§11-94-4 Activities program.

(a) A plan for independent and group activities shall be developed for each patient in accordance with the patient’s needs, capacities, and interests.

(1) The activities plan shall be incorporated in the patient’s overall plan of care, reviewed regularly in conjunction with it, and altered as needed.

(2) Records shall be kept of the extent and level of each patient’s participation in the activities program.

(b) Organized recreational activities consistent with the patient’s needs, capabilities and interests shall be coordinated with other services and programs provided the patient.

(c) A staff member, qualified by experience or training in directing group activities or recreation, shall be responsible primarily for the activities program.

(d) There shall be sufficient, appropriately qualified activities or recreation staff and necessary supporting staff to carry out the various activities in accordance with stated goals and objectives.

(e) Recreation areas, facilities and equipment shall be designed and constructed or modified so as to be easily accessible to all patients regardless of their disabilities.

(f) Recreation equipment and supplies in sufficient quantity and variety shall be provided to carry out the stated objectives of the activity program.


§11-94-8 Construction requirements.

... (3) There shall be provisions within the facility for one or more areas of patient dining, diversional, and social activities. Total area for recreational and dining activities shall be not less than fifty square feet per bed for seventy-five percent of total bed capacity.

...(C) If a multi-purpose room is used for dining, diversional and social activities, there shall be sufficient space to accommodate all activities and prevent their interference with each other.