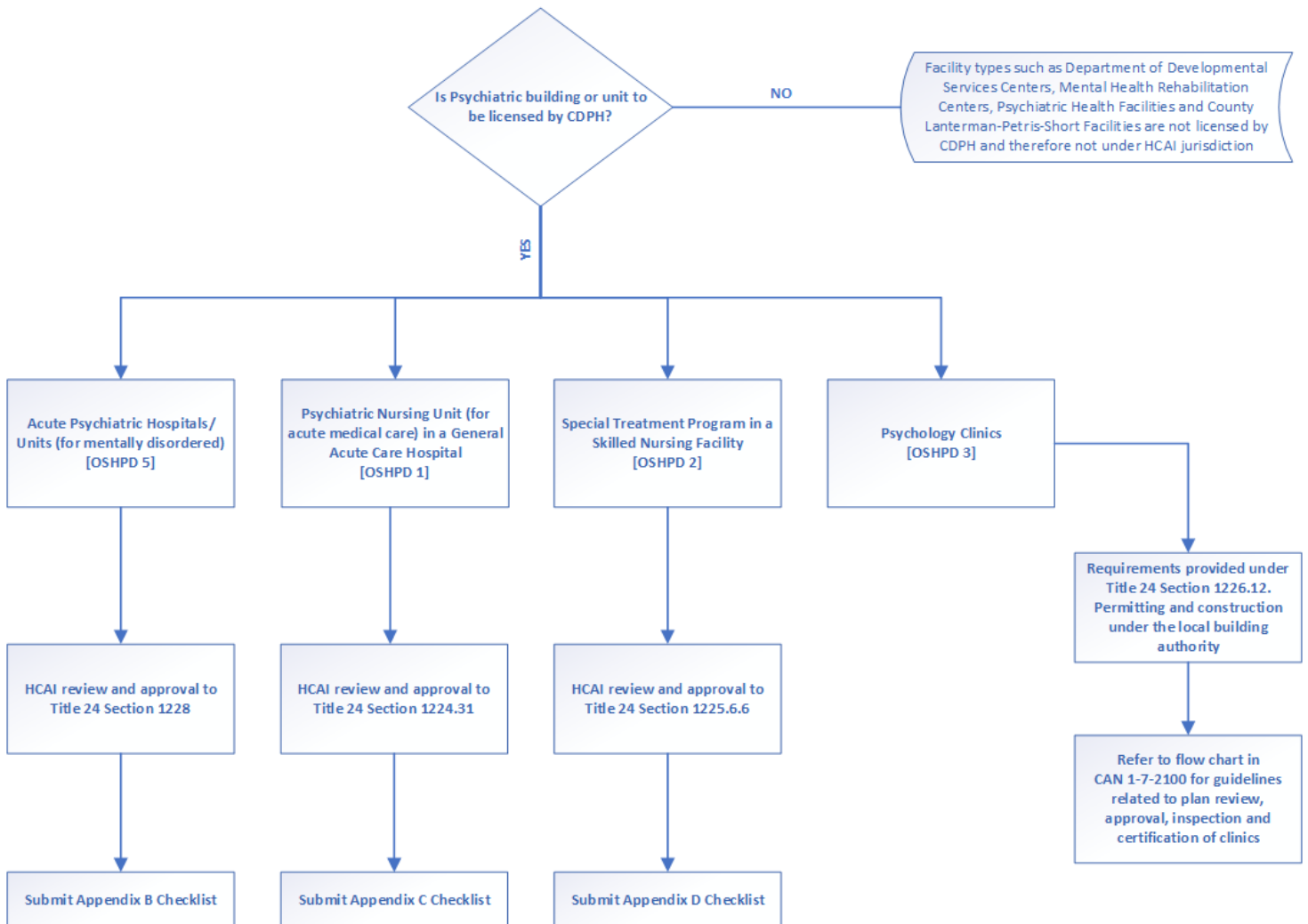
1. Activity spaces, group rooms, and treatment spaces (supervised with good visibility)
2. Dining rooms and recreation spaces, both indoor and outdoor.

Lowest Level of Risk

1. Exam rooms, private offices, and conciliation rooms (always supervised).
2. Staff and support areas (not accessible by patients).

VI. DECISION FLOW CHART

CALIFORNIA ACUTE PSYCHIATRIC GUIDELINES FOR PLAN REVIEW, APPROVAL, INSPECTION AND CERTIFICATION



NOTE: Compliance with Title 24, California Building Standards Code is required unless otherwise noted.

VII. HCAI SUBMITTAL INSTRUCTIONS

1. In addition to code citations listed in this document, acute psychiatric facility projects, as with all construction, remodeling, and alteration of hospital buildings and structures, are required to be designed in conformance with applicable codes as noted in HCAI CAN 1-0.
2. For those projects which are affected by local planning and zoning, evidence of approval is required as part of the submittal to HCAI.
3. The *Checklist* portion of this guide in the following Appendices is provided to assist the design professional in responsible charge [CAC 7-115] in the preparation and submission of project documents. Inclusion of this checklist with all HCAI submittals for acute psychiatric projects will facilitate a more expeditious review. **(2)**

HCAI projects that are created with an open project number via the eServices Portal must have a functional program, as described in Section V. of this Advisory Guide, and either a preliminary or final submittal received by the Office within 10 days. Open HCAI project numbers not accompanied by a submittal within 10 days of the creation of said numbers will be cancelled.

- (2)** CBC Section 1224 language (when referenced from CBC Section 1228) has been included herein as a checklist item **ONLY** when the referenced code section is of an element or space typically found in an Acute Psychiatric Hospital setting (environment). Otherwise, if not typically found in this APH setting (environment), CBC Section 1224 references are identified by number only, without insertion of the code language.

APPENDIX A

PATIENT SAFETY RISK ASSESSMENT [CAC 7-119 (c) 9]

Facility Name:	Click or tap here to enter text.		
HCAI Project Number:	Click or tap here to enter text.		
Facility Number:	Click or tap here to enter text.	Date:	Click or tap here to enter text.
<input type="checkbox"/>	Provide simplified overall plan identifying all program areas and associated risk levels (see Figure 2 below for sample plan and legend)		
<input type="checkbox"/>	Check box if proposal is for an Acute Psychiatric Hospital (APH) or unit (for mentally disordered) and submit Appendix B as separate file.		
<input type="checkbox"/>	Check box if proposal is for an Acute Psychiatric Unit (for acute medical) within a General Acute Care Hospital (GACH) and submit Appendix C as separate file.		
<input type="checkbox"/>	Check box if proposal is for a Special Treatment Program (for mentally disordered) within a Skilled Nursing Facility (SNF) or Intermediate-Care Facility (ICF) and submit Appendix D as separate file.		
A) Behavioral and Mental Health Risk Assessment			
Identify patient populations served (for example, inpatient children and adolescents, inpatient adults, forensic, outpatients,) and assess items i. through iv. for each.			
a. Evaluation of (<i>enter patient population type #1 here</i>)			
<input type="checkbox"/>	i. Inherent risks with this population		
<input type="checkbox"/>	ii. Model of Care		
<input type="checkbox"/>	iii. Operational Considerations		
<input type="checkbox"/>	iv. Built Environment Solutions		
b. Evaluation of (<i>enter patient population type #2 here</i>)			
<input type="checkbox"/>	i. Inherent risks with this population		
<input type="checkbox"/>	ii. Model of Care		
<input type="checkbox"/>	iii. Operational Considerations		
<input type="checkbox"/>	iv. Built Environment Solutions		
c. Evaluation of (<i>enter patient population type #3, 4, 5, etc. here</i>)			
<input type="checkbox"/>	i. Inherent risks with this population		

<input type="checkbox"/>	ii. Model of Care
<input type="checkbox"/>	iii. Operational Considerations
<input type="checkbox"/>	iv. Built Environment Solutions

B) Behavioral and Mental Health Elements (Psychiatric Patient Injury and Suicide Prevention)

Consideration to be given to patient profile and acuity, the anticipated level of staff supervision for each area, and space visibility and supervision. Identify each program area that will serve patients at risk of mental health injury and their corresponding risk level for injury and need for suicide prevention. Examples of areas include the following:

Highest Level of Risk

<input type="checkbox"/>	1. Seclusion Rooms
<input type="checkbox"/>	2. Patient bedrooms and toilet rooms
<input type="checkbox"/>	3. Patient Intake Services

Moderate Level of Risk

<input type="checkbox"/>	1. Activity spaces, group rooms, & treatment spaces
<input type="checkbox"/>	2. Dining rooms & recreation spaces, both indoor & outdoor
<input type="checkbox"/>	3. Corridors

Lowest Level of Risk

<input type="checkbox"/>	1. Exam rooms, private offices, and conciliation rooms
<input type="checkbox"/>	2. Staff & support areas

C) Behavioral and Mental Health Response

Identify mitigating features for the identified at-risk location. Note that more than three levels of risk can be identified. Depict assigned risk levels on a keynoted plan with a risk level legend. Coordinate with section B) above. See **Figure 2** below.

Check all patient care setting design considerations implemented

<input type="checkbox"/>	Patient privacy, dignity & health
<input type="checkbox"/>	Risks related to patient elopement
<input type="checkbox"/>	Harm to self, to others, and to the environment
<input type="checkbox"/>	Clinical needs
<input type="checkbox"/>	Security needs

Highest Level of Risk- Mitigating Features: *(list here or refer to legend)*

Moderate Level of Risk- Mitigating Features: <i>(list here or refer to legend)</i>
Lowest Level of Risk- Mitigating Features: <i>(list here or refer to legend)</i>

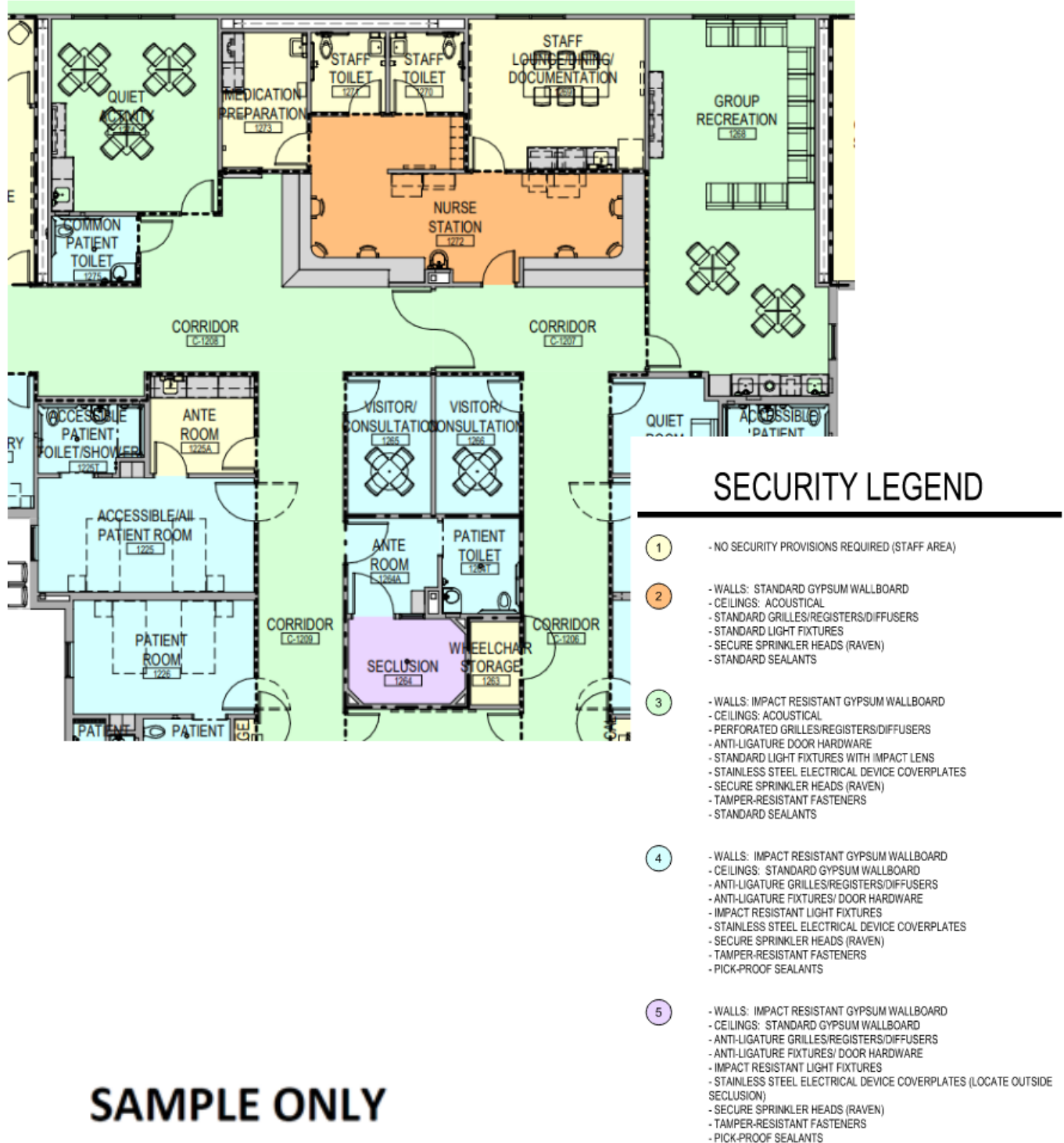


Figure 2: Sample of keynoted plan with risk level legend

APPENDIX B

1228 [OSHPD-5] ACUTE PSYCHIATRIC HOSPITALS OR UNITS

Facility Name:	Click or tap here to enter text.		
HCAI Project Number:	Click or tap here to enter text.		
Facility Number:	Click or tap here to enter text.	Date:	Click or tap here to enter text.
1228 [OSHPD 5] ACUTE PSYCHIATRIC HOSPITALS			
1228.1 Scope.			
<input type="checkbox"/>	<i>The provisions of this section shall apply to acute psychiatric hospitals.</i>		
1228.2 Application.			
<input type="checkbox"/>	<i>New buildings and additions, alterations or repairs to existing buildings subject to licensure shall comply with applicable provisions of the California Electrical Code, California Mechanical Code, California Plumbing Code, California Energy Code, California Fire Code (Parts 3, 4, 5, 6 and 9 of Title 24) and this section.</i> <i>Note: Refer to the applicable exceptions under Section 1224.2.</i>		
1228.2.1 Functional program.			
<input type="checkbox"/>	<i>Refer to California Administrative Code (Part 1 of Title 24), Section 7-119, Functional Program, for requirements. Projects associated with acute psychiatric hospitals and with psychiatric nursing units in general acute care hospitals shall include a Patient Safety Risk Assessment.</i>		
1228.4 GENERAL CONSTRUCTION.			
<input type="checkbox"/>	<i>Acute psychiatric hospitals shall comply with the provisions under Section 1224.4, General Construction, where applicable, except as supplemented, amended or modified below. Specific application shall respond to the patient injury and suicide prevention component of the Patient Safety Risk Assessment prepared under California Administrative Code (Part 1 of Title 24), Section 7-119.</i>		
1228.4.1 Jurisdiction.			
1228.4.1.1 Services/systems and utilities.			
<input type="checkbox"/>	<i>Services/systems and utilities shall only originate in, pass through or under structures which are under the jurisdiction of the Office of Statewide Hospital Planning and Development (OSHPD).</i>		
1228.4.1.2 Means of egress.			
<input type="checkbox"/>	<i>Means of egress shall only pass through structures that are under the jurisdiction of the Office of Statewide Hospital Planning and Development (OSHPD).</i>		

1228.4.4 Support areas for patients.	
1228.4.4.1 Examination and treatment rooms.	
1228.4.4.1.1 Examination room.	
<input type="checkbox"/>	<i>Examination rooms in acute psychiatric hospitals shall meet the requirements of Section 1224.4.4.1.1 as amended below:</i>
<input type="checkbox"/>	Examination room. <i>Examination rooms in acute psychiatric hospital shall have a minimum clear floor area of 120 square feet (11.15 m²), the least dimension of which shall be 8 feet (2438 mm). The room shall contain a handwashing fixture and accommodations for written or electronic documentation shall be provided. Examination rooms shall be permitted to serve several nursing units and shall be permitted to be on a different floor, unless prohibited by specific sections of this code or by the Patient Safety Risk Assessment. (compiled)</i>
1228.4.4.1.1.1 Location.	
<input type="checkbox"/>	<i>Examination rooms shall be permitted to serve several nursing units and shall be permitted to be on a different floor, unless prohibited by specific sections of this code or by the Patient Safety Risk Assessment.</i>
1228.4.4.1.1.2 Space requirements.	
<input type="checkbox"/>	<i>Examination rooms shall have a minimum clear floor area of 120 square feet (11.15 m²).</i>
1228.4.4.1.2 Treatment room.	
<input type="checkbox"/>	<i>Where provided, refer to Section 1224.4.4.1.2.</i>
<input type="checkbox"/>	1224.4.4.1.2 Treatment room. <i>Unless specified elsewhere, if a treatment room is provided, it shall have a minimum clear floor area of 120 square feet (11.15 m²), the least dimension of which shall be 10 feet (3048 mm). A minimum of 3 feet (914 mm) is required between the sides and foot of the bed/gurney/ table and any wall or other fixed obstruction. The room shall contain an examination light, a work counter for medical equipment, a handwashing fixture, cabinets, medication storage and counter space for writing or electronic documentation. If used for exercise stress testing, include space for a crash cart and patient resuscitation and omit the exam light. Multi-bed treatment rooms shall have separate patient cubicles with a minimum clear floor area of 80 square feet (7.4 m²) per cubicle. Each cubicle shall contain an examination light, counter and storage facilities. In multi-bed treatment rooms, a handwashing fixture shall be provided in the room for each three or fewer cubicles.</i>
1228.4.4.1.3 Airborne infection isolation exam/treatment room.	
<input type="checkbox"/>	<i>Where provided, refer to Section 1224.4.4.1.3.</i>
1228.4.4.1.4 Seclusion room. Refer to Section 1224.4.4.1.5.	
<input type="checkbox"/>	1224.4.4.1.5 Seclusion room. <i>Where provided, seclusion rooms shall comply with the following requirements:</i>
<input type="checkbox"/>	1224.4.4.1.5.1 General.

<input type="checkbox"/>	1. Capacity. Each room shall accommodate only one patient.
<input type="checkbox"/>	2. Layout and access. Seclusion rooms shall be accessed through an anteroom or vestibule that also provides access to a toilet room. The door openings to the anteroom and the toilet room shall have a minimum clear width of 3 feet 8 inches (1118 mm).
<input type="checkbox"/>	3. The room(s) shall be located to permit observation from the nurse station. (3)
<input type="checkbox"/>	4. Seclusion rooms shall be permitted to be grouped together and may share a common vestibule/anteroom.
<input type="checkbox"/>	1224.4.4.1.5.2 Space requirements.
<input type="checkbox"/>	Seclusion rooms shall have a minimum clear floor area of 60 square feet (5.57 m ²) with a minimum wall length of 7 feet (2134 mm) and a maximum wall length of 11 feet (3353 mm). (3) Exception: Where a room for restraining patients is authorized by California Department of Public Health, it shall have a minimum clear floor area of 80 square feet (7.43 m ²) with a minimum wall length of 7 feet (2134 mm) and a maximum wall length of 11 feet (3353 mm).
<input type="checkbox"/>	1224.4.4.1.5.3 Special design elements. Seclusion rooms shall be designed and constructed in compliance with the following requirements:
<input type="checkbox"/>	1. The walls, ceiling and floor of the seclusion room shall be designed to withstand direct and forceful impact. If padded materials are used inside the room, they shall meet the interior finish requirements in Chapter 8, Interior Finishes, of this code.
<input type="checkbox"/>	2. Minimum ceiling height shall be 9 feet (2743 mm).
<input type="checkbox"/>	3. Doors. 3.1. Door hardware shall be ligature resistant. 3.2. The entrance door to the seclusion room shall swing outward. 3.3. Doors shall permit staff observation of the patient through a view panel while also maintaining provisions for patient privacy. The maximum sill height shall be 36 inches (914 mm) above the finish floor. The view panel shall be fixed glazing with polycarbonate or laminate on the inside of the glazing.
<input type="checkbox"/>	4. Seclusion rooms shall not contain outside corners or edges.
<input type="checkbox"/>	5. All items in the room (e.g., lighting fixtures, sprinkler heads, HVAC grilles and surveillance cameras, etc.) shall be tamper resistant.
<input type="checkbox"/>	6. Electrical switches and receptacles are prohibited in the seclusion room.
1228.4.4.1.5 Quiet room.	
<input type="checkbox"/>	Where provided, a quiet room for a single patient who requires a period of solitude but does not require a seclusion room, shall have a minimum clear floor area of 80 square feet (7.43 m ²).
1228.4.4.2 Administrative center(s) or nurse station(s). Refer to Section 1224.4.4.2.	

<input type="checkbox"/>	1224.4.4.2 Nurse station(s). This area shall have space for counters and storage and at least one hand-washing station shall be located in or directly accessible to the nurse station. It may be combined with or include centers for reception, charting and communication.
1228.4.4.3 Specimen and blood collection facilities.	
<input type="checkbox"/>	Where provided, refer to Section 1224.4.4.3.
1228.4.4.4 Medication station. Refer to Section 1224.4.4.4.	
<input type="checkbox"/>	1224.4.4.4 Medication station. Provision shall be made for distribution of medications. This shall be done from a medication preparation room or from a self-contained dispensing unit.
<input type="checkbox"/>	1224.4.4.4.1 Medication preparation room. If provided, this room shall be lockable and be directly accessible from the nursing station. When a medicine preparation room is to be used to store one or more self-contained medicine dispensing units, the room shall be designed with adequate space to prepare medicines with the self-contained medicine dispensing unit(s) present. Medicine preparation rooms shall include:
<input type="checkbox"/>	1. Work counter.
<input type="checkbox"/>	2. Handwashing station.
<input type="checkbox"/>	3. Refrigerator.
<input type="checkbox"/>	4. Locked storage for controlled drugs
<input type="checkbox"/>	1224.4.4.4.2 Self-contained medication dispensing unit. If provided, a self-contained medicine dispensing unit shall be located at the nurses' station, in the clean utility room, or in an area where access to the self-contained medication dispensing unit is under the monitoring and control of nursing staff. Self-contained medication dispensing units shall be provided with essential power and lighting.
1228.4.4.5 Nourishment area or room. Refer to Section 1224.4.4.5.	
<input type="checkbox"/>	1224.4.4.5 Nourishment area or room. Nourishment areas or rooms required in patient care areas shall include the following:
<input type="checkbox"/>	1. Sink
<input type="checkbox"/>	2. Work counter
<input type="checkbox"/>	3. Refrigerator
<input type="checkbox"/>	4. Storage cabinets
<input type="checkbox"/>	5. Equipment for hot and cold nourishment between scheduled meals.
<input type="checkbox"/>	6. The nourishment shall include space for trays and dishes used for nonscheduled meal service.
<input type="checkbox"/>	7. Provisions and space shall be included for separate temporary storage of unused and soiled dietary trays not picked up at mealtime.
<input type="checkbox"/>	8. Handwashing stations separate from the nourishment sink shall be in the nourishment area or immediately accessible without passing through a door.

1228.4.4.6 Clean utility/work room. Refer to Section 1224.4.4.6.	
<input type="checkbox"/>	1224.4.4.6 Clean utility/workroom. The clean workroom or clean supply room shall be separate from and have no connection with the soiled workroom or soiled holding room. If the room is used for preparing patient care items, it shall contain the following:
<input type="checkbox"/>	1. Work counter
<input type="checkbox"/>	2. Handwashing station
<input type="checkbox"/>	3. Storage facilities for clean and sterile supplies
<input type="checkbox"/>	1224.4.4.6.1 Clean supply room. If the room is used only for storage and holding as part of a system for distribution of clean and sterile materials, the work counter or a handwashing station may be omitted.
1228.4.4.7 Soiled utility/work room. Refer to Section 1224.4.4.7.	
<input type="checkbox"/>	1224.4.4.7 Soiled utility/workroom. The soiled workroom or soiled holding room shall be separate from and have no connection with either clean workrooms or clean supply rooms. The soiled utility/workroom shall contain:
<input type="checkbox"/>	1. Clinical sink (or equivalent flushing-rim fixture).
<input type="checkbox"/>	2. Handwashing station
<input type="checkbox"/>	3. Work counter
<input type="checkbox"/>	4. Space for separate covered containers for soiled linen and/or waste
<input type="checkbox"/>	1224.4.4.7.1 Soiled holding room. Rooms used only for temporary holding soiled material may omit the clinical sink and work counter. If the flushing-rim clinical sink is eliminated, facilities for cleaning bedpans shall be provided elsewhere.
1228.4.5 Outpatient waiting rooms.	
<input type="checkbox"/>	Where provided, refer to Section 1224.4.5.
<input type="checkbox"/>	1224.4.5 Outpatient waiting rooms. Waiting rooms for outpatients shall provide a seating area and space for wheelchairs and have public corridor access. Public toilets, drinking fountains and telephones shall be readily accessible. Note: One waiting area may serve more than one department or service.
<input type="checkbox"/>	1224.4.5.1 Outpatient access. Outpatient access to services shall not traverse a nursing unit.
1228.4.6 Miscellaneous requirements. Refer to Section 1224.4.6	
<input type="checkbox"/>	1224.4.6 Miscellaneous requirements.
<input type="checkbox"/>	1224.4.6.1 Station outlets. Station outlets for oxygen, vacuum, and medical air shall comply with Table 1224.4.6.1.
<input type="checkbox"/>	1224.4.6.2 Gas and vacuum systems. The design, installation and testing of medical gas and vacuum systems shall conform to Table 1224.4.6.1 and NFPA 99.

<input type="checkbox"/>	1224.4.6.3 Hyperbaric facilities. The design and construction of hyperbaric facilities shall conform to NFPA 99; Health Care Facilities and Section 1224.39.5.
<input type="checkbox"/>	1224.4.6.4 Laboratories. The design and construction of hospital laboratories shall conform to NFPA 99.
<input type="checkbox"/>	1224.4.6.5 Nurse call systems. The location of nurse call devices shall comply with Table 1224.4.6.5. The design of call systems shall comply with the California Electrical Code, Part 3 of Title 24.
1228.4.7 Corridors. Refer to Section 1224.4.7.	
<input type="checkbox"/>	1224.4.7 Corridors.
<input type="checkbox"/>	1224.4.7.1 Width. The minimum width of corridors and hallways shall be 8 feet (2438 mm). Exception: Patient-care corridors and hallways in hospitals for psychiatric care of patients who are not bedridden shall have a minimum clear and unobstructed width of 6 feet (1829 mm). For the purposes of this section, bedridden patients shall be defined as patients confined to beds who would be transported or evacuated in beds or litters.
<input type="checkbox"/>	1224.4.7.2 Light traffic. Service corridors and hallways with anticipated light traffic volume for nonpatient use may be reduced to a width of 5 feet (1524 mm) if approved by the enforcing agency. Exception: Corridors and hallways in administrative and business areas may be reduced to a width of 44 inches (1118 mm).
<input type="checkbox"/>	1224.4.7.3 Outpatient services. Outpatient clinics or outpatient departments which contain facilities for outpatient use only, such as laboratory, x-ray, physical therapy or occupational therapy, shall have a minimum corridor or hallway width of 5 feet (1524 mm). Corridors serving gurney or stretcher traffic shall comply with minimum width requirements of Section 1020.2. Outpatient clinics and outpatient departments consisting only of waiting rooms, business offices, doctor's offices, and examining rooms, where there is no traffic through such area to other services or to exits from the building, shall have a minimum corridor or hallway width of 44 inches (1118 mm).
<input type="checkbox"/>	1224.4.7.4 Handrails. Corridors for patient traffic in areas providing skilled nursing, intermediate care or rehabilitation services shall be furnished with a handrail on both sides at a height not less than 30 inches (762 mm) or greater than 36 inches (914 mm).
1228.4.8 Doors and door openings.	
<input type="checkbox"/>	Refer to Section 1224.4.8 with the following modifications and amendments:
<input type="checkbox"/>	1. Where indicated by the Patient Safety Risk Assessment, toilet room doors shall be equipped with keyed locks that allow staff to control access to the toilet room.
<input type="checkbox"/>	2. Use of door closers is to be avoided unless required by other sections of this code.
<input type="checkbox"/>	3. Door hinges shall be designed to minimize accessible anchor points (e.g., cut hinge type, piano hinge, concealed hinge, etc.).

<input type="checkbox"/>	4. Except for specifically designed ligature-resistant hardware, door lever handles shall point downward when in the latched and in the unlatched position. (4)
<input type="checkbox"/>	5. All hardware shall have tamper-resistant fasteners.
<input type="checkbox"/>	6. Soft doors may be used for patient room toilets where indicated in the Patient Safety Risk Assessment.
1228.4.9 Windows and screens.	
<input type="checkbox"/>	1. Windows located in patient care areas, or areas used by patients, shall limit the opportunities for patients to inflict harm to themselves or others.
<input type="checkbox"/>	All glazing (interior and exterior) shall be fabricated with polycarbonate or laminate on the inside of the glazing or with any glazing that meets or exceeds the requirements for Class 1.4 per ASTM F1233-08 (2013), Standard Test Method for Security Glazing Material and Systems. Exception: Use of tempered glass for interior borrowed lights shall be permitted where allowed by the Patient Safety Risk Assessment.
<input type="checkbox"/>	1.2. Where window treatments are provided, they shall be designed without accessible anchor points.
<input type="checkbox"/>	1.3. Where operable windows are provided in patient rooms or suites, openings shall be limited to prevent the passage of a 4-inch (102 mm) sphere.
<input type="checkbox"/>	2. Anchorage for windows and window assemblies (including frames, hinges and locking devices) shall be designed to resist impact loads applied from the inside and shall be tested in accordance with ANSI Z97.1, Safety Glazing Materials Used in Buildings.
<input type="checkbox"/>	3. A minimum net glazed area of not less than 8 percent of the floor area of each indoor activity space and dining space shall be provided.
1228.4.10 Ceiling heights. Refer to Section 1224.4.10 unless noted otherwise.	
1224.4.10 Ceiling heights.	
<input type="checkbox"/>	1224.4.10.1 Minimum height. The minimum height of ceilings shall be 8 feet (2438 mm). Exception: Closet, toilet room and bathroom minimum ceiling heights, and soffits over fixed cabinets and work surfaces, shall not be less than 7 feet (2134 mm).
<input type="checkbox"/>	1224.4.10.2 Minimum height with fixed ceiling equipment. Operating rooms, emergency rooms, delivery rooms, radiographic rooms and other rooms containing ceiling-mounted, major fixed equipment or ceiling-mounted surgical light fixtures shall have ceiling heights to accommodate the equipment or fixtures and their normal movement. Suspended tracks, rails and pipes located in the traffic path for patients in beds and/or on stretchers, including those in inpatient service areas, shall be not less than 7 feet (2134 mm) above the floor. Exception: Mobile suspended tracks such as traverse rails for overhead patient lifts that may be moved out of the traffic path shall provide a clearance of not less than 6 feet, 8 inches (2032mm) above the floor when in use.
1228.4.11 Interior finishes.	

<input type="checkbox"/>	<i>Interior finishes shall comply with Section 1224.4.11 as amended in this section. Special design consideration shall be given to injury and suicide prevention in the context of the Patient Safety Risk Assessment.</i>
1228.4.11.4 Ceilings.	
<input type="checkbox"/>	<i>Refer to Section 1224.4.11.4 with the following modifications and amendments: Ceilings shall be monolithic in seclusion rooms, exam/treatment rooms, patient bedrooms, patient toilet rooms, or patient bathing facilities.</i>
<input type="checkbox"/>	<i>1. In these rooms, the ceiling shall be secured from patient access.</i>
<input type="checkbox"/>	<i>2. Mechanical, electrical, and plumbing systems, other than terminal elements serving the room (e.g., diffusers, registers, luminaires, etc.), shall be concealed above the ceiling.</i>
1228.4.12 Courts. Refer to Section 1224.4.12.	
<input type="checkbox"/>	1224.4.12 Courts. <i>Where one or more walls of a court contain a door or window of one or more patients' bedrooms, the least dimension of the court shall be 20 feet (6096 mm) between facing structures.</i>
1228.4.13 Elevators. Refer to Section 1224.4.13	
<input type="checkbox"/>	1224.4.13 Elevators.
<input type="checkbox"/>	1224.4.13.1 Patient. <i>Patient elevators shall have minimum inside platform dimensions of 5 feet by 8 feet (1524 mm by 2438 mm), and a minimum clear door opening of 4 feet 0 inches (1219 mm).</i>
<input type="checkbox"/>	1224.4.13.2 Passenger. <i>Passenger elevators shall have minimum inside platform dimensions of 4 feet 8 inches by 7 feet 4 inches (1422 mm by 2236 mm).</i>
<input type="checkbox"/>	1224.4.13.3 Patient services. <i>Buildings over one story in height with accommodations or services for patients on floors without grade-level entrance shall provide at least one patient elevator.</i>
<input type="checkbox"/>	1224.4.13.4 Low patient capacity. <i>If bed patients are accommodated on one or more floors, other than the main entrance floor or where operating rooms or delivery rooms are above or below the main entrance floor, at least one patient elevator shall be provided.</i>
<input type="checkbox"/>	1224.4.13.5 Medium patient capacity. <i>At least one patient elevator and one service elevator shall be provided in hospitals with a capacity of from 60 to 149 beds on floors other than the main entrance floor.</i>
<input type="checkbox"/>	1224.4.13.6 High patient capacity. <i>At least one patient elevator, one passenger elevator and one service elevator shall be provided in hospitals with a capacity of 150 or more beds on floors other than the main entrance floor.</i>
1228.4.14 Garbage, solid waste and trash storage. Refer to Section 1224.4.14.	
<input type="checkbox"/>	1224.4.14 Garbage, solid waste and trash storage. <i>Rooms or screening enclosures shall be provided for the washing and cleaning of garbage containers and for the storage of garbage, trash and other solid wastes. Such rooms or screening enclosures shall include the following:</i>

<input type="checkbox"/>	1. A concrete floor with a curb and with a drain connected to the sewer.
<input type="checkbox"/>	2. Steam or hot-water and cold-water supply.
<input type="checkbox"/>	3. A minimum floor area of 1/2 square foot (0.046 m ²) per bed, but not less than 25 square feet (2.3 m ²), the least dimension of which shall be 4 feet (1219 mm).
<input type="checkbox"/>	4. A method of limiting access to the material except by authorized persons.
1228.4.15 Housekeeping room. Refer to Section 1224.4.15.	
<input type="checkbox"/>	1224.4.15 Housekeeping room. This room shall be a minimum floor area of 15 square feet (1.4 m ²). It shall contain a service sink or floor receptor and provisions for storage of supplies and housekeeping equipment.
1228.4.16 Laundry and trash chutes. Refer to Section 1224.4.16.	
<input type="checkbox"/>	1224.4.16 Laundry and trash chutes. Gravity-type laundry and trash chutes shall have a minimum diameter of 2 feet (610 mm) and shall be designed to prevent distribution of airborne contaminating elements to all floors served.
1228.4.17 Telephones. Refer to Section 1224.4.17.	
<input type="checkbox"/>	1224.4.17 Telephone. Each floor accommodating patients shall have a telephone installed for patient use. Such telephones shall be readily accessible to patients who are limited to wheel chairs and stretchers. This may not be required in separate buildings having six or fewer beds which are restricted to occupancy by ambulatory patients.
1228.4.18 Grab bars.	
<input type="checkbox"/>	Refer to Section 1224.4.18 with the following modifications and amendments:
<input type="checkbox"/>	1. Grab bars, including those that are part of fixtures such as soap dishes, shall be sufficiently anchored to sustain a concentrated load of 250 pounds (113.4 kg).
<input type="checkbox"/>	2. Grab bars shall be graspable and shall be ligature resistant.
1228.4.19 Noise control. Refer to Section 1224.4.19.	
<input type="checkbox"/>	1224.4.19 Noise control.
<input type="checkbox"/>	1224.19.1 Impact noises. Recreation rooms, exercise rooms, equipment rooms and similar spaces where impact noises may be generated, shall not be located directly over patient bed areas or delivery and operating suites, unless special
<input type="checkbox"/>	1224.19.2 Noise reduction. The noise reduction criteria shown in Table 1224.4.19 shall apply to partitions, floors, and ceiling construction in patient areas.
1228.4.20 Built-in furnishings.	
<input type="checkbox"/>	Built-in furnishings in areas accessible to patients shall comply with the following requirements:
<input type="checkbox"/>	1. Built-in furnishings with doors or drawers shall not be provided.
<input type="checkbox"/>	2. Open shelves shall be fixed with tamper-resistant hardware.

<input type="checkbox"/>	3. When provided, clothing rods or hooks shall be ligature resistant.
<input type="checkbox"/>	4. The following are not permitted:
<input type="checkbox"/>	4.1. Towel bars.
<input type="checkbox"/>	4.2. Shower curtain rods.
<input type="checkbox"/>	4.3. Lever handles, except where a specifically designed ligature-resistant lever handle is used.
1228.4.21 Building systems.	
1228.4.21.1 Lighting.	
<input type="checkbox"/>	Lighting in areas identified in the Patient Safety Risk Assessment as high- and medium-risk areas shall be tamper-resistant. Refer to California Electrical Code.
1228.4.21.2 Receptacles.	
<input type="checkbox"/>	When electrical receptacles are provided in a patient bedroom, the receptacles shall be in compliance with California Electrical Code.
1228.4.22 Handwashing stations.	
<input type="checkbox"/>	All handwashing fixtures that are accessible to patients, including those located in patient rooms and patient toilet rooms, shall include ligature-resistant features that do not compromise compliance with the hot and cold water supply controls, laminar flow, and sink requirements of the California Plumbing Code. Handwashing fixtures within patient rooms and patient toilet rooms in psychiatric nursing units are not required to be equipped with gooseneck spouts and the discharge point may be less than 5 inches (127 mm) above the fixture rim
1228.5 Communication system. Refer to Section 1224.5 Communications Systems	
<input type="checkbox"/>	1224.5 Communications Systems. Technology and medical communication rooms shall comply with the California Electrical Code, California Mechanical Code, California Plumbing Code and the requirements of this section.
<input type="checkbox"/>	1224.5.1 Telecommunications service entrance room. The telecommunications service entrance room houses the point at which outside carrier data and voice circuits and services enter the facility and outdoor cabling interfaces with the building's internal cabling infrastructure. Each hospital facility shall have at least one telecommunications service entrance room, and each room that is provided shall be dedicated to the telecommunications function with related support facilities and meet the requirements of this section.
<input type="checkbox"/>	1224.5.2 Technology equipment center.
<input type="checkbox"/>	1224.5.2.1 Number. Each hospital shall have at least one technology equipment center space that is not used for any purpose other than electronic data storage, processing, and networking.
<input type="checkbox"/>	1224.5.2.2 Size. The technology equipment center shall be sized to provide space to meet the service requirements for the required equipment.
<input type="checkbox"/>	1224.5.2.3 Location. The technology equipment center shall be located to minimize the risk of water damage, both from internal and external sources. The technology

	equipment center shall be located above any floodways or flood hazard areas as described in the National Flood Insurance Program.										
<input type="checkbox"/>	1224.5.3 Technology distribution room.										
<input type="checkbox"/>	1224.5.3.1 Number. There shall be a minimum of one technology distribution room on each floor of the facility. Exception: For existing facilities not undergoing major renovation, a technology distribution room may serve adjacent floors.										
<input type="checkbox"/>	1224.5.3.2 Size.										
<input type="checkbox"/>	<p>1. Technology distribution rooms shall be sized based on the area of the floor being served, with minimum clear dimensions as follows:</p> <table border="0"> <thead> <tr> <th style="text-align: left;">Area Served in Square Feet (m²)</th> <th style="text-align: left;">Minimum Technology Distribution Room Size</th> </tr> </thead> <tbody> <tr> <td>≤ 8,000 square feet (740 m²)</td> <td>10 feet by 10 feet (3.05 m by 3.05 m)</td> </tr> <tr> <td>8,001 – 15,000 square feet (1400 m²)</td> <td>10 feet by 12 feet (3.05 m by 3.66 m)</td> </tr> <tr> <td>15,001 – 25,000 square feet (2325 m²)</td> <td>10 feet by 14 feet (3.05 m by 4.27 m)</td> </tr> <tr> <td>> 25,000 square feet (2325 m²)</td> <td>12 feet by 14 feet (3.66 m by 4.27 m)</td> </tr> </tbody> </table> <p>2. Where ceilings are provided, the minimum clear height shall be 9 feet (2.75 m). Exception: Existing buildings shall be permitted to have a minimum clear height of 8 feet (2.44 m).</p>	Area Served in Square Feet (m ²)	Minimum Technology Distribution Room Size	≤ 8,000 square feet (740 m ²)	10 feet by 10 feet (3.05 m by 3.05 m)	8,001 – 15,000 square feet (1400 m ²)	10 feet by 12 feet (3.05 m by 3.66 m)	15,001 – 25,000 square feet (2325 m ²)	10 feet by 14 feet (3.05 m by 4.27 m)	> 25,000 square feet (2325 m ²)	12 feet by 14 feet (3.66 m by 4.27 m)
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<input type="checkbox"/>	1224.5.3.3 Location. Technology distribution rooms shall be provided throughout the facility as necessary to meet the maximum cable distance requirement for the cabling system specified.										
<input type="checkbox"/>	1224.5.4 SPC/NPC compliance. The location of spaces required by this section shall meet the requirements of California Building Code, Section 3416A Compliance Alternatives for Services/Systems and Utilities.										
<input type="checkbox"/>	1224.5.5 Access. Access to the spaces required by this section shall be controlled and not require passage through patient-care or sterile space.										
<input type="checkbox"/>	1224.5.6 Combining spaces. The combining of the telecommunications service entrance room, technology equipment center and technology distribution room shall be permitted, provided that the requirements for each of the individual spaces are met.										
1228.13 PSYCHIATRIC REHABILITATION ACTIVITIES SERVICE SPACE.											
<input type="checkbox"/>	The psychiatric rehabilitation activities service space may be centralized for common use or may be located in each nursing unit in response to the Patient Safety Risk Assessment. The following areas are required in the psychiatric rehabilitation activities service space:										
1228.13.1 Patient care areas.											

1228.13.1.1 Indoor activity rooms.	
<input type="checkbox"/>	<i>1. At least two separate activity rooms, one appropriate for group recreation and one for quiet activities to serve as a patient lounge, shall be provided.</i>
<input type="checkbox"/>	<i>2. Space requirements. The combined area of these rooms shall have a minimum of 25 square feet (2.32 m²) per patient bed, with at least 120 square feet (11.15 m²) of clear floor area for each of the two spaces.</i>
1228.13.1.2 Outdoor activity area.	
<input type="checkbox"/>	<i>An outdoor activity area shall be provided. Outdoor areas shall meet the following requirements:</i>
<input type="checkbox"/>	<i>1. Fences and walls shall be designed to:</i>
<input type="checkbox"/>	<i>1.1. Be installed with tamper-resistant hardware.</i>
<input type="checkbox"/>	<i>1.2. Have a minimum height of 10 feet (3048 mm) above the outdoor area elevation.</i>
<input type="checkbox"/>	<i>1.3. Be anchored and constructed to withstand the body force of a 350-pound (158-kg) person.</i>
<input type="checkbox"/>	<i>2. If provided, gates or doors in the fence or wall shall:</i>
<input type="checkbox"/>	<i>2.1. Swing away from the outdoor activity area.</i>
<input type="checkbox"/>	<i>2.2. Have the hinge installed on the outside of the outdoor activity area.</i>
<input type="checkbox"/>	<i>2.3. Be provided with a locking mechanism that has been coordinated with egress requirements of Section 1004.5, Outdoor areas.</i>
<input type="checkbox"/>	<i>3. Lights shall not be accessible to patients. Lighting in the outdoor activity area shall not be pole mounted.</i>
<input type="checkbox"/>	<i>4. If provided, security cameras shall not be accessible to patients and cameras shall view the entire outdoor activity area.</i>
<input type="checkbox"/>	<i>5. If provided, furniture shall be secured from movement. Furniture shall not be placed in locations where it can be used to climb the fence or wall.</i>
1228.13.1.3 General support areas.	
<input type="checkbox"/>	<i>1. Space for staff conferences, patient evaluation and progress reports.</i>
<input type="checkbox"/>	<i>1.1. Staff conference room. A conference and treatment planning room shall be provided.</i>
<input type="checkbox"/>	<i>1.2. Office space separate from the activities area.</i>
<input type="checkbox"/>	<i>2. Where outpatients are treated, there shall be a waiting area compliant with the requirements of Section 1228.4.5.</i>
1228.13.2 Physical therapy service space.	
<input type="checkbox"/>	<i>Where provided, the physical therapy service space shall comply with Section 1224.35.2.</i>
1228.13.3 Occupational therapy service space.	
<input type="checkbox"/>	<i>Where provided, the occupational therapy service space shall comply with Section 1224.35.3, items 1, 2 and 3.</i>

1228.13.4 Speech pathology and/or audiology service space.	
<input type="checkbox"/>	<i>Where provided, the speech pathology service space shall comply with Section 1224.35.4.</i>
1228.14 PSYCHIATRIC NURSING SERVICE SPACE.	
<input type="checkbox"/>	<i>Psychiatric nursing units shall comply with the requirements of this section. If the nursing unit is a locked unit, the primary access point to the unit shall be through a sally port. For “secure treatment facilities,” alternate designs for locked unit access without individual sally ports may be approved by the enforcement agency when it can be demonstrated that the alternate design meets performance requirements without compromising any health or life-safety requirement.</i>
1228.14.1 Patient rooms.	
<input type="checkbox"/>	<i>Each patient bedroom shall meet the following standards:</i>
1228.14.1.1 Capacity.	
<input type="checkbox"/>	<i>Maximum room capacity shall be two patients. Exception: Where renovation of existing individual acute psychiatric hospital patient rooms is undertaken in facilities built under the 2013, or prior, California Building Code, maximum room capacity shall be no more than the present capacity, to a maximum of eight patients per patient room. Placement of beds shall not be more than three deep from the exterior window.</i>
1228.14.1.2 Space requirements.	
<input type="checkbox"/>	<i>Patient bedrooms shall have a minimum clear floor area of 110 square feet (10.2 m²) for single-bed rooms and 80 square feet (7.43 m²) per bed for multiple-bed rooms.</i>
1228.14.1.3 Windows.	
<input type="checkbox"/>	<i>Each patient bedroom shall have a window in accordance with Section 1228.4.9.</i>
1228.14.1.5 Outside exposure. Refer to Section 1224.14.1.5.	
<input type="checkbox"/>	1224.14.1.5 Outside exposure. <i>All patient bedrooms shall have an outside exposure and shall not be below ground level.</i>
1228.14.1.6 Handwashing stations.	
<input type="checkbox"/>	<i>Handwashing stations shall comply with Section 1228.4.22. Handwashing stations are required in patient toilet rooms. Handwashing stations are not required in patient bedrooms.</i>
1228.14.1.7 Patient toilet room.	
<input type="checkbox"/>	<i>1. Each patient shall have access to a toilet room without having to enter a corridor. Exception: Corridor access to the patient toilet room shall be permitted at pediatric or adolescent patient bedrooms and in specific patient bedrooms where the use of corridor access is part of the hospital’s written Patient Safety Risk Assessment and management program.</i>
<input type="checkbox"/>	<i>2. One toilet room shall serve no more than two patient bedrooms and no more than four patients.</i>

<input type="checkbox"/>	3. The toilet room shall contain a toilet and a handwashing station.
1228.14.1.8 Patient storage.	
<input type="checkbox"/>	Each patient shall have in their room a separate wardrobe, locker, or closet for storing personal effects. Shelves for folded garments shall be used instead of arrangements for hanging garments.
1228.14.1.9 Privacy.	
<input type="checkbox"/>	Visual privacy in multibed rooms (e.g., cubicle curtains) is not required in psychiatric nursing units.
1228.14.1.10 Grab bars.	
<input type="checkbox"/>	Grab bars provided in accessible patient toilet rooms shall comply with Section 1228.4.18.
1228.14.1.11 Room identification.	
<input type="checkbox"/>	Each patient room shall be labeled with an identification number, letter or combination of the two.
1228.14.2 Service areas.	
<input type="checkbox"/>	Provision for the services listed below shall be in or immediately accessible to each psychiatric nursing unit. The size and location of each service area will depend upon the numbers and types of beds served. Identifiable spaces are required for each of the indicated functions. If a service area is specifically permitted to serve more than one nursing unit, there shall be at least one such service area located on each nursing unit floor.
1228.14.2.1 Administrative center(s) or nurse station(s). Refer to Section 1224.4.4.2.	
<input type="checkbox"/>	1224.4.4.2 Nurse station(s). This area shall have space for counters and storage and at least one hand-washing station shall be located in or directly accessible to the nurse station. It may be combined with or include centers for reception, charting and communication.
1228.14.2.1.1 Documentation area.	
<input type="checkbox"/>	A separate charting area with provisions for acoustic and patient file privacy shall be provided.
1228.14.2.1.2 Handwashing station(s).	
<input type="checkbox"/>	Refer to Section 1228.4.22 for the definition of handwashing station. Handwashing stations in high- or medium-patient-risk areas shall be ligature resistant.
1228.14.2.2 Office(s) for staff.	
<input type="checkbox"/>	Office(s) for staff shall be provided.
1228.14.2.3 Support areas for staff.	
<input type="checkbox"/>	1. Staff lounge facilities. Staff lounge facilities may be combined between units.
<input type="checkbox"/>	2. Staff toilet rooms.

<input type="checkbox"/>	3. Staff storage locations. Securable closets or cabinet compartments for the personal effects of nursing personnel shall be immediately accessible to the administrative center or nurse station.
1228.14.2.4 Multipurpose room(s).	
<input type="checkbox"/>	Multipurpose rooms shall be provided for staff, patients, patients' families for patient visits, conferences, reports, education, training sessions, and consultation. These rooms shall be readily accessible to each nursing unit. One such room may serve several psychiatric nursing units.
1228.14.2.5 Examination and treatment room.	
<input type="checkbox"/>	1228.4.4.1.1 Examination room. Refer to Section 1228.4.4.1.1
<input type="checkbox"/>	1228.4.4.1.2 Treatment room. Refer to Section 1228.4.4.1.2
1228.14.2.6 Clean utility/workroom.	
<input type="checkbox"/>	Refer to Section 1228.4.4.6.
1228.14.2.7 Soiled utility/workroom.	
<input type="checkbox"/>	Refer to Section 1228.4.4.7.
1228.14.2.8 Medication station.	
<input type="checkbox"/>	Refer to Section 1228.4.4.4.
1228.14.2.9 Clean linen storage.	
<input type="checkbox"/>	Each psychiatric nursing unit shall contain a designated area for clean linen storage. This may be within the clean utility room or a separate closet.
1228.14.2.10 Nourishment area.	
<input type="checkbox"/>	Refer to Section 1228.4.4.5.
1228.14.2.11 Ice-making equipment.	
<input type="checkbox"/>	Each nursing unit shall have equipment to provide ice for treatments and nourishment. Ice-making equipment may be in the clean utility/workroom or at the nourishment station. Ice intended for human consumption shall be from self-dispensing icemakers.
1228.14.2.12 Equipment and supply storage.	
<input type="checkbox"/>	Appropriate room(s) shall be provided for storage of equipment necessary for patient care. Each unit shall provide not less than 15 square feet (1.39 m ²). Location of the storage areas shall not present a risk to the patient population as indicated in the functional program.
1228.14.2.14 Patient bathing facilities.	
<input type="checkbox"/>	A bathtub or shower shall be provided for each six patient beds not otherwise served by bathing facilities at patient bedrooms.
1228.14.2.15 Common patient toilet room(s).	

<input type="checkbox"/>	<i>In addition to the toilet rooms serving bed areas, common patient toilet rooms shall be located adjacent to multipurpose room(s) and within or directly accessible to each common patient bathing facility.</i>
1228.14.2.16 Emergency equipment storage.	
<input type="checkbox"/>	<i>Emergency equipment storage shall be provided at each nursing unit that is under visual observation of staff.</i>
1228.14.2.17 Housekeeping room.	
<input type="checkbox"/>	<i>One housekeeping room shall be permitted to serve more than one nursing unit on a floor. Refer to Section 1228.4.15.</i>
1228.14.2.18 Grab bars.	
<input type="checkbox"/>	<i>Grab bars in common patient toilets and bathing facilities shall be installed in accordance with Section 1228.4.18.</i>
SPECIAL PATIENT CARE ROOMS	
1228.14.3 Airborne Infection Isolation (All) room(s).	
<input type="checkbox"/>	<i>There shall be at least one airborne infection isolation (All) room provided for each 50 beds, and for each major fraction thereof. Airborne infection isolation rooms for pediatric/adolescent and forensic supplemental service nursing units shall be calculated independently from and shall not be shared with each other or any other psychiatric nursing unit. Refer to Section 1224.14.3 and the general construction requirements of Section 1228.4. A bedpan flushing attachment is not required.</i>
<input type="checkbox"/>	1224.14.3 Airborne infection isolation rooms.
<input type="checkbox"/>	<p>1224.14.3.1 General. Single rooms shall be provided for the isolation of patients with airborne communicable disease at a ratio of one room for each 35 licensed beds, and for each major fraction thereof. At least one airborne infection isolation room shall be provided. Airborne infection isolation rooms shall be labeled with the words "Airborne Infection Room" on or adjacent to the anteroom side of the door between the isolation room and the anteroom.</p> <p>Exceptions:</p> <ol style="list-style-type: none"> 1. Acute psychiatric hospitals shall provide airborne infection isolation rooms at the ratio of one room for each 50 beds, or major fraction thereof. 2. Airborne infection isolation rooms are not required for chemical dependency recovery services.
<input type="checkbox"/>	1224.14.3.2 Anteroom doors. Airborne infection isolation room(s) shall have self-closing and latching devices on all anteroom doors.
<input type="checkbox"/>	1224.14.3.3 Anteroom. A separate anteroom shall be provided between the airborne infection isolation room and the corridor, which shall constitute the primary entrance to the airborne infection isolation room. This anteroom shall have a handwashing station, work counter at least 3 feet (914 mm) long, cabinets and space to gown and to store clean and soiled materials. There shall be a view window from the anteroom to the isolation room and means to allow for airflow from

	<i>the anteroom into the airborne infection isolation room. Doors shall be aligned to allow large equipment to be wheeled into the airborne infection isolation room unless a secondary door complying with Section 1224.14.3.2 is provided. One anteroom may serve no more than two airborne infection isolation rooms.</i>
<input type="checkbox"/>	1224.14.3.4 Secondary entry. <i>When a secondary entry is provided, the secondary doors shall be provided with locking devices which are readily operable from the room side and which are readily operable by the facility staff on the other side. When key locks are used on isolation rooms, keys shall be located at the nurses' station in a prominent readily accessible location.</i>
<input type="checkbox"/>	1224.14.3.5 Sealed-tight room. <i>Airborne infection isolation room perimeter walls, ceilings, floors, doors, and penetrations shall be sealed tightly to minimize air infiltration from the outside or from other spaces.</i>
<input type="checkbox"/>	1224.14.3.6 Adjoining toilet room. <i>Each isolation room shall have its own directly accessible toilet room with an emergency nurse call system, a lavatory, a shower providing a seat or a space for a shower chair and a toilet equipped with a bedpan flushing attachment with a vacuum breaker.</i>
1228.14.4 Protective environment room(s).	
<input type="checkbox"/>	<i>If provided, refer to Section 1224.14.4 and the general construction requirements of Section 1228.4.</i>
1228.14.5 Seclusion room(s).	
<input type="checkbox"/>	<i>There shall be at least one seclusion room provided for each 24 licensed beds, and for each major fraction thereof. At least one seclusion room shall be provided. A seclusion room may be shared by psychiatric nursing units. Seclusion rooms for pediatric/adolescent and forensic supplemental service nursing units shall be calculated independently from, and shall not be shared with each other or any other psychiatric nursing unit. Refer to the general construction requirements of Section 1228.4.</i>
1228.14.6 Quiet room.	
<input type="checkbox"/>	<i>A quiet room shall be provided in each psychiatric nursing unit for a patient who needs to be alone for a short period of time but does not require a seclusion room. Refer to Section 1228.4.4.1.5.</i>
1228.14.7 Visitor/consultation room(s).	
<input type="checkbox"/>	<i>Visitor/consultation rooms shall be provided at a room-to-bed ratio of one consultation room for each 12 psychiatric beds, or major fraction thereof with a minimum of one, in each psychiatric nursing unit. Additionally, the following requirements shall be met:</i>
<input type="checkbox"/>	<i>1. Visitor/consultation room(s) shall have a minimum clear floor area of 100 square feet (9.29 m²).</i>

<input type="checkbox"/>	2. The room(s) shall be designed for acoustical and visual privacy. Refer to Table 1224.4.19, Sound Transmission Limitations in Hospitals.
1228.14.8 Conference room.	
<input type="checkbox"/>	A conference and treatment planning room shall be provided for use by the psychiatric nursing unit.
1228.14.9 Space for group therapy.	
<input type="checkbox"/>	An enclosed private space with a minimum clear floor area of at least 225 square feet (20.90 m ²) shall be available for group therapy activities.
1228.19 PHARMACEUTICAL SERVICE SPACE.	
<input type="checkbox"/>	Pharmaceutical service space shall comply with the provisions of Section 1224.19.
<input type="checkbox"/>	1224.19 PHARMACEUTICAL SERVICE SPACE
<input type="checkbox"/>	1224.19.1 General. Facilities shall be provided to accommodate services and equipment associated with the drug distribution system used, the number of patients to be served, and the extent of shared or purchased services as licensed by the California Board of Pharmacy. Hospital pharmacies shall comply with the requirements of Section 1250 and include the functional spaces under Sections 1224.19.2 through 1224.19.7. Exempt hospitals shall provide a drug room, and the supporting spaces, in compliance with Section 1224.19.1.2.
<input type="checkbox"/>	1224.19.1.1 Licensed pharmacy. All hospitals having a licensed capacity of 100 or more beds shall have a pharmacy on the premises licensed by the California Board of Pharmacy. Note: See General Acute Care Hospitals §70263(a), Article 3, Chapter 1, Division 5, Title 22, California Code of Regulations, for requirements concerning hospitals with fewer than 100 beds. The pharmacy room or service space shall conform to the requirements of § 1751, Article 7, Division 17, Title 16, California Code of Regulations as enforced by the California Board of Pharmacy.
<input type="checkbox"/>	1224.19.1.2 Less than 100-bed exemption. Hospitals under a Hospital Pharmacy Permit Exemption issued by the Board of Pharmacy, associated with Business and Professions Code Section 4056, shall provide all basic pharmaceutical services in compliance with Section 1224.19.1.2.
<input type="checkbox"/>	1224.19.1.2.1 Drug room. Licensed pharmaceutical space with drug distribution shall be under the supervision of a physician and be monitored by a pharmacist consultant. The drug room shall include the following:
<input type="checkbox"/>	1224.19.1.2.1.1. A room or area for receiving, breakout, and inventory control of drugs used in the hospital.
<input type="checkbox"/>	1224.19.1.2.1.2. Cleanable work counters and space for automated and/or manual dispensing activities.
<input type="checkbox"/>	1224.19.1.2.1.3. Reserved.

<input type="checkbox"/>	1224.19.1.2.1.4. An area for reviewing and recording.
<input type="checkbox"/>	1224.19.1.2.1.5. An area for storage, exchange, and restocking of carts.
<input type="checkbox"/>	1224.19.1.2.1.6. Security provisions for drugs and personnel in the dispensing counter area.
<input type="checkbox"/>	1224.19.1.2.2 Handwashing station. A hand-washing station shall be provided in the area where medication(s) are handled or be immediately accessible, without going through a door unless the door is equipped with hands-free operation.
<input type="checkbox"/>	1224.19.1.2.3 Storage. Cabinets, shelves, and/or separate rooms or closets shall be provided for the following:
<input type="checkbox"/>	1224.19.1.2.3.1. Bulk storage.
<input type="checkbox"/>	1224.19.1.2.3.2. Active storage.
<input type="checkbox"/>	1224.19.1.2.3.3. Refrigerated storage.
<input type="checkbox"/>	1224.19.1.2.3.4. Storage for volatile fluids and alcohol in accordance with applicable fire safety codes for the substances involved.
<input type="checkbox"/>	1224.19.1.2.3.5. Secured lockable storage for controlled drugs.
<input type="checkbox"/>	1224.19.1.2.3.6. Equipment and supply storage for general supplies and equipment not in use.
<input type="checkbox"/>	1224.19.2 Pharmacy areas.
<input type="checkbox"/>	1224.19.2.1 Dispensing facilities. Hospital pharmacies shall provide the following areas for patient-specific compounding and dose repackaging of non-sterile preparations.
<input type="checkbox"/>	1224.19.2.1.1 Receiving. A room or area for receiving, breakout and inventory control of materials used in the pharmacy.
<input type="checkbox"/>	1224.19.2.1.1.1 Size. A minimum of 120 square feet (11.15 m ²) shall be provided.
<input type="checkbox"/>	1224.19.2.1.2 Dispensing. Work counters and space for automated and/or manual dispensing activities shall be provided to serve the volume of doses per day for in-patient and out-patient needs.
<input type="checkbox"/>	1224.19.2.1.3 Non-sterile compounding areas. An extemporaneous compounding/dose repackaging area shall be located next to bulk storage and include the following:
<input type="checkbox"/>	1224.19.2.1.3.1 Size. Work stations shall have sufficient counter space for drug preparation, with a minimum area of 120 square feet (11.15m ²) per station.

<input type="checkbox"/>	1224.19.2.1.3.2 Handwashing station. Handwashing station(s) shall be in or immediately accessible to all areas where pharmaceuticals are handled without going through a door unless the door is equipped with hands-free operation.
<input type="checkbox"/>	1224.19.2.1.3.3 Utility sink. A utility sink shall be provided.
<input type="checkbox"/>	1224.19.2.1.3.4. If carousel or analogous robotic technologies are used, the area shall respond to the special system requirements.
<input type="checkbox"/>	1224.19.2.1.4 Recording. An area for reviewing and recording shall be provided. The area shall include counter space and electronic workstation(s).
<input type="checkbox"/>	1224.19.2.1.5 Temporary storage. An area for temporary storage, exchange, and restocking of carts.
<input type="checkbox"/>	1224.19.2.1.6 Security. Security provisions shall be provided for drugs and personnel in the dispensing counter area.
<input type="checkbox"/>	1224.19.2.3 Storage. The following storage facilities shall be provided in the pharmaceutical service area.
<input type="checkbox"/>	1224.19.2.3.1 Bulk storage. A separate bulk storage area, or room, may be provided.
<input type="checkbox"/>	1224.19.2.3.2 Active storage. Active storage in support of repackaging and dispensing activities shall be provided.
<input type="checkbox"/>	1224.19.2.3.3 Refrigerated storage. Refrigeration/freezer area shall be provided.
<input type="checkbox"/>	1224.19.2.3.4 Hazardous materials. Storage for volatile fluids and alcohol shall comply with Section 307.
<input type="checkbox"/>	1224.19.2.3.5 Secured storage. Secured lockable storage shall be provided for narcotics and controlled drugs.
<input type="checkbox"/>	1224.19.2.3.6 Equipment and supplies. Equipment and supply storage for general supplies and equipment not in use.
<input type="checkbox"/>	Sterile compounding areas. If provided, refer to 1224.19.3.
<input type="checkbox"/>	1224.19.4 – 1224.19.5. Reserved.
<input type="checkbox"/>	1224.19.6 Support areas for the pharmacy.
<input type="checkbox"/>	1224.19.6.1 Access to information.
<input type="checkbox"/>	1224.19.6.1.1 Patient information. Provisions shall be made for cross-checking medication and drug profiles of individual patients.
<input type="checkbox"/>	1224.19.6.1.2 Pharmacological information. Provisions shall be made for access to poison control, reaction data, and drug information.

<input type="checkbox"/>	1224.19.6.2 Office. A separate room shall be provided for the Chief Pharmacist's office.
<input type="checkbox"/>	1224.19.6.3 Education and training. A multipurpose room shared with other departments shall be permitted to serve this purpose.
<input type="checkbox"/>	1224.19.6.4 Outpatient medication consultation. If medication is dispensed to outpatients from the hospital pharmacy, an area for consultation and patient education shall be provided.
<input type="checkbox"/>	1224.19.6.5 Additional equipment and supply storage. If a dose procedure is used, additional space and equipment shall be provided to accommodate supplies, packaging, labeling, and storage, including space for carts.
	1224.19.7 Support areas for staff.
	1224.19.7.1 Lounge, locker and toilet facilities. Provide pharmacy staff lounge, toilet rooms and lockers that are readily accessible.
1228.20 DIETETIC SERVICE SPACE.	
<input type="checkbox"/>	Refer to Section 1224.20, Dietetic Service Space for requirements, as modified below:
	1228.20.1 Dining area.
<input type="checkbox"/>	Provide dining space(s) for ambulatory patients, staff, and visitors. Provide patient dining room(s) of 20 square feet (1.86 m ²) per patient bed separate from staff dining. These spaces shall be separate from the food preparation and distribution areas.
SUPPORT SERVICES	
1228.21 ADMINISTRATIVE SPACE. Refer to Section 1224.21.	
<input type="checkbox"/>	1224.21 ADMINISTRATIVE SPACE.
<input type="checkbox"/>	1224.21.1 Administration. An administration area shall be provided which shall provide for the following functions:
<input type="checkbox"/>	1. A lobby with reception and information counter or desk, waiting space, men's and women's public toilet room facilities, telephones and drinking fountain.
<input type="checkbox"/>	2. Offices for administrator and admitting.
<input type="checkbox"/>	1224.21.2 Records. Hospitals shall provide a health record service which shall accommodate the following functions:
<input type="checkbox"/>	1. Work area for sorting and recording records for either paper or electronic media.
<input type="checkbox"/>	2. Storage area for records for either paper or electronic media.
1228.22 CENTRAL STERILE SUPPLY. If provided, refer to Section 1224.22.	
<input type="checkbox"/>	1224.22.1 Minimum requirements. A central supply and sterilizing area shall be provided. Rooms and spaces shall accommodate the following services and equipment:

<input type="checkbox"/>	1. Soiled work area. A receiving and gross cleaning area which shall contain work space and equipment for cleaning medical and surgical equipment and for disposal of or processing of soiled material.
<input type="checkbox"/>	2. Clean work area. A clean work area which shall contain work space and equipment for sterilizing medical and surgical equipment and supplies.
<input type="checkbox"/>	3. Sterilizing space.
<input type="checkbox"/>	1224.22.2 All sterilizers and autoclaves which emit steam exhaust shall be vented to the outside of the building. Such vents shall be independent from the plumbing vent system. Exception: Small instrument sterilizers.
1228.23 STORAGE.	
1228.23.1 General Storage.	
<input type="checkbox"/>	Psychiatric hospitals shall provide general storage space of at least 10 square feet (0.93 m ²) per bed in addition to specialized storage spaces. All storage spaces shall be located within the hospital building and readily accessible to the connecting corridor required under Section 1224.4.7.5.
1228.23.2 Specialized Storage.	
<input type="checkbox"/>	1228.23.2.1 Linen. Provide separate and enclosed facilities for clean and soiled linen in each nursing unit. The clean linen storage space shall have a minimum area of 10 square feet (0.93 m ²) and may be within the clean utility room. The soiled linen collection space shall have an area of no less than 10 square feet (0.93 m ²), except where linen chutes are provided, and may be within the soiled utility room.
<input type="checkbox"/>	1228.23.2.2 Supply. One supply storage space having a minimum area of 15 square feet (1.39 m ²) shall be provided in each nursing unit. Supply storage may be within the clean utility room used only as part of a system for distributing clean and sterile supplies.
<input type="checkbox"/>	1228.23.2.3 Wheelchairs. A room or space shall be provided in each nursing unit for wheelchairs. Wheelchair storage areas may be located within the nursing unit or outside but readily accessible to the unit. The wheelchair space shall have a minimum area of 15 square feet (1.39 m ²).
<input type="checkbox"/>	1228.23.2.4 Sterile and unsterile supplies shall be stored separately.
<input type="checkbox"/>	1228.23.2.5 Food storage shall be as described in Section 1224.20.
1228.23.3 Patient storage facilities.	
<input type="checkbox"/>	A staff-controlled secured storage area shall be provided for patient's effects that are determined to be potentially harmful (e.g., razors, nail files, cigarette lighters).
1228.24 MORGUE.	
<input type="checkbox"/>	1228.24.1 Acute care Psychiatric Hospitals with a licensed bed capacity of 50 to 199 shall provide a morgue with autopsy facilities. Exception: This may not be required if it can be demonstrated to the licensing agency that morgue and autopsy facilities are available locally.
<input type="checkbox"/>	1228.24.2 Acute care Psychiatric Hospitals with a licensed bed capacity of 200 or more shall provide a morgue with autopsy facilities.

<input type="checkbox"/>	1228.24.3 Minimum requirements. Refer to Section 1224.24.3.
1228.25 EMPLOYEE DRESSING ROOMS AND LOCKERS. Refer to Section 1224.25.	
<input type="checkbox"/>	1224.25 EMPLOYEE DRESSING ROOMS AND LOCKERS.
<input type="checkbox"/>	1224.25.1 Minimum facilities. Hospitals shall provide the following:
<input type="checkbox"/>	1. Separate dressing rooms for male and female personnel with lockers, lavatory and toilet.
<input type="checkbox"/>	2. Additional dressing rooms for the surgical service and as required within any of the supplemental services.
1228.26 HOUSEKEEPING ROOMS. Refer to Section 1224.26.	
<input type="checkbox"/>	1224.26 HOUSEKEEPING ROOMS. Shall be provided to serve each department and nursing unit, and may be shared by compatible departments, except when specifically required by other sections.
1228.27 LAUNDRY. Refer to Section 1224.27.	
<input type="checkbox"/>	1224.27 LAUNDRY.
<input type="checkbox"/>	1224.27.1 If a laundry is to be provided, the following is required in addition to the laundry room:
<input type="checkbox"/>	1. A separate soiled linen receiving, holding and sorting room with handwashing fixture.
<input type="checkbox"/>	2. A separate clean linen storage, issuing and holding room.
<input type="checkbox"/>	3. Storage for laundry supplies.
<input type="checkbox"/>	1224.27.2 Outside service. If linen is processed off site, the following shall be provided within the hospital:
<input type="checkbox"/>	1. Soiled linen holding room.
<input type="checkbox"/>	2. Clean linen receiving room.
<input type="checkbox"/>	3. Clean linen storage room.
SUPPLEMENTAL SERVICES as provided	
1228.28 ELECTROCONVULSIVE THERAPY SERVICE SPACE.	
<input type="checkbox"/>	If electroconvulsive therapy (ECT) is provided in the facility, the requirements in Section 1224.28.6 shall be met.
<input type="checkbox"/>	1224.28.6 Electroconvulsive Therapy. If electroconvulsive therapy (ECT) is provided, the requirements of this section shall be met. Where a psychiatric unit is part of a general acute care hospital (Section 1224.31 Psychiatric Nursing Unit), all the requirements in this section shall be permitted to be accommodated in a procedure suite that complies with the requirements in this section or in an operating room in a surgical suite that meets the requirements in Section 1224.15.
<input type="checkbox"/>	1224.28.6.1 General. The ECT procedure area may be a single procedure room or a suite of procedure rooms.

<input type="checkbox"/>	<p>1224.28.6.2 ECT procedure room.</p> <p>1. <i>Space requirements. Each ECT procedure room shall have a minimum clear floor area of 200 square feet (18.6 m²) with a minimum clear dimension of 14 feet (4267 mm).</i></p> <p>2. <i>Handwashing station. A handwashing station shall be provided.</i></p> <p>3. <i>Documentation area. Accommodation for written or electronic documentation shall be provided.</i></p>
<input type="checkbox"/>	<p>1224.28.6.3 Pre-procedure and recovery area. <i>When ECT services have a low-volume of procedures, the ECT procedure room may be used for pre-procedure patient care and recovery. If a pre-procedure and recovery areas are provided they shall comply with the requirements of Section 1224.16.</i></p>
<input type="checkbox"/>	<p>1224.28.6.4 Emergency equipment storage. <i>Space shall be provided in the procedure room(s) for storage of emergency equipment such as a CPR cart. A separate emergency equipment storage is permitted to serve more than one ECT procedure room.</i></p>
<input type="checkbox"/>	<p>1224.28.6.5 Patient support areas. <i>A waiting area and changing area shall be provided for outpatient use in perioperative areas in support ECT suites that provide outpatient procedures. The waiting room shall comply with Section 1224.4.5. The changing area shall include space for changing or gowning, provisions for storing patients' belongings during the procedure, and access to patient toilet(s).</i></p>
<p>1228.30 PEDIATRIC AND ADOLESCENT PSYCHIATRIC SERVICE SPACE.</p>	
<input type="checkbox"/>	<p><i>Pediatric and adolescent psychiatric service space patient areas shall be separate and distinct from adult psychiatric service space patient areas. The requirements of Section 1228.14, Psychiatric Nursing Service Space shall apply to pediatric and adolescent units as amended below:</i></p>
<p>1228.30.1 Patient bedroom.</p>	
<p>1228.30.1.1 Capacity.</p>	
<input type="checkbox"/>	<p><i>Maximum bedroom capacity shall be four patients.</i></p>
<p>1228.30.1.2 Space requirements.</p>	
	<p><i>Patient bedroom areas (with beds or cribs) shall meet the following requirements:</i></p>
<input type="checkbox"/>	<p><i>1. For single-bed rooms, a minimum clear floor area of 110 square feet (9.29 m²).</i></p>
<input type="checkbox"/>	<p><i>2. For multiple-bed rooms, a minimum clear floor area of 80 square feet (7.43 m²) per bed and 60 square feet (5.57 m²) minimum clear floor area per crib.</i></p>
<p>1228.30.2 Patient toilet room.</p>	
<input type="checkbox"/>	<p><i>1. Each patient shall have access to a toilet room, either from the patient room or from the corridor outside the patient room.</i></p>
<input type="checkbox"/>	<p><i>2. Where access is provided via a corridor, the following requirements shall be met:</i></p>
<input type="checkbox"/>	<p><i>2.1. The toilet room shall be located in the nursing unit.</i></p>

<input type="checkbox"/>	<i>2.2. The toilet room shall be located no more than 150 feet (45.72 m) from the bedroom.</i>
1228.30.3 Activity areas.	
<input type="checkbox"/>	<i>The pediatric and adolescent activities space may be centralized for common use by multiple pediatric and adolescent psychiatric units or may be located in each individual unit, in response to the Patient Safety Risk Assessment. Centralized activity areas shall be readily accessible without traversing adult patient areas.</i>
1228.30.3.1 Space requirements.	
<input type="checkbox"/>	<i>1. The combined area for activity space shall have 35 square feet (3.25 m²) of clear floor area per patient bed.</i>
<input type="checkbox"/>	<i>2. A separate dining space shall be provided and shall have a minimum of 15 square feet (1.39 m²) of clear floor area per patient bed.</i>
1228.30.3.2 Outdoor areas.	
<input type="checkbox"/>	<i>Pediatric and adolescent outdoor areas shall be separate from adult outdoor areas. Refer to Section 1228.13.1.2.</i>
1228.30.4 Support areas for the pediatric and adolescent psychiatric unit.	
<input type="checkbox"/>	<i>Storage space shall be provided for toys, equipment, extra cribs and beds, and cots or recliners for parents who may stay overnight.</i>
1228.30.5 Education.	
<input type="checkbox"/>	<i>If a unit treats children of school age over a period of one month or more, it shall provide physical facilities for an educational program, such as classrooms and an office for the teacher.</i>
1228.31 FORENSIC PSYCHIATRIC UNIT.	
<input type="checkbox"/>	<i>Where provided, a forensic psychiatric unit shall be separate and distinct from other patient areas. The requirements of Section 1228.14, Psychiatric Nursing Service Space shall apply to forensic units as amended below:</i>
1228.31.1 Sally port.	
<input type="checkbox"/>	<i>Forensic units shall have security vestibules or sally ports at the unit entrance. For “secure treatment facilities,” alternate designs for locked unit access without individual sally ports, may be approved by the enforcement agency when it can be demonstrated that the alternate design meets performance requirements, without compromising any health or life-safety requirement.</i>
1228.31.2 Pediatrics and adolescents.	
<input type="checkbox"/>	<i>Forensic unit areas for pediatrics and adolescents shall be separated from adult areas. Refer to Section 1228.30.</i>
1228.31.3 Space requirements.	
<input type="checkbox"/>	<i>Specialized program requirements may result in additional treatment areas, police and courtroom space, and security considerations. When a forensic unit is provided, the needs of the patient population and special requirements shall be specifically addressed in the Patient Safety Risk Assessment.</i>

1228.38 INTERMEDIATE-CARE SERVICE SPACE.	
<input type="checkbox"/>	<i>Where provided, an intermediate-care service unit shall be housed in a separate and distinct nursing unit and shall comply with the applicable requirements of Section 1225 and the general construction provisions of Section 1228.4.</i>
1228.39 OUTPATIENT SERVICE SPACE.	
<input type="checkbox"/>	<i>Where provided, outpatient service space shall comply with the applicable requirements of Section 1224.39 and the general construction provisions of Section 1228.4.</i>
<input type="checkbox"/>	1224.39.1 Waiting area(s). <i>Provide with access to public toilet room facilities, a public telephone and a drinking fountain. These facilities may be shared with other services.</i>
<input type="checkbox"/>	1226.12 PSYCHOLOGY CLINICS. <i>Psychology clinics and outpatient clinical services of a hospital providing services equivalent to a psychology clinic shall comply with Sections 1226.4.3 through 1226.4.8 and the provisions of this section.</i> <i>Psychology clinics shall provide at least an interview room, consulting room and group therapy room.</i>
<input type="checkbox"/>	1226.12.1 Public and administrative area.
<input type="checkbox"/>	1226.12.1.1 Public area.
<input type="checkbox"/>	1226.12.1.1.1 Reception. <i>Refer to Section 1226.4.16.1.1.</i>
<input type="checkbox"/>	1226.12.1.1.3 Public toilet(s). <i>Refer to Section 1224.4.5.</i>
<input type="checkbox"/>	1226.12.1.1.4 Drinking fountain. <i>Refer to Section 1224.4.5.</i>
<input type="checkbox"/>	1226.12.1.1.5 Public telephone. <i>Refer to Section 1224.4.5.</i>
<input type="checkbox"/>	1226.12.1.2 Administrative Area.
<input type="checkbox"/>	1226.12.1.2.1 Medical Records storage. <i>Refer to Section 1226.4.16.2.1.</i>
<input type="checkbox"/>	1226.12.1.2.2 Equipment and supply storage. <i>Refer to Section 1226.4.16.2.2.</i>
1228.40 SKILLED NURSING SERVICE SPACE.	
<input type="checkbox"/>	<i>Where provided, the skilled nursing service unit shall be housed in a separate and distinct nursing unit and shall comply with the applicable requirements of Section 1225 and the general construction provisions of Section 1228.4.</i>
1228.42 CLINICAL LABORATORY SERVICE SPACE.	
<input type="checkbox"/>	<i>Where provided, clinical laboratory service space shall comply with the requirements of Section 1224.17, Clinical Laboratory Service Space.</i>
1228.43 RADIOLOGICAL SERVICE SPACE.	
<input type="checkbox"/>	<i>Where provided, Radiology/Imaging Service Space shall comply with the requirements of Section 1224.18, Radiological/Imaging Service Space and the general construction provisions of Section 1228.4.</i>

Footnotes:

- (3) Designer Tip: Observation of the seclusion room is also acceptable from a distributed nurse station or work station located within the anteroom or vestibule itself.
- (4) Designer Tip: Door lever handles shall point downward on the patient room side of the door. On the corridor side of the door, however, the door lever handles should point upward to avoid creating a ligature point from the corridor side lever up and over the door into the patient room. When not using specifically designed ligature-resistant hardware, careful consideration should be given to the type of hardware used to ensure the end of the lever handle will not promote risk of self-harm or harm to others.

APPENDIX C

1224.31 [OSHPD-1] PSYCHIATRIC NURSING UNIT (MEDICAL)

Compliance Guide for CBSC Requirements

Facility Name:	Click or tap here to enter text.		
HCAI Project Number:	Click or tap here to enter text.		
Facility Number:	Click or tap here to enter text.	Date:	Click or tap here to enter text.
1224.31 PSYCHIATRIC NURSING UNIT.			
1224.31.1 Psychiatric unit space.			
<input type="checkbox"/>	A psychiatric unit shall be housed in a separate and distinct nursing unit.		
1224.31.1.1 General.			
<input type="checkbox"/>	A psychiatric nursing unit shall meet the requirements of Section 1224.14 for a unit that provides acute medical care or 1228.14 for a non-medical unit, in addition to the requirements of Section 1228.4, based on the functional program. Specific application shall respond to the patient injury and suicide prevention component of the Patient Safety Risk Assessment prepared under California Administrative Code (Part 1 of Title 24) Section 7-119. If a unit provides acute medical care, the unit shall be located in a building that is compliant with California Administrative Code Chapter 6 for OSHPD-1.		
1224.31.1.2 Windows.			
<input type="checkbox"/>	Windows modified to prevent patients from leaving the unit.		
1224.31.1.3 Access control.			
<input type="checkbox"/>	Entrances and exits which may be locked if necessary.		
1224.31.1.4 Seclusion room(s).			
<input type="checkbox"/>	Seclusion rooms shall be provided and comply with Section 1224.4.4.1.4.		
<input type="checkbox"/>	1224.4.4.1.4 Seclusion room. <i>Where provided, seclusion rooms shall comply with the following requirements:</i>		
<input type="checkbox"/>	1224.4.4.1.4.1 General.		
<input type="checkbox"/>	1. <i>Capacity. Each room shall accommodate only one patient.</i>		
<input type="checkbox"/>	2. <i>Layout and access. Seclusion rooms shall be accessed through an anteroom or vestibule that also provides access to a toilet room. The door openings to the anteroom and the toilet room shall have a minimum clear width of 3 feet 8 inches (1118 mm).</i>		

<input type="checkbox"/>	<i>3. The room(s) shall be located to permit observation from the nurse station.</i>
<input type="checkbox"/>	<i>4. Seclusion rooms shall be permitted to be grouped together and may share a common vestibule/anteroom.</i>
<input type="checkbox"/>	<p>1224.4.4.1.4.2 Space requirements. Seclusion rooms shall have a minimum clear floor area of 60 square feet (5.57 m²) with a minimum wall length of 7 feet (2134 mm) and a maximum wall length of 11 feet (3353 mm).</p> <p>Exception: Where a room for restraining patients is authorized by the California Department of Public Health, it shall have a minimum clear floor area of 80 square feet (7.43 m²) with a minimum wall length of 7 feet (2134 mm) and a maximum wall length of 11 feet (3353 mm).</p>
<input type="checkbox"/>	<p>1224.4.4.1.4.3 Special design elements. Seclusion rooms shall be designed and constructed in compliance with the following requirements:</p> <ol style="list-style-type: none"> 1. The walls, ceiling, and floor of the seclusion room shall be designed to withstand direct and forceful impact. If padded materials are used inside the room, they shall meet the interior finish requirements in Chapter 8, Interior Finishes, of this code. 2. Minimum ceiling height shall be 9 feet (2743 mm). 3. Doors. <ol style="list-style-type: none"> 3.1. Door hardware shall be ligature resistant. 3.2. The entrance door to the seclusion room shall swing outward. 3.3. Doors shall permit staff observation of the patient through a view panel while also maintaining provisions for patient privacy. The maximum sill height shall be 36 inches (914 mm) above the finish floor. The view panel shall be fixed glazing with polycarbonate or laminate on the inside of the glazing. 4. Seclusion rooms shall not contain outside corners or edges. 5. All items in the room (e.g., lighting fixtures, sprinkler heads, HVAC grilles, and surveillance cameras, etc.) shall be tamper resistant. 6. Electrical switches and receptacles are prohibited in the seclusion room.
1224.31.1.5 Consultation room(s).	
<input type="checkbox"/>	Used for interviewing patients.
1224.31.1.6 Dining and recreation.	
<input type="checkbox"/>	Provide spaces for dining and recreation. The total area for these purposes shall be not less than 30 square feet (2.8 m ²) per patient.
1224.31.1.7 Storage.	
<input type="checkbox"/>	Storage closets or cabinets for recreational and occupation therapy equipment.

1224.31.1.8 Exam or treatment room.	
<input type="checkbox"/>	A room for physical examinations and medical treatment.
1224.31.1.9 Activity spaces.	
<input type="checkbox"/>	Indoor and outdoor space for therapeutic activities.
1224.31.1.10 Occupational therapy.	
<input type="checkbox"/>	Facilities for occupational therapy shall comply with Section 1224.35.3, items 1, 2, and 3.
1224.31.1.11 Recreation.	
<input type="checkbox"/>	A recreation room with a minimum of 100 square feet (9.3 m ²) in each building, and on each floor of a building accommodating six or more psychiatric patients.
1224.31.1.12 Nurse call.	
<input type="checkbox"/>	Refer to Section 1224.4.6.5. [Refer also to CEC Section 517.18]
1224.31.1.13 Privacy.	
<input type="checkbox"/>	Visual privacy in multibed rooms (e.g., cubicle curtains) is not required.
1224.31.1.14 Tamper resistant.	
<input type="checkbox"/>	The ceiling and the air distribution devices, lighting fixtures, sprinkler heads, and other appurtenances shall be of a tamper-resistant type.
1224.31.1.15 Toilet rooms.	
<input type="checkbox"/>	Each patient room shall be provided with a private toilet room that meets the following requirements:
<input type="checkbox"/>	<ol style="list-style-type: none"> 1. The door shall not be lockable from within. 2. The door shall be capable of swinging outward. 3. The ceiling shall be of tamper-resistant construction and the air distribution devices, lighting fixtures, sprinkler heads, and other appurtenances shall be of the tamper-resistant type.
1224.31.1.16 Handwashing stations.	
<input type="checkbox"/>	Handwashing stations located in patient rooms and patient toilet rooms may include anti-ligature features that do not compromise compliance with the hot and cold water supply controls, laminar flow, and sink requirements of Section 210.0 and Table 4-2 of the California Plumbing Code. Handwashing stations within patient rooms and patient toilet rooms in psychiatric nursing units are not required to be equipped with gooseneck spouts and the discharge point may be less than 5 inches (127 mm) above the fixture rim.
1224.31.1.17 Administrative center(s) or nurse station(s).	
<input type="checkbox"/>	The distance between the nurse station's entrance and the center of the doorway of the most remote patient bedroom shall not exceed 90 linear feet (27,432 mm). Refer to Section 1224.4.4.2.
1224.31.2 Education.	

<input type="checkbox"/>	If a unit treats children of school age over a period of one month or more, it shall provide physical facilities for an educational program, such as classrooms and an office for the teacher.
1224.31.3 Service areas.	
<input type="checkbox"/>	The standards noted in Section 1224.14.2 shall apply to service areas for psychiatric nursing units.

APPENDIX D

1225.6.6 [OSHPD-2] SPECIAL TREATMENT PROGRAM SERVICE

Compliance Guide for CBSC Requirements

Facility Name:	Click or tap here to enter text.		
HCAI Project Number:	Click or tap here to enter text.		
Facility Number:	Click or tap here to enter text.	Date:	Click or tap here to enter text.
1225.6.6 SPECIAL TREATMENT PROGRAM SERVICE.			
<input type="checkbox"/>	<i>Projects associated with Special Treatment Program Services (providing therapeutic services to an identified mentally disordered population group) in skilled nursing and intermediate-care facilities shall include a Patient Safety Risk Assessment prepared under California Administrative Code (Part 1 of Title 24) Section 7-119.</i>		
1225.6.6.1 Location.			
<input type="checkbox"/>	<i>A special treatment program service shall be located in a distinct separate unit.</i>		
1225.6.6.2 Nursing service.			
<input type="checkbox"/>	<i>Nursing service space shall comply with Section 1225.4.1.</i>		
1225.6.6.3 Activity program.			
<input type="checkbox"/>	<i>Provide a minimum of 25 square feet of dining and recreation space per bed.</i>		
1225.6.6.4 Indoor and outdoor space.			
<input type="checkbox"/>	<i>Indoor and outdoor space shall be designated for the special treatment program.</i>		