Housekeeping/Laundry/Maintenance

(a) A facility shall:

(1) Maintain disposable sterile supplies in the amount necessary to meet the anticipated needs of the patients, or

(2) Maintain autoclave equipment, or

(3) Make contractual arrangements for outside autoclaving and sterilizing services.

(b) If a facility maintains a central supply and sterilizing area, it shall include but not be limited to:

(1) An autoclave or sterilizer, which shall be maintained in operating condition at all times.

(A) Autoclaves shall be equipped with time recording thermometers in addition to the standard mercury thermometers, except for portable sterilizers and autoclaves.

(B) Instructions for operating autoclaves and sterilizers shall be posted in the area where the autoclaves and sterilizers are located.

(2) Work space.

(3) Storage space for sterile supplies.

(4) Storage space for unsterile supplies.

(5) Equipment for cleaning and sterilizing of utensils and supplies.

(c) The facility shall provide for:

(1) Effective separation of soiled and contaminated supplies and equipment from the clean and sterilized supplies and equipment.

(2) Clean cabinets for the storage of sterile supplies and equipment.

(3) An orderly system of rotation of supplies so that the supplies stored first shall be used first and that multi-use supplies shall be reautoclaved as they become outdated.

(4) Dating of materials sterilized.

(5) Loading of the autoclave or sterilizer.

(6) Checking of recording and indicating thermometers. Recording thermometer charts shall be on file for one year.

(7) Conducting monthly bacteriological tests. Reports of test results for the last 12 months shall be retained on file.

(8) Length of aeration time for materials that are gas-sterilized.
(a) Each facility shall routinely clean articles and surfaces such as furniture, floors, walls, ceilings, supply and exhaust grills and lighting fixtures.

(b) Schedules and procedures shall be posted which indicate the areas of the facility which shall be cleaned daily, weekly or monthly. The cleaning schedules and procedures shall be implemented.

(c) Cleaning supplies and equipment shall be available to housekeeping staff. Such cleaning supplies and equipment shall meet the following requirements:

1. Cleaning supplies and equipment shall be stored in rooms for housekeeping use only.
2. A commercial detergent germicide shall be used for all cleaning.
3. Mop heads shall be removable and changed at least daily.

(d) Housekeeping personnel shall be employed to maintain the interior of the facility in a safe, clean, orderly and attractive manner free from offensive odors.

(e) A person qualified by experience and training shall be in charge of the housekeeping department.

(f) Janitor’s closets, service sinks and storage areas shall be clean and maintained to meet the needs of the facility.

(a) When a facility operates its own laundry, such laundry shall be:

1. Located in relationship to other areas so that steam, odors, lint and objectionable noises do not reach patient or personnel areas.
2. Adequate in size, well-lighted and ventilated to meet the needs of the facility.
3. Laundry equipment shall be of a suitable capacity, kept in good repair and maintained in a sanitary condition.
4. The laundry space shall be maintained in a clean and sanitary condition.

(b) If the facility does not maintain a laundry service, the commercial laundry utilized shall meet the standards of this section.

(c) Laundry areas shall have, at a minimum, the following:

1. Separate rooms for the storage of clean linen and soiled linen.
2. Handwashing and toilet facilities maintained at locations convenient for laundry personnel.
3. Separate linen carts labeled "soiled" or "clean linen" and constructed of washable materials which shall be laundered or suitably cleaned as needed to maintain sanitation.
4. Written procedures for handling, storage, transportation and processing of linens shall be posted in the laundry and shall be implemented.

(a) Clean linen shall be stored, handled and transported in a way that precludes crosscontamination.
(b) Clean linen shall be stored in clean, ventilated closets, rooms or alcoves, used only for that purpose.

(c) Clean linen not in covered storage shall be covered.

(d) Clean linen from a commercial laundry shall be delivered to a designated clean area in a manner that prevents contamination.

(e) Linens shall not be threadbare and shall be maintained in good repair.

(f) A supply of linen shall be provided sufficient for not less than three complete bed changes for the facility's licensed capacity.

(g) A supply of clean wash cloths and towels shall be provided and available to staff to meet the care needs of the patients.

(a) Soiled linen shall be handled, stored and processed in a manner that will prevent the spread of infection.

(b) Soiled linen shall be sorted in a separate room by methods affording protection from contamination.

(c) Soiled linen shall be stored and transported in a closed container which does not permit airborne contamination of corridors and areas occupied by patients and precludes cross contamination of clean linen.

(d) When laundry chutes are used to transport soiled linen, they shall be maintained in a clean, sanitary state.

Bedpans shall be emptied and cleaned in utility rooms unless toilets adjoining patients' rooms are equipped with flushing attachments and vacuum breakers. Bathtubs, lavatories or laundry sinks shall not be used for cleaning and emptying bedpans.

(f) The facility shall be maintained free from vermin and rodents through operation of a pest control program. The pest control program shall be conducted in the main patient buildings, all outbuildings on the property and all grounds.

(a) Solid wastes shall be stored and eliminated in a manner to preclude the transmission of communicable disease. These wastes shall not be a nuisance or a breeding place for insects or rodents nor be a food source for either.

(b) Solid waste containers shall be stored and located in a manner that will minimize odors in patient or dietary areas.

(c) Syringes and needles, before being discarded into waste containers, shall be rendered unusable.

(a) All containers, except movable bins used for storage of solid wastes, shall have tightfitting covers in good repair, external handles and be leakproof and rodent proof.
(b) Movable bins when used for storing or transporting solid wastes from the premises shall have approval of the local health department and shall meet the following requirements:

1. Have tight-fitting covers, closed when not being loaded.
2. Be in good repair.
3. Be leakproof.
4. Be rodent proof unless stored in a room or screened enclosure.

(c) All containers receiving putrescible wastes shall be emptied at least every four days or more if necessary.

(d) Solid waste containers, including movable bins, shall be thoroughly washed and cleaned each time they are emptied unless soil contact surfaces have been completely protected from contamination by disposable liners, bags or other devices removed with the waste. Each movable bin shall be accessible and shall have a drainage device to allow complete cleaning at the storage area.

Infectious waste, as defined in Health and Safety Code Section 25117.5, shall be handled and disposed of in accordance with the Hazardous Waste Control Law, Chapter 6.5, Division 20, Health and Safety Code (beginning with Section 25100) and the regulations adopted thereunder (beginning with Section 66100 of this Title).

All spaces located in the facility or internally connected to a licensed facility shall be considered a part of the facility and shall be subject to licensing regulations.

**Corridors, Floors, and Signage**

(c) Only upon the written approval of the Department may any exit door, corridor door, yard enclosures or perimeter fences be locked to egress.

Corridors shall be equipped with firmly secured handrails as required by Section T17-058(e), Title 24.

Every institution must be maintained, managed, and equipped to provide adequate care, safety, and treatment of each resident.

Exit doors shall not be locked in such a way that a key is necessary to open the door from the inside of the building. A latch or other fastening device on the door shall be provided with a knob, handle, panic bar or other simple type of releasing device, which is part of the door handle hardware, of which the method of operation is obvious even in darkness. Corridors in facilities licensed prior to 1973 shall be at least six (6) feet wide. Standard handrails shall be provided on each side of the corridor in all areas used by patients; however, a six (6) foot passageway must be maintained. For six (6) foot corridors, a handrail shall be required only on one side. The walls of the facility shall be smooth surface with painted or equally washable finish:

They shall be without cracks, and in conjunction with floors, shall be waterproof and free from spaces which may harbor ants and roaches. The walls in the examining room and treatment room shall have waterproof paint.
All walls shall be kept clean and in good repair. All floor surfaces throughout the building shall provide a surface or finish which is smooth, waterproof, grease proof, and resistant to heavy wear. Safety devices shall be provided on ramps. All floors in baths, toilets, lavatories, beneath kitchen dish washing facilities and bedpan rooms shall have a floor covering of a continuous type. No cracks or joints in the floor covering shall be permitted in these rooms. Carpet is permitted as floor covering for the following areas, provided the carpet meets the following requirements: The carpet has a flame spread rating of seventy-five (75) or less, has a smoke density of one-hundred (100) or less, when the carpet is treated in accordance with NFPA 253, Flooring Radiant Panel Test.

No pad will be permitted under the carpet. The carpet is to be glued directly to the floor. Prior approval by the Division is required before the carpet is installed. In nursing homes where carpet is installed, the home must furnish equipment and have written cleaning procedures to clean and maintain the carpet. This equipment must include, as a minimum, a shampooer and wet/dry vacuum.

Facilities presently having carpets in areas other than those listed above may keep that carpet as long as it is maintained properly and free of odors. If not properly maintained and free of odors, the carpet will be removed and replaced with a hard smooth surface.

**Lighting, Noise, Temperature (HVAC), and Odors**

(b) Detachable extension cords shall be readily accessible to patients at all times. Utility rooms shall be maintained as required by Section T17-408 of Title 24.

(c) All buildings, fixtures, equipment and spaces shall be maintained in operable condition.

(d) Personnel shall be employed to provide preventive maintenance and to carry out the required maintenance program.

(e) Equipment provided shall meet all applicable California Occupational Safety and Health Act requirements in effect at the time of purchase. All portable electrical medical equipment designed for 110-120 volts, 60 hertz current, shall be equipped with a three wire grounded power cord with a hospital grade three prong plug. The cord shall be an integral part of the plug.

(a) The licensee shall be responsible for regular inspection, cleaning or replacement of all filters installed in heating, air conditioning and ventilating systems, as necessary to maintain the systems in normal operating condition.

(b) A written record of inspection, cleaning or replacement, including static pressure drop, shall be maintained and available for inspection. The record shall include a description of the filters originally installed, the American Society of Heating, Refrigeration and Air Conditioning Engineers (ASHRAE) efficiency rating and the criteria established by the manufacturer or supplier to determine when replacement or cleaning is necessary.

(c) Following filter replacement or cleaning, the installation shall be visually inspected for torn media and by-pass in filter frames by means of a flashlight or equivalent, both with fans in operation and stopped. Tears in filter media and by-pass in filter frames shall be eliminated in accordance with the manufacturer's directions and as required by the Department.
(d) Where a filter maintenance is performed by an equipment service company, a certification shall be provided to the licensee that the requirements listed in this section have been accommodated.

(a) Auxiliary lighting and power facilities shall be provided as required by Sections E702-5, E702-6, E702-8 and E702-21 of Title 24, California Administrative Code. Flashlights shall be in readiness for use at all times. Open-flame type of light shall not be used.

(b) The licensee shall provide and maintain an emergency electrical system in safe operating condition and in compliance with subsections (d), (e), and (f). The system shall serve all lighting, signals, alarms and equipment required to permit continued operation of all necessary functions of the facility for a minimum of six hours.

(c) If the Department determines that an evaluation of the emergency electrical system of a facility or portion thereof, is necessary, the Department may require the licensee to submit a report by a registered electrical engineer which shall establish a basis for alteration of the system to provide reasonable compliance with Subarticle E702-B, Part 3, Title 24, California Administrative Code (Emergency Electrical Systems for Existing Nursing Homes). Essential engineering data, including load calculations, assumptions and tests, and where necessary, plans and specifications, acceptable to the Department, shall be submitted in substantiation of the report. When corrective action is determined to be necessary, the work shall be initiated and completed within an acceptable time limit.

(d) The emergency lighting and power system shall be maintained in operating condition to provide automatic restoration of power for emergency circuits within ten seconds after normal power failure.

(e) Emergency generators shall be tested at least every 14 days under full load condition for a minimum of 30 minutes.

(f) A written record of inspection, performance, exercising period and repair of the emergency electrical system shall be regularly maintained on the premises and available for inspection by the Department.

(a) Where water for human consumption is from an independent source, it shall be subjected to bacteriological analysis by the local health department or a licensed commercial laboratory at least every three months. A copy of the most recent laboratory report shall be available for inspection.

(b) Plumbing and drainage facilities shall be maintained in compliance with Part 5, Title 24, California Administrative Code, Basic Plumbing Requirements. Drinking water supplies shall comply with Group 4, Subchapter 1, Chapter 5, Division T17, Part 6, of Title 24, California Administrative Code.

(c) Vacuum breakers shall be maintained in operating condition where required by Section T17-210(c), Division T17, Part 6, Title 24, California Administrative Code.

(d) Hot water temperature controls shall be maintained to automatically regulate temperature of hot water delivered to plumbing fixtures used by patients to attain a hot water temperature in compliance with Section T17-210(e), Title 24, California Administrative Code.
(e) Minimum hot water temperature shall be maintained at the final rinse section of dishwashing facilities as required by Section T17-210(f), Division T17, Part 6, Title 24, California Administrative Code unless alternate methods are approved by the Department.

(f) Taps delivering water at or above the stated temperatures shall be in compliance with requirements specified in Section T17-214(e), Division T17, Part 6, Title 24, California Administrative Code. Special precautions shall be taken to prevent the scalding of patients.

(a) All rooms, attics, basements, passageways, and other spaces shall be provided with artificial illumination. As set forth in Parts 2 and 3 and Sections E702-e and E702-4, Part 3, Title 24, California Administrative Code.

(c) All accessible areas of corridors, storerooms, stairways, ramps, exits and entrances shall have a minimum of 20 foot candles of light.

(a) A written manual on maintenance of heating, air conditioning and ventilation systems shall be adopted by each facility.

(b) A log shall be utilized to document maintenance work performed.

(c) When maintenance is performed by an equipment service company, a certification shall be provided to the licensee that the required work has been performed in accordance with acceptable standards. This certification shall be retained on file in the facility for review by the Department.

Heating, air conditioning and ventilating systems shall be maintained in normal operating conditions to provide a comfortable temperature and shall meet the requirements of Section T17-105, Title 24, California Administrative Code.

Screens shall be provided as required by Section T17-066, Title 24, California Administrative Code.

412.1 The institution shall be equipped with heating and cooling equipment that will maintain a minimum temperature of seventy-five (75) degrees F during winter and eighty (80) degrees F during summer in all patient areas when the temperature outside does not exceed ninety-five (95) degrees F. If temperature outside exceeds one-hundred (100) degrees F, there shall be a fifteen (15) degree F difference in exterior to interior temperature. If air conditioner should break down or malfunction, the OLTC should be notified immediately. Patients' toilets and bathroom temperature shall be maintained at eighty (80) degrees F.

412.2 Central heating systems shall be provided with Underwriters; approved temperature controls throughout the building.

413.1 Each patient's room shall have natural lighting during the day and have general lighting at night. Natural lighting shall be augmented when necessary by artificial illumination.

413.2 Approved "exit" lights shall be provided at all exit areas and shall be continuously illuminated. The facility shall provide an emergency source of electrical power necessary to protect the health and safety of patients in the event the normal electrical supply is interrupted. The emergency electrical power system must supply power adequate at least for lighting in all means of egress; equipment to maintain fire detection, alarm, and extinguishing systems. Dry battery or wet-cell batteries may be used as emergency power in facilities where life support systems are not used. Where life support systems are used, emergency electrical service is provided by an emergency generator located on the premises.
415.1 The water supply used by the institution shall meet the requirements of the Department of
Health.

415.2 There shall be procedures to ensure water to all essential areas in the event of loss of normal
water supply.

415.3 The water service shall be brought into the building to comply with the requirements of the
Arkansas State Plumbing Code and shall be free of cross connections.

415.4 Hot Water Heaters

415.4.1 Hot water heating and storage equipment shall have sufficient capacity to supply four (4)
gallons of water at one-hundred ten (110) degrees F (43 degrees C), per hour per bed for institution
fixtures, one (1) gallon at one-hundred sixty (160) degrees F (71 degrees C), per hour per bed for
the laundry and one (1) gallon at one-hundred eight (180) degrees F (82 degrees C) per hour per
bed for the kitchen. The water temperature in patient areas shall not exceed one-hundred ten (110)
degrees F (49 degrees C).

415.4.2 The hot water storage tank, or tanks, shall have a capacity equal to forty (40) percent of
heater capacity.

415.4.3 Tanks and heaters shall be fitted with pressure temperature relief valves.

415.4.4 Temperatures of hot water at plumbing fixtures used by residents shall be automatically
regulated by control valves. Water temperature in patient areas shall be checked weekly.

415.4.5 All gas, oil, or coal heaters shall be vented to the outside.

415.5 Plumbing and Other Piping Systems

All plumbing systems shall be designed and installed in accordance with the requirements of
Arkansas State Plumbing Code. From the cold water service and hot water tanks, cold water and hot
water mains and branches shall be run to supply all plumbing fixtures and equipment which
require hot and cold water or both for their operation. Pipes shall be sized to supply hot and cold
water to all fixtures with a minimum pressure of fifteen (15) pounds at the top floor fixtures during
maximum demand periods.

415.5.1 Water closets shall be the elongated type, and water closet seats shall be of the open-front
type.

415.5.2 Gooseneck spouts shall be used for patients' lavatories and sinks which may be used for
filling pitchers.

415.5.3 Knee, elbow, wrist, or foot action faucets shall be used in treatment rooms.

415.5.4 An electrically operated water fountain shall be so located as to be accessible to patients.

415.5.5 Backflow preventers (vacuum breakers) shall be installed with any water supply fixture
where the outlet's end may at times be submerged. Examples of such fixtures are hoses, sprays,
direct flushing valves, aspirators and under-rim water supply connections to a plumbing fixture or
receptacle in which the surface of the water in the fixture or receptacle is exposed at all times to atmospheric pressure.

Each nursing home shall have an electrically-supervised, manually-operated fire alarm system in accordance with Section 6-3 NFPA 101, Life Safety Code handbook that applies to their nursing home.

**Amenities**

(a) A telephone shall be installed to meet the requirements of Section E702-32 of Title 24. This may not be required in separate buildings having six beds or less which are restricted to occupancy by ambulatory patients.

(b) The telephone at the nurses station shall not be considered as meeting the requirements of this section.

- All homes shall be provided with dust free drives and parking lots.

- Parking areas shall be provided in a ratio of one (1) individual parking space for each five (5) licensed beds.

- All exterior doors shall be effectively weather stripped

**Outdoor Area**

(a) The facility, including the grounds, shall be maintained in a clean and sanitary condition and in good repair at all times to ensure safety and well-being of patients, staff and visitors.

(b) Buildings and grounds shall be free of environmental pollutants and such nuisances as may adversely affect the health or welfare of patients to the extent that such conditions are within the reasonable control of the facility.

**New Construction: Facility-Wide**

429 CORRIDORS

Corridors shall be at least eight (8) feet wide.

431 STORAGE

There shall be a minimum of five (5) square feet per bed for general storage space provided in those cases where built-in closets are provided in patient rooms. It is recommended that this be concentrated in one general area except for small storage areas within the nursing units for wheelchairs, patient lifts, walkers, etc.

433 ADMINISTRATIVE OFFICES

Separate office space shall be provided for administrative and business functions as follows:

- Office for the administrator.
Office for the director of nursing services.

Office or space for social and activity director.

442 FIRE ALARM SYSTEM

Each nursing home shall be an electrically supervised, manually operated fire alarm system in accordance with Section 6-3 NFPA 101, Life Safety Code handbook that applies to their nursing home.

444 CEILINGS, WALLS, AND FLOORS

Ceilings shall be a minimum of eight (8) feet. (Refer to Section 411 for surfaces.)

Walls (Refer to Section 411).

Floors (Refer to Section 411).

445 WATER COOLER

An electrically operated water fountain of an approved type shall be provided for each nurses' station. The water fountain shall be accessible to the physically handicapped. Water fountains must be recessed not to obstruct the corridor.