

Office of Statewide Hospital Planning and Development

Department of Health Care Access and Information Office of Statewide Hospital Planning and Development

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### 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, provided 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 OSHPD. 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).

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.

### Department of Health Care Access and Information (HCAI) Office of Statewide Hospital Planning and Development (OSHPD)

### TABLE OF CONTENTS

INTRODUCTIONi
TABLE OF CONTENTS iii
SECTION I Behavioral Health Facility Types1
SECTION 2 Code References
SECTION 3 Acronyms and Definitions
SECTION 4 Acute Psychiatric Hospital Requirements7
SECTION 5 Functional Program 13
SECTION 6 Decision Flow Chart 17
SECTION 7 OSHPD Submittal Instructions
APPENDIX A – Patient Safety Risk Assessment [CAC 7-119 (C) 9] A-1
APPENDIX B – 1228 [OSHPD 5] ACUTE PSYCHIATRIC HOSPITALS OR UNIT CHECKLIST
APPENDIX C – 1224.31 [OSHPD 1] Psychiatric Nursing Unit (Medical) Checklist Compliance Guide for CBSC Requirements C-1
APPENDIX D – 1225.6.6 [OSHPD 2] Special Treatment Program Service Checklist Compliance Guide for CBSC Requirements D-1
REVISION HISTORYRH-1

### SECTION 1 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 OSHPD 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 OSHPD 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 Section 71000. APH facilities are under OSHPD 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 Section 70000. Psychiatric Nursing Units are under OSHPD 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 Section 72000. Special Treatment Programs are under OSHPD 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 Section 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 OSHPD jurisdiction. This *Guide* does not specifically address these clinics.

This *Guide* is intended 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.

### SECTION 2 CODE REFERENCES

**California Building Standards Code (CBSC)** are direct code requirements found in Title 24, California Code of Regulations (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).

- **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 OSHPD include the acronyms [OSHPD 1], [OSHPD 2], [OSHPD 3], and [OSHPD 5] as applicable.

Access to the referenced codes, and others referenced in this *Advisory Guide*, is provided through the California Building Standards Commission website (<u>https://www.dgs.ca.gov/en/BSC/Codes</u>) with active links to each publisher's website for read-only public access versions of the codes. These codes are also known as California Code of Regulations, Title 24.

Part 1, California Administrative Code

Part 2, California Building Code, Volumes 1 and 2

Part 3, California Electrical Code (Note: Accessed through the National Fire Protection Association (NFPA), however, requires the creation of a user account to view the Free Access - NFPA 70: 2022 California Electrical Code - NFPA 70 (2020 NEC®)

Part 4, California Mechanical Code

Part 5, California Plumbing Code

Part 6, California Energy Code

Part 9, California Fire Code

Part 10, California Existing Building Code

### SECTION 3 ACRONYMS AND DEFINITIONS

Acronyms and Definitions assist the user in recognizing and identifying various acronyms and terms generally used in the *Advisory Guide*. Please refer to the *Master Glossary of Acronyms and Definitions* on the HCAI website at <u>https://hcai.ca.gov/document/master-glossary-of-acronyms-and-definitions/.</u>for a list that includes terms used in this *Advisory Guide*, as well as in other OSHPD published documents. Other definitions may also be found in Title 24.

### SECTION 4 ACUTE PSYCHIATRIC HOSPITAL REQUIREMENTS

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 Section 70000 (GACH) and Section 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.

 Structural Requirements. SNFs are OSHPD-2 and APHs are OSHPD 5for structural requirements as well as functional requirements. OSHPD-2 (SNF) and OSHPD-5 (APH) are 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.

Skilled Nursing Facilities [OSHPD-2] and Acute Psychiatric Hospitals [OSHPD-5], having 50 or more care recipients, are listed as Risk Category III and those with 49 or less care recipients are Risk Category II. This results in a Seismic Importance Factor *I*<sub>e</sub> of 1.25 for SNFs and APHs that are in Risk Category III and *I*<sub>e</sub> of 1.0 for those in Risk Category II 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 with 50 or more care recipients having a structural strength that is 25% stronger than typical buildings. This effort brings the structural requirements for Acute Psychiatric Hospitals into alignment with the national standards.

Special Seismic Certification (SSC) is required for life-safety components, such as emergency and standby power systems per 2022 California Building Code Section 1705.14.3.1. SSC is required to ensure that resources utilized to provide alternate power for loads remain functional "during power outages that may result from a public safety power shutoff, an emergency, a natural disaster, or other cause." Based on these requirements, existing generators and essential power systems are usually code compliant, and therefore, have SSC for their Essential Electrical System.

Please see <u>PIN 55 - Special Seismic Certification Preapproval (OSP)</u> for further details of SSC requirements.

If a new alternate power system is required to provide the required back-up power for equipment required for safe temperature for residents, for life-saving equipment, and for oxygen-generating devices in a SNF, the following equipment and components must be seismically certified. (Refer to CBC 1705.14.3.1):

- Generators.
- UPS and batteries.
- Renewable electrical generation and control equipment.
- Panelboards as defined in the CEC Article 100.
- Manual and automatic transfer switches.
- Switchgear and switchboards.

# Please see Advisory Guide A6 – Alternate Source(s) of Power to Maintain Safe Temperatures, Life-Saving Equipment, and Oxygen-Generating Devices.

**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 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 Section1228.4.18 as ligature resistant.

- 2. 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.
- 3. **Basic and Supplemental Services**. The requirements for Acute Psychiatric Hospitals are under CBC Section 1228. Basic Services under 1228 align with Title 22 and match the section number sequence of their counterparts under 1224. Refer to the definitions of Basic Services under the definitions of "Acute Psychiatric Hospitals" and "General Acute Care Hospitals" in the CBC.

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

4. **MEP Requirements**. The banner acronyms [OSHPD-2] and [OSHPD-5] are used to identify OSHPD amendments in the California Electrical Code (CEC), California Mechanical Code (CMC), and California Plumbing Code (CPC).

CEC Article 517 Part III provides requirements for the Essential Electrical System (EES). Article 517.42 requires 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 threebranch essential electrical system to feed those spaces under Article 517.31, which are "equipment branch," "life safety branch," and "critical branch."

In addition to the requirements for the EES, there are additional requirements for equipment in SNFs requiring back-up by alternate power sources, namely:

- Equipment required to provide safe temperature for residents,
- Life-saving equipment, and
- Oxygen-generating devices.

While these systems (cooling, lifesaving, and oxygen-generating equipment) are not required to be backed up by the EES this is the only alternate power source at most existing SNFs. However, since these loads were not required to be fed by essential or an alternate power source prior to January 1, 2024, projects located in SNFs may need to address this code requirement. See <u>Advisory Guide A6 –</u> <u>Alternate Source of Power to Maintain Safe Temperatures, Life-Saving Equipment, and Oxygen Generating Devices for Skilled Nursing Facilities [OSHPD 2].</u>

CEC Article 700.12 requires that onsite fuel supply for EES be provided to operate the EES for not less than 6 hours (full-demand operation) for SNFs and APHs. Onsite fuel storage to allow the facilities to provide a safe environment for inhabitants must provide for operation of the alternative fuel source for a period of 96 hours. Alternatively, SNFs that use a generator, batteries, or a combination of batteries in tandem with a renewable electrical generation resource as their alternative source of power must store sufficient fuel onsite to maintain generator operation for no less than 96 hours or plan for fuel delivery for an emergency event. If fuel is to be delivered during an emergency event, the facility must ensure that fuel will be available with no delays. The option to arrange for delivery of additional fuel for an emergency event will need to be submitted to OSHPD and forwarded to CDPH for final approval. Fuel delivery will need to be arranged to maintain continued operation for the 96-hour duration.

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.

5. **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.

### SECTION 5 FUNCTIONAL PROGRAM

# PART 1: CALIFORNIA ADMINISTRATIVE CODE SECTION 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 <u>or</u> <i>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, considering 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.* 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 <u>www.bhfcllc.com</u>.

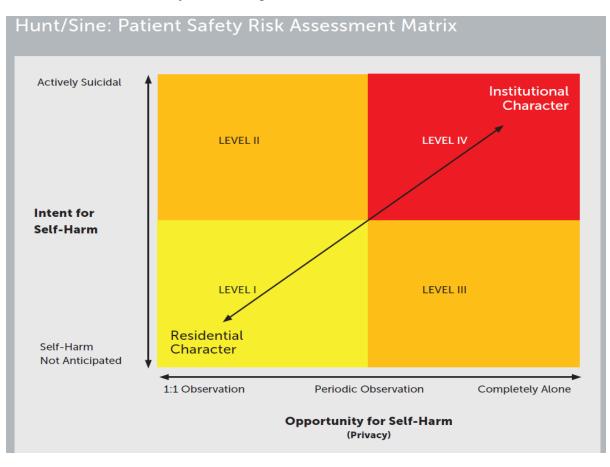


Figure 1: Patient Safety Assessment Matrix

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**

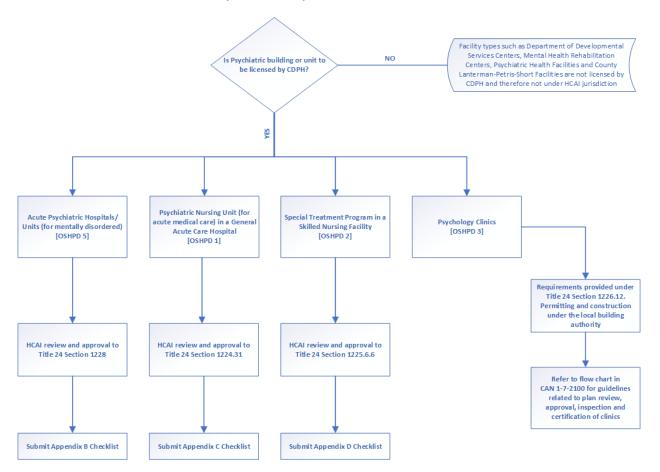
- 1. Activity spaces, group rooms, and treatment spaces (supervised with good visibility)
- 2. Dining rooms and recreation spaces, both indoor and outdoor.

### Lowest Level of Risk

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

### SECTION 6 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.

### SECTION 7 OSHPD SUBMITTAL INSTRUCTIONS

- 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 OSHPD <u>CAN 1-0 Enforceable Codes</u>.
- 2. For those projects which are affected by local planning and zoning, evidence of approval is required as part of the submittal to OSHPD.
- 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 OSHPD submittals for acute psychiatric projects will facilitate a more expeditious review.

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.

OSHPD 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.

### APPENDIX A PATIENT SAFETY RISK ASSESSMENT [CAC 7-119 (C) 9]

Facility Name:			
OSHPD Project Number:			
Facility Number:			
Date:			
	simplified overall plan identifying all program areas and associated ls (see <b>Figure 2</b> below for sample plan and legend)		
	ox if proposal is for an Acute Psychiatric Hospital (APH) or unit (for disordered) and submit <b>Appendix B</b> as separate file.		
	ox if proposal is for an Acute Psychiatric Unit (for acute medical) General Acute Care Hospital (GACH) and submit <b>Appendix C</b> as file.		
disorder	ox if proposal is for a Special Treatment Program (for mentally ed) within a Skilled Nursing Facility (SNF) or Intermediate-Care ICF) and submit <b>Appendix D</b> as separate file.		
avioral ar	nd Mental Health Risk Assessment		
•	pulations served (for example, inpatient children and adolescents, prensic, outpatients,) and assess items i. through iv. for each.		
valuation	of (enter patient population type #1 here)		
i.	Inherent risks with this population		
ii.	Model of Care		
iii.	Operational Considerations		
iv.	Built Environment Solutions		
valuation	of (enter patient population type #2 here)		
i.	Inherent risks with this population		
ii.	Model of Care		
iii.	Operational Considerations		
iv.	Built Environment Solutions		
	Project N Number: Number: Provide risk leve Check b mentally Check b within a separate Check b disorder Facility ( avioral ar Datient pc adults, for valuation i. ii. iii. iv. valuation i. iii.		

c) E	valuation of (enter patient population type #3, 4, 5, etc. here)
	i. Inherent risks with this population
	ii. Model of Care
	iii. Operational Considerations
	iv. Built Environment Solutions
	vioral and Mental Health Elements (Psychiatric Patient Injury and ide Prevention)
supervis area tha	ration to be given to patient profile and acuity, the anticipated level of staff ion for each area, and space visibility and supervision. Identify each program t will serve patients at risk of mental health injury and their corresponding risk injury and need for suicide prevention. Examples of areas include the I
Highest	Level of Risk
	1. Seclusion Rooms
	2. Patient bedrooms and toilet rooms
	3. Patient Intake Services
Moderat	e Level of Risk
	1. Activity spaces, group rooms, & treatment spaces
	2. Dining rooms & recreation spaces, both indoor & outdoor
	3. Corridors
Lowest L	_evel of Risk
	1. Exam rooms, private offices, and conciliation rooms
	2. Staff & support areas
C) Beha	vioral and Mental Health Response
levels of	nitigating features for the identified at-risk location. Note that more than three risk can be identified. Depict assigned risk levels on a keynoted plan with a legend. Coordinate with section B) above. See <b>Figure 2</b> below.
Check a	Il patient care setting design considerations implemented
	Patient privacy, dignity & health
	Risks related to patient elopement

	Harm to self, to others, and to the environment
	Clinical needs
	Security needs
Highest Level of Risk- Mitigating Features: ( <i>list here or refer to legend</i> )	
Moderate Level of Risk- Mitigating Features: (list here or refer to legend)	
Lowest Level of Risk- Mitigating Features: (list here or refer to legend)	

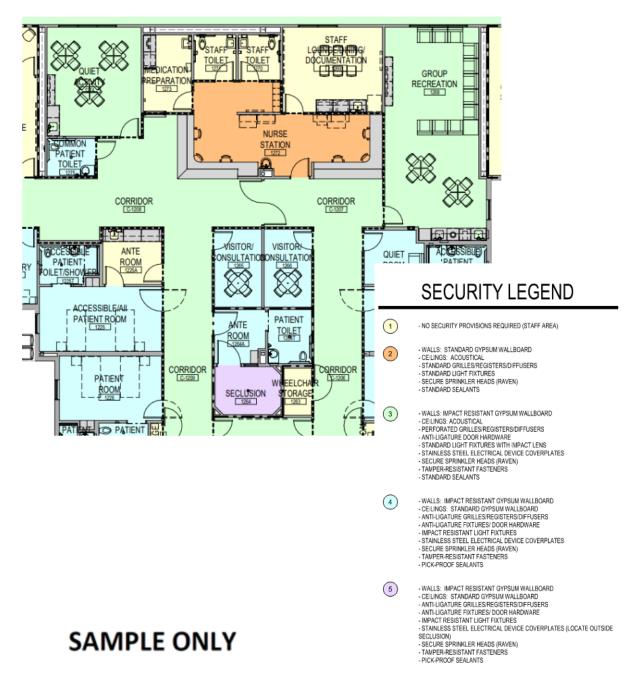


Figure 2: Sample of Keynoted Plan with Risk Level Legend

### APPENDIX B 1228 [OSHPD 5] ACUTE PSYCHIATRIC HOSPITALS OR UNIT CHECKLIST

Facility N	Name:	
OSHPD I	Project Number:	
Facility Number:		
Date:		
1228 [OSHPD 5] ACUTE PSYCHIATRIC HOSPITALS		
1228.1 S	cope.	
	The provisions of this section shall apply to acute psychiatric hospitals.	
1228.2 A	pplication.	
	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. Note: Refer to the applicable exceptions under Section 1224.2.	
1228.2.1	Functional program.	
	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.	
1228.4 G	ENERAL CONSTRUCTION.	
	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.	
1228.4.1 Jurisdiction.		
1228.4.1.1 Services/systems and utilities.		
-	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).	
1228.4.1.	.2 Means of egress.	

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	Means of egress shall only pass through structures that are under the jurisdiction of the Office of Statewide Hospital Planning and Development (OSHPD).
1228.4.	4 Support areas for patients.
1228.4.	4.1 Examination and treatment rooms.
1228.4.	4.1.1 Examination room.
	Examination rooms in acute psychiatric hospitals shall meet the requirements of Section 1224.4.4.1.1 as amended below:
	<b>Examination room.</b> Examination rooms in acute psychiatric hospital shall have a minimum clear floor area of 120 square feet (11.15 m <sup>2</sup> ), 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)
1228.4.	4.1.1.1 Location.
	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.
1228.4.4.1.1.2 Space requirements.	
	Examination rooms shall have a minimum clear floor area of 120 square feet $(11.15 \text{ m}^2)$ .
1228.4.4.1.2 Treatment room.	
	Where provided, refer to Section 1224.4.4.1.2.
	<b>1224.4.4.1.2 Treatment room.</b> Unless specified elsewhere, if a treatment room is provided, it shall have a minimum clear floor area of 120 square feet (11.15 m <sup>2</sup> ), 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. Multibed treatment rooms shall have separate patient cubicles with a minimum clear floor area of 80 square feet (7.4 m <sup>2</sup> ) 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.

1228.4.4.1.3 Airborne infection isolation exam/treatment room.			
	Where provided, refer to Section 1224.4.4.1.3.		
1228.4.4	<b>1228.4.4.1.4 Seclusion room.</b> Refer to Section 1224.4.4.1.5.		
	<b>1224.4.4.1.5 Seclusion room.</b> Where provided, seclusion rooms shall comply with the following requirements:		
	1224.4.4.1.5.1 General.		
	1. Capacity. Each room shall accommodate only one patient.		
	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).		
	3. The room(s) shall be located to permit observation from the nurse station. (3)		
	4. Seclusion rooms shall be permitted to be grouped together and may share a common vestibule/anteroom.		
	1224.4.4.1.5.2 Space requirements.		
	Seclusion rooms shall have a minimum clear floor area of 60 square feet (5.57 m <sup>2</sup> ) with a minimum wall length of 7 feet (2134 mm) and a maximum wall length of 11 feet (3353 mm). <b>(3)</b> 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 <sup>2</sup> ) with a minimum wall length of 7 feet (2134 mm) and a maximum wall length of 11 feet (3353 mm).		
	<b>1224.4.4.1.5.3 Special design elements.</b> Seclusion rooms shall be designed and constructed in compliance with the following requirements:		
	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).		

	<ol> <li>Doors.</li> <li>Door hardware shall be ligature resistant.</li> <li>Door hardware shall be ligature resistant.</li> <li>The entrance door to the seclusion room shall swing outward.</li> <li>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.</li> </ol>
	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.
1228.4.4	1.1.5 Quiet room.
	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 <sup>2</sup> ).
<b>1228.4.4</b> 1224.4.4	<b>1.2 Administrative center(s) or nurse station(s).</b> Refer to Section 1.2.
	<b>1224.4.4.2 Nurse station(s).</b> 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	4.3 Specimen and blood collection facilities.
	Where provided, refer to Section 1224.4.4.3.
1228.4.4	4.4 Medication station. Refer to Section 1224.4.4.4.
	<b>1224.4.4 Medication station.</b> Provision shall be made for distribution of medications. This shall be done from a medication preparation room or from a self-contained dispensing unit.
	<b>1224.4.4.1 Medication preparation room.</b> 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:
	1. Work counter.
	2. Handwashing station.
	3. Refrigerator.

Locked storage for controlled drugs
<b>224.4.4.2 Self-contained medication dispensing unit</b> . If provided, a elf-contained medicine dispensing unit shall be located at the nurses' ation, in the clean utility room, or in an area where access to the self- ontained medication dispensing unit is under the monitoring and control of ursing staff. Self-contained medication dispensing units shall be provided ith essential power and lighting.
Nourishment area or room. Refer to Section 1224.4.4.5.
<b>224.4.4.5 Nourishment area or room.</b> Nourishment areas or rooms equired in patient care areas shall include the following:
Sink
Work counter
Refrigerator
Storage cabinets
Equipment for hot and cold nourishment between scheduled meals.
The nourishment shall include space for trays and dishes used for onscheduled meal service.
Provisions and space shall be included for separate temporary storage of nused and soiled dietary trays not picked up at mealtime.
Handwashing stations separate from the nourishment sink shall be in the purishment area or immediately accessible without passing through a door.
Clean utility/work room. Refer to Section 1224.4.4.6.
<b>224.4.4.6 Clean utility/workroom.</b> The clean workroom or clean supply oom shall be separate from and have no connection with the soiled orkroom or soiled holding room. If the room is used for preparing patient are items, it shall contain the following:
Work counter
Handwashing station
Storage facilities for clean and sterile supplies
<b>224.4.4.6.1 Clean supply room.</b> If the room is used only for storage and olding as part of a system for distribution of clean and sterile materials, the ork counter or a handwashing station may be omitted.

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1228.4	<b>1.4.7 Soiled utility/work room.</b> Refer to Section 1224.4.4.7.
	<b>1224.4.4.7 Soiled utility/workroom.</b> 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:
	1. Clinical sink (or equivalent flushing-rim fixture).
	2. Handwashing station
	3. Work counter
	4. Space for separate covered containers for soiled linen and/or waste
	<b>1224.4.4.7.1 Soiled holding room.</b> 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	4.5 Outpatient waiting rooms.
	Where provided, refer to Section 1224.4.5.
	<b>1224.4.5 Outpatient waiting rooms.</b> 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.
	<b>1224.4.5.1 Outpatient access.</b> Outpatient access to services shall not traverse a nursing unit.
1228.4	4.6 Miscellaneous requirements. Refer to Section 1224.4.6
	1224.4.6 Miscellaneous requirements.
	<b>1224.4.6.1 Station outlets.</b> Station outlets for oxygen, vacuum, and medical air shall comply with Table 1224.4.6.1.
	<b>1224.4.6.2 Gas and vacuum systems.</b> The design, installation and testing o medical gas and vacuum systems shall conform to Table 1224.4.6.1 and NFPA 99.
	<b>1224.4.6.3 Hyperbaric facilities.</b> The design and construction of hyperbaric facilities shall conform to NFPA 99; Health Care Facilities and Section 1224.39.5.
	<b>1224.4.6.4 Laboratories.</b> The design and construction of hospital laboratories shall conform to NFPA 99.
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	<b>1224.4.6.5 Nurse call systems.</b> 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.
	1224.4.7 Corridors.
	<b>1224.4.7.1 Width.</b> The minimum width of corridors and hallways shall be 8 feet (2438 mm). <b>Exception:</b> 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.
	<b>1224.4.7.2 Light traffic.</b> 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. <b>Exception:</b> Corridors and hallways in administrative and business areas may be reduced to a width of 44 inches (1118 mm).
	<b>1224.4.7.3 Outpatient services.</b> 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).
	<b>1224.4.7.4 Handrails.</b> 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.
	Refer to Section 1224.4.8 with the following modifications and amendments:
	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.
	2. Use of door closers is to be avoided unless required by other sections of this code.

	3. Door hinges shall be designed to minimize accessible anchor points (e.g., cut hinge type, piano hinge, concealed hinge, etc.).
	<i>4.</i> Except for specifically designed ligature-resistant hardware, door lever handles shall point downward when in the latched and in the unlatched position. <i>(4)</i>
	5. All hardware shall have tamper-resistant fasteners.
	6. Soft doors may be used for patient room toilets where indicated in the Patient Safety Risk Assessment.
1228.4.9	Windows and screens.
	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.
	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. <b>Exception:</b> Use of tempered glass for interior borrowed lights shall be permitted where allowed by the Patient Safety Risk Assessment.
	1.2. Where window treatments are provided, they shall be designed without accessible anchor points.
	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.
	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.
	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.
1228.4.1	<b>10 Ceiling heights.</b> Refer to Section 1224.4.10 unless noted otherwise.
	1224.4.10 Ceiling heights.
	<b>1224.4.10.1 Minimum height.</b> The minimum height of ceilings shall be 8 feet (2438 mm). <b>Exception:</b> 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).
	<b>1224.4.10.2 Minimum height with fixed ceiling equipment.</b> 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. <b>Exception:</b> 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.
1228.4.1	11 Interior finishes.
	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.
1228.4.1	11.4 Ceilings.
	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.
	1. In these rooms, the ceiling shall be secured from patient access.
	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.
1228.4.1	12 Courts. Refer to Section 1224.4.12.
	<b>1224.4.12 Courts.</b> 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.
1228.4.1	13 Elevators. Refer to Section 1224.4.13
	1224.4.13 Elevators.
	<b>1224.4.13.1 Patient.</b> 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).
	<b>1224.4.13.2 Passenger.</b> Passenger elevators shall have minimum inside platform dimensions of 4 feet 8 inches by 7 feet 4 inches (1422 mm by 2236 mm).
	<b>1224.4.13.3 Patient services.</b> 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.

	<b>1224.4.13.4 Low patient capacity.</b> 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.
	<b>1224.4.13.5 Medium patient capacity.</b> 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.
	<b>1224.4.13.6 High patient capacity</b> . 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.
1228.4.1	14 Garbage, solid waste and trash storage. Refer to Section 1224.4.14.
	<b>1224.4.14 Garbage, solid waste and trash storage.</b> 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:
	1. A concrete floor with a curb and with a drain connected to the sewer.
	2. Steam or hot-water and cold-water supply.
	3. A minimum floor area of 1/2 square foot (0.046 m2) per bed, but not less than 25 square feet (2.3 m2), the least dimension of which shall be 4 feet (1219 mm).
	4. A method of limiting access to the material except by authorized persons.
1228.4.1	<b>15 Housekeeping room.</b> Refer to Section 1224.4.15.
	<b>1224.4.15 Housekeeping room.</b> This room shall be a minimum floor area of 15 square feet (1.4 m2). It shall contain a service sink or floor receptor and provisions for storage of supplies and housekeeping equipment.
1228.4.1	16 Laundry and trash chutes. Refer to Section 1224.4.16.
	<b>1224.4.16 Laundry and trash chutes.</b> 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.
1228.4.1	<b>17 Telephones.</b> Refer to Section 1224.4.17.
	<b>1224.4.17 Telephone.</b> Each floor accommodating patients shall have a telephone installed for patient use. Such telephones shall be readily accessible to patients who are limited to wheelchairs and stretchers. This may not be required in separate buildings having six or fewer beds which are restricted to occupancy by ambulatory patients.
1228.4.1	18 Grab bars.

	Refer to Section 1224.4.18 with the following modifications and amendments:	
	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).	
	2. Grab bars shall be graspable and shall be ligature resistant.	
1228.4.1	19 Noise control. Refer to Section 1224.4.19.	
	1224.4.19 Noise control.	
	<b>1224.19.1 Impact noises.</b> 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	
	<b>1224.19.2 Noise reduction.</b> 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.		
	Built-in furnishings in areas accessible to patients shall comply with the following requirements:	
	1. Built-in furnishings with doors or drawers shall not be provided.	
	2. Open shelves shall be fixed with tamper-resistant hardware.	
	3. When provided, clothing rods or hooks shall be ligature resistant.	
	4. The following are not permitted:	
	4.1. Towel bars.	
	4.2. Shower curtain rods.	
	4.3. Lever handles, except where a specifically designed ligature-resistant lever handle is used.	
1228.4.21 Building systems.		
1228.4.2	1228.4.21.1 Lighting.	
	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.	

1228.4.2	1228.4.21.2 Receptacles.		
	When electrical receptacles are provided in a patient bedroom, the receptacles shall be in compliance with California Electrical Code.		
1228.4.2	2 Handwashing stations.		
	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		
	<b>1224.5 Communications Systems.</b> Technology and medical communication rooms shall comply with the California Electrical Code, California Mechanical Code, California Plumbing Code and the requirements of this section.		
	<b>1224.5.1 Telecommunications service entrance room.</b> 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.		
	1224.5.2 Technology equipment center.		
	<b>1224.5.2.1 Number.</b> 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.		
	<b>1224.5.2.2 Size.</b> The technology equipment center shall be sized to provide space to meet the service requirements for the required equipment.		
	<b>1224.5.2.3 Location.</b> 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.		
	1224.5.3 Technology distribution room.		
	<b>1224.5.3.1 Number.</b> There shall be a minimum of one technology distribution room on each floor of the facility. <b>Exception:</b> For existing facilities not undergoing major renovation, a technology distribution room may serve adjacent floors.		

	1224.5.3.2 Size.
	<ol> <li>Technology distribution rooms shall be sized based on the area of the floor being served, with minimum clear dimensions as follows:         <ul> <li>Area Served in</li> <li>Minimum Technology</li> <li>Square Feet (m<sup>2</sup>)</li> <li>Distribution Room Size</li> <li>≤ 8,000 square feet</li> <li>(740 m<sup>2</sup>)</li> <li>(3.05 m by 3.05 m)</li> <li>8,001 – 15,000 square feet</li> <li>(1400 m<sup>2</sup>)</li> <li>(3.05 m by 3.66 m)</li> <li>15,001 – 25,000 square feet</li> <li>(3.05 m by 4.27 m)</li> </ul> </li> <li>&gt; 25,000 square feet</li> <li>(2325 <sup>2</sup>)</li> <li>(3.66 m by 4.27 m)</li> <li>Where ceilings are provided, the minimum clear height shall be 9 feet</li> <li>(2.75 m). Exception: Existing buildings shall be permitted to have a minimum clear height of 8 feet (2.44 m).</li> </ol>
	<b>1224.5.3.3 Location</b> . Technology distribution rooms shall be provided throughout the facility as necessary to meet the maximum cable distance requirement for the cabling system specified.
	<b>1224.5.4 SPC/NPC compliance.</b> 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.
	<b>1224.5.5 Access.</b> Access to the spaces required by this section shall be controlled and not require passage through patient-care or sterile space.
	<b>1224.5.6 Combining spaces.</b> 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.
	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.
	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.

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	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.
1228.13	.1.2 Outdoor activity area.
	An outdoor activity area shall be provided. Outdoor areas shall meet the following requirements:
	1. Fences and walls shall be designed to:
	1.1. Be installed with tamper-resistant hardware.
	1.2. Have a minimum height of 10 feet (3048 mm) above the outdoor area elevation.
	1.3. Be anchored and constructed to withstand the body force of a 350-pound (158-kg) person.
	2. If provided, gates or doors in the fence or wall shall:
	2.1. Swing away from the outdoor activity area.
	2.2. Have the hinge installed on the outside of the outdoor activity area.
	2.3. Be provided with a locking mechanism that has been coordinated with egress requirements of Section 1004.5, Outdoor areas.
	3. Lights shall not be accessible to patients. Lighting in the outdoor activity area shall not be pole mounted.
	4. If provided, security cameras shall not be accessible to patients and cameras shall view the entire outdoor activity area.
	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.
1228.13	.1.3 General support areas.
	1. Space for staff conferences, patient evaluation and progress reports.
	1.1. Staff conference room. A conference and treatment planning room shall be provided.
	1.2. Office space separate from the activities area.
	2. Where outpatients are treated, there shall be a waiting area compliant with the requirements of Section 1228.4.5.
1228.13	.2 Physical therapy service space.
	Where provided, the physical therapy service space shall comply with Section 1224.35.2.

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1228.13	2.3 Occupational therapy service space.		
	Where provided, the occupational therapy service space shall comply with Section 1224.35.3, items 1, 2 and 3.		
1228.13	2.4 Speech pathology and/or audiology service space.		
	Where provided, the speech pathology service space shall comply with Section 1224.35.4.		
1228.14	PSYCHIATRIC NURSING SERVICE SPACE.		
	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.		
1228.14	1228.14.1 Patient rooms.		
	Each patient bedroom shall meet the following standards:		
1228.14	.1.1 Capacity.		
	Maximum room capacity shall be two patients. <b>Exception:</b> 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.		
1228.14	1.2 Space requirements.		
	Patient bedrooms shall have a minimum clear floor area of 110 square feet (10.2 m <sup>2</sup> ) for single-bed rooms and 80 square feet (7.43 m <sup>2</sup> ) per bed for multiple-bed rooms.		
1228.14	.1.3 Windows.		
	Each patient bedroom shall have a window in accordance with Section 1228.4.9.		
1228.14	<b>.1.5 Outside exposure.</b> Refer to Section 1224.14.1.5.		
	<b>1224.14.1.5 Outside exposure.</b> All patient bedrooms shall have an outside exposure and shall not be below ground level.		

1228.14	I.1.6 Handwashing stations.	
	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.	
1228.14	1.1.7 Patient toilet room.	
	1. Each patient shall have access to a toilet room without having to enter a corridor. <b>Exception:</b> 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.	
	2. One toilet room shall serve no more than two patient bedrooms and no more than four patients.	
	3. The toilet room shall contain a toilet and a handwashing station.	
1228.14	1228.14.1.8 Patient storage.	
	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	l.1.9 Privacy.	
	Visual privacy in multibed rooms (e.g., cubicle curtains) is not required in psychiatric nursing units.	
1228.14	l.1.10 Grab bars.	
	Grab bars provided in accessible patient toilet rooms shall comply with Section 1228.4.18.	
1228.14	1.1.11 Room identification.	
	Each patient room shall be labeled with an identification number, letter or combination of the two.	
1228.14	1.2 Service areas.	
	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.	
<b>1228.14</b> 1224.4.4	<b>1.2.1 Administrative center(s) or nurse station(s).</b> Refer to Section 4.2.	

have space for counters and n shall be located in or directly	
nbined with or include centers for	
coustic and patient file privacy	
of handwashing station. tient-risk areas shall be ligature	
1228.14.2.3 Support areas for staff.	
may be combined between	
or cabinet compartments for the immediately accessible to the	
f, patients, patients' families for , training sessions, and cessible to each nursing unit. c nursing units.	
ection 1228.4.4.1.1	
ion 1228.4.4.1.2	

1228.14.2.8 Medication station.		
	Refer to Section 1228.4.4.4.	
1228.14	1.2.9 Clean linen storage.	
	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	1.2.10 Nourishment area.	
	Refer to Section 1228.4.4.5.	
1228.14	1.2.11 Ice-making equipment.	
	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	1.2.12 Equipment and supply storage.	
	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 <sup>2</sup> ). Location of the storage areas shall not present a risk to the patient population as indicated in the functional program.	
1228.14	1.2.14 Patient bathing facilities.	
	A bathtub or shower shall be provided for each six patient beds not otherwise served by bathing facilities at patient bedrooms.	
1228.14	1.2.15 Common patient toilet room(s).	
	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.	
1228.14	1.2.16 Emergency equipment storage.	
	Emergency equipment storage shall be provided at each nursing unit that is under visual observation of staff.	
1228.14	1.2.17 Housekeeping room.	
	One housekeeping room shall be permitted to serve more than one nursing unit on a floor. Refer to Section 1228.4.15.	
1228.14	1228.14.2.18 Grab bars.	
	Grab bars in common patient toilets and bathing facilities shall be installed in accordance with Section 1228.4.18.	
SPECIA	AL PATIENT CARE ROOMS	

1228.1	1228.14.3 Airborne Infection Isolation (All) room(s).	
	There shall be at least one airborne infection isolation (AII) 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.	
	1224.14.3 Airborne infection isolation rooms.	
	<ul> <li>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. Exceptions:</li> <li>1. Acute psychiatric hospitals shall provide airborne infection isolation rooms at the ratio of one room for each 50 beds, or major fraction thereof.</li> <li>2. Airborne infection isolation rooms are not required for chemical dependency recovery services.</li> </ul>	
	<b>1224.14.3.2 Anteroom doors.</b> Airborne infection isolation room(s) shall have self-closing and latching devices on all anteroom doors.	
	<b>1224.14.3.3 Anteroom.</b> 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 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.	
	<b>1224.14.3.4 Secondary entry.</b> 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.	

	<b>1224.14.3.5 Sealed-tight room.</b> 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.	
	<b>1224.14.3.6 Adjoining toilet room.</b> 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.	
1228.1	4.4 Protective environment room(s).	
	<i>If provided, refer to Section 1224.14.4 and the general construction requirements of Section 1228.4.</i>	
1228.1	4.5 Seclusion room(s).	
	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.	
1228.1	4.6 Quiet room.	
	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.	
1228.1	4.7 Visitor/consultation room(s).	
	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:	
	1. Visitor/consultation room(s) shall have a minimum clear floor area of 100 square feet (9.29 $m^2$ ).	
	2. The room(s) shall be designed for acoustical and visual privacy. Refer to Table 1224.4.19, Sound Transmission Limitations in Hospitals.	
1228.1	4.8 Conference room.	
	A conference and treatment planning room shall be provided for use by the psychiatric nursing unit.	
1228.1	1228.14.9 Space for group therapy.	
	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.	
<i>Pharmaceutical service space shall comply with the provisions of Section 1224.19.</i>	
1224.19 PHARMACEUTICAL SERVICE SPACE	
<b>1224.19.1 General.</b> 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.	
<ul> <li>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.</li> <li>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 Section 1751, Article 7, Division 17, Title 16, California Code of Regulations as enforced by the California Board of Pharmacy.</li> </ul>	
<b>1224.19.1.2 Less than 100-bed exemption.</b> 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.	
<b>1224.19.1.2.1 Drug room.</b> 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:	
<b>1224.19.1.2.1.1.</b> A room or area for receiving, breakout, and inventory control of drugs used in the hospital.	
<b>1224.19.1.2.1.2</b> . Cleanable work counters and space for automated and/or manual dispensing activities.	
<b>1224.19.1.2.1.3.</b> Reserved.	
1224.19.1.2.1.4. An area for reviewing and recording.	
<b>1224.19.1.2.1.5</b> . An area for storage, exchange, and restocking of carts.	

<b>1224.19.1.2.1.6.</b> Security provisions for drugs and personnel in the dispensing counter area.
<b>1224.19.1.2.2 Handwashing station.</b> 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.
<b>1224.19.1.2.3 Storage.</b> Cabinets, shelves, and/or separate rooms or closets shall be provided for the following:
<b>1224.19.1.2.3.1.</b> Bulk storage.
1224.19.1.2.3.2. Active storage.
1224.19.1.2.3.3. Refrigerated storage.
<b>1224.19.1.2.3.4.</b> Storage for volatile fluids and alcohol in accordance with applicable fire safety codes for the substances involved.
<b>1224.19.1.2.3.5.</b> Secured lockable storage for controlled drugs.
<b>1224.19.1.2.3.6.</b> Equipment and supply storage for general supplies and equipment not in use.
1224.19.2 Pharmacy areas.
<b>1224.19.2.1 Dispensing facilities.</b> Hospital pharmacies shall provide the following areas for patient-specific compounding and dose repackaging of non-sterile preparations.
<b>1224.19.2.1.1 Receiving.</b> A room or area for receiving, breakout and inventory control of materials used in the pharmacy.
<b>1224.19.2.1.1.1 Size.</b> A minimum of 120 square feet (11.15 m <sup>2</sup> ) shall be provided.
<b>1224.19.2.1.2 Dispensing.</b> 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.
<b>1224.19.2.1.3 Non-sterile compounding areas.</b> An extemporaneous compounding/dose repackaging area shall be located next to bulk storage and include the following:
<b>1224.19.2.1.3.1 Size.</b> Work stations shall have sufficient counter space for drug preparation, with a minimum area of 120 square feet (11.15m <sup>2</sup> ) per station.
<b>1224.19.2.1.3.2 Handwashing station.</b> 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.
<b>1224.19.2.1.3.3 Utility sink.</b> A utility sink shall be provided.
<b>1224.19.2.1.3.4.</b> If carousel or analogous robotic technologies are used, the area shall respond to the special system requirements.
<b>1224.19.2.1.4 Recording.</b> An area for reviewing and recording shall be provided. The area shall include counter space and electronic workstation(s).
<b>1224.19.2.1.5 Temporary storage.</b> An area for temporary storage, exchange, and restocking of carts.
<b>1224.19.2.1.6 Security.</b> Security provisions shall be provided for drugs and personnel in the dispensing counter area.
<b>1224.19.2.3 Storage.</b> The following storage facilities shall be provided in the pharmaceutical service area.
<b>1224.19.2.3.1 Bulk storage.</b> A separate bulk storage area, or room, may be provided.
<b>1224.19.2.3.2 Active storage.</b> Active storage in support of repackaging and dispensing activities shall be provided.
<b>1224.19.2.3.3 Refrigerated storage.</b> Refrigeration/freezer area shall be provided.
<b>1224.19.2.3.4 Hazardous materials.</b> Storage for volatile fluids and alcohol shall comply with Section 307.
<b>1224.19.2.3.5 Secured storage.</b> Secured lockable storage shall be provided for narcotics and controlled drugs.
<b>1224.19.2.3.6 Equipment and supplies.</b> Equipment and supply storage for general supplies and equipment not in use.
Sterile compounding areas. If provided, refer to 1224.19.3.
<b>1224.19.4 – 1224.19.5.</b> Reserved.
1224.19.6 Support areas for the pharmacy.
1224.19.6.1 Access to information.
<b>1224.19.6.1.1 Patient information.</b> Provisions shall be made for cross-checking medication and drug profiles of individual patients.

	<b>1224.19.6.1.2 Pharmacological information.</b> Provisions shall be made for access to poison control, reaction data, and drug information.		
	<b>1224.19.6.2 Office.</b> A separate room shall be provided for the Chief Pharmacist's office.		
	<b>1224.19.6.3 Education and training.</b> A multipurpose room shared with other departments shall be permitted to serve this purpose.		
	<b>1224.19.6.4 Outpatient medication consultation.</b> If medication is dispensed to outpatients from the hospital pharmacy, an area for consultation and patient education shall be provided.		
	<b>1224.19.6.5 Additional equipment and supply storage.</b> 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.		
	<b>1224.19.7.1 Lounge, locker and toilet facilities.</b> Provide pharmacy staff lounge, toilet rooms and lockers that are readily accessible.		
1228.20	1228.20 DIETETIC SERVICE SPACE.		
	Refer to Section 1224.20, Dietetic Service Space for requirements, as modified below:		
1228.20	.1 Dining area.		
	Provide dining space(s) for ambulatory patients, staff, and visitors. Provide patient dining room(s) of 20 square feet (1.86 m <sup>2</sup> ) per patient bed separate from staff dining. These spaces shall be separate from the food preparation and distribution areas.		
SUPPO	RT SERVICES		
1228.21	ADMINISTRATIVE SPACE. Refer to Section 1224.21.		
	1224.21 ADMINISTRATIVE SPACE.		
	<b>1224.21.1 Administration.</b> An administration area shall be provided which shall provide for the following functions:		
	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.		
	2. Offices for administrator and admitting.		
	<b>1224.21.2 Records.</b> Hospitals shall provide a health record service which shall accommodate the following functions:		
	1. Work area for sorting and recording records for either paper or electronic		

	2. Storage area for records for either paper or electronic media.	
1228.22	<b>1228.22 CENTRAL STERILE SUPPLY.</b> If provided, refer to Section 1224.22.	
	<b>1224.22.1 Minimum requirements</b> . A central supply and sterilizing area shall be provided. Rooms and spaces shall accommodate the following services and equipment:	
	1. <b>Soiled work area.</b> 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.	
	2. <b>Clean work area.</b> A clean work area which shall contain work space and equipment for sterilizing medical and surgical equipment and supplies.	
	3. Sterilizing space.	
	<b>1224.22.2</b> 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. <b>Exception:</b> Small instrument sterilizers.	
1228.23	STORAGE.	
1228.23.1 General Storage.		
	Psychiatric hospitals shall provide general storage space of at least 10 square feet (0.93 m <sup>2</sup> ) 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.	
	<b>1228.23.2.1 Linen.</b> 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.	
	<b>1228.23.2.2 Supply.</b> One supply storage space having a minimum area of 15 square feet (1.39 m <sup>2</sup> ) 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.	
	<b>1228.23.2.3 Wheelchairs.</b> 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 <sup>2</sup> ).	
	<b>1228.23.2.4</b> Sterile and unsterile supplies shall be stored separately.	
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	<b>1228.23.2.5</b> Food storage shall be as described in Section 1224.20.		
1228.23	3.3 Patient storage facilities.		
	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.		
	<b>1228.24.1</b> Acute care Psychiatric Hospitals with a licensed bed capacity of 50 to 199 shall provide a morgue with autopsy facilities. <b>Exception:</b> This may not be required if it can be demonstrated to the licensing agency that morgue and autopsy facilities are available locally.		
	<b>1228.24.2</b> Acute care Psychiatric Hospitals with a licensed bed capacity of 200 or more shall provide a morgue with autopsy facilities.		
	1228.24.3 Minimum requirements. Refer to Section 1224.24.3.		
	<b>1228.25 EMPLOYEE DRESSING ROOMS AND LOCKERS.</b> Refer to Section 1224.25.		
	1224.25 EMPLOYEE DRESSING ROOMS AND LOCKERS.		
	<b>1224.25.1 Minimum facilities.</b> Hospitals shall provide the following:		
	1. Separate dressing rooms for male and female personnel with lockers, lavatory and toilet.		
	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.		
	<b>1224.26 HOUSEKEEPING ROOMS.</b> 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.		
	1224.27 LAUNDRY.		
	<b>1224.27.1</b> If a laundry is to be provided, the following is required in addition to the laundry room:		
	1. A separate soiled linen receiving, holding and sorting room with handwashing fixture.		
	2. A separate clean linen storage, issuing and holding room.		
	3. Storage for laundry supplies.		
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<ul> <li><b>1224.27.2 Outside service.</b> If linen is processed off site, the following shall be provided within the hospital:</li> <li>1. Soiled linen holding room.</li> </ul>	
2. Clean linen receiving room.	
3. Clean linen storage room.	
MENTAL SERVICES as provided	
1228.28 ELECTROCONVULSIVE THERAPY SERVICE SPACE.	
If electroconvulsive therapy (ECT) is provided in the facility, the requirements in Section 1224.28.6 shall be met.	
<b>1224.28.6 Electroconvulsive Therapy.</b> 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.	
<b>1224.28.6.1 General.</b> The ECT procedure area may be a single procedure room or a suite of procedure rooms.	
<ul> <li>1224.28.6.2 ECT procedure room.</li> <li>1. Space requirements. Each ECT procedure room shall have a minimum clear floor area of 200 square feet (18.6 m<sup>2</sup>) with a minimum clear dimension of 14 feet (4267 mm).</li> <li>2. Handwashing station. A handwashing station shall be provided.</li> <li>3. Documentation area. Accommodation for written or electronic documentation shall be provided.</li> </ul>	
<b>1224.28.6.3 Pre-procedure and recovery area.</b> 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.	
<b>1224.28.6.4 Emergency equipment storage.</b> 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.	

	<b>1224.28.6.5 Patient support areas.</b> 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).
1228.3	0 PEDIATRIC AND ADOLESCENT PSYCHIATRIC SERVICE SPACE.
	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:
1228.3	0.1 Patient bedroom.
1228.3	0.1.1 Capacity.
	Maximum bedroom capacity shall be four patients.
1228.3	0.1.2 Space requirements.
	Patient bedroom areas (with beds or cribs) shall meet the following requirements:
	1. For single-bed rooms, a minimum clear floor area of 110 square feet (9.29 $m^2$ ).
	2. For multiple-bed rooms, a minimum clear floor area of 80 square feet (7.43 $m^2$ ) per bed and 60 square feet (5.57 $m^2$ ) minimum clear floor area per crib.
1228.3	0.2 Patient toilet room.
	1. Each patient shall have access to a toilet room, either from the patient room or from the corridor outside the patient room.
	2. Where access is provided via a corridor, the following requirements shall be met:
	2.1. The toilet room shall be located in the nursing unit.
	2.2. The toilet room shall be located no more than 150 feet (45.72 m) from the bedroom.
1228.3	0.3 Activity areas.
	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.
1228.3	0.3.1 Space requirements.

Page | B-28

	1. The combined area for activity space shall have 35 square feet (3.25 m2) of clear floor area per patient bed.
	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.
1228.30	.3.2 Outdoor areas.
	Pediatric and adolescent outdoor areas shall be separate from adult outdoor areas. Refer to Section 1228.13.1.2.
1228.30	.4 Support areas for the pediatric and adolescent psychiatric unit.
	Storage space shall be provided for toys, equipment, extra cribs and beds, and cots or recliners for parents who may stay overnight.
1228.30	.5 Education.
	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.
1228.31	FORENSIC PSYCHIATRIC UNIT.
	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:
1228.31	.1 Sally port.
	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.
1228.31	.2 Pediatrics and adolescents.
	Forensic unit areas for pediatrics and adolescents shall be separated from adult areas. Refer to Section 1228.30.
1228.31	.3 Space requirements.
	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.
1228.38	INTERMEDIATE-CARE SERVICE SPACE.
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	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.	
1228.39	OUTPATIENT SERVICE SPACE.	
	Where provided, outpatient service space shall comply with the applicable requirements of Section 1224.39 and the general construction provisions of Section 1228.4.	
	<b>1224.39.1 Waiting area(s).</b> Provide with access to public toilet room facilities, a public telephone and a drinking fountain. These facilities may be shared with other services.	
	<b>1226.12 PSYCHOLOGY CLINICS.</b> 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. Psychology clinics shall provide at least an interview room, consulting room and group therapy room.	
	1226.12.1 Public and administrative area.	
	1226.12.1.1 Public area.	
	1226.12.1.1.1 Reception. Refer to Section 1226.4.16.1.1.	
	1226.12.1.1.3 Public toilet(s). Refer to Section 1224.4.5.	
	1226.12.1.1.4 Drinking fountain. Refer to Section 1224.4.5.	
	1226.12.1.1.5 Public telephone. Refer to Section 1224.4.5.	
	1226.12.1.2 Administrative Area.	
	1226.12.1.2.1 Medical Records storage. Refer to Section 1226.4.16.2.1.	
	<b>1226.12.1.2.2 Equipment and supply storage</b> . Refer to Section 1226.4.16.2.2.	
1228.40	1228.40 SKILLED NURSING SERVICE SPACE.	
	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.	
1228.42 CLINICAL LABORATORY SERVICE SPACE.		
	Where provided, clinical laboratory service space shall comply with the requirements of Section 1224.17, Clinical Laboratory Service Space.	

## 1228.43 RADIOLOGICAL SERVICE SPACE.

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.

#### Footnotes:

- (1) <u>Designer Tip</u>: Observation of the seclusion room is also acceptable from a distributed nurse station or work station located within the anteroom or vestibule itself.
- (2) 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 selfharm or harm to others.

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### APPENDIX C 1224.31 [OSHPD 1] PSYCHIATRIC NURSING UNIT (MEDICAL) CHECKLIST Compliance Guide for CBSC Requirements

Facility	Name:		
OSHPD Project Number:			
Facility Number:			
Date:			
1224.31	PSYCHIATRIC NURSING UNIT.		
1224.31	.1 Psychiatric unit space.		
	A psychiatric unit shall be housed in a separate and distinct nursing unit.		
1224.31	.1.1 General.		
	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.		
	Windows modified to prevent patients from leaving the unit.		
1224.31	.1.3 Access control.		
	Entrances and exits which may be locked if necessary.		
1224.31	.1.4 Seclusion room(s).		
	Seclusion rooms shall be provided and comply with Section 1224.4.4.1.4.		
	<b>1224.4.4.1.4 Seclusion room.</b> Where provided, seclusion rooms shall comply with the following requirements:		
	1224.4.4.1.4.1 General.		
	1. Capacity. Each room shall accommodate only one patient.		
	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).			
	3. The room(s) shall be located to permit observation from the nurse station.			
	4. Seclusion rooms shall be permitted to be grouped together and may share a common vestibule/anteroom.			
	<b>1224.4.4.1.4.2 Space requirements.</b> 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). <b>Exception:</b> 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).			
	<ul> <li>1224.4.4.1.4.3 Special design elements. Seclusion rooms shall be designed and constructed in compliance with the following requirements:</li> <li>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.</li> <li>2. Minimum ceiling height shall be 9 feet (2743 mm).</li> <li>3. Doors.</li> <li>3.1. Door hardware shall be ligature resistant.</li> <li>3.2. The entrance door to the seclusion room shall swing outward.</li> <li>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.</li> <li>4. Seclusion rooms shall not contain outside corners or edges.</li> <li>5. All items in the room (e.g., lighting fixtures, sprinkler heads, HVAC grilles, and surveillance cameras, etc.) shall be tamper resistant.</li> <li>6. Electrical switches and receptacles are prohibited in the seclusion room.</li> </ul>			
1224.31	I.1.5 Consultation room(s).			
	Used for interviewing patients.			
1224.31	I.1.6 Dining and recreation.			
	Provide spaces for dining and recreation. The total area for these purposes shall be not less than 30 square feet (2.8 m <sup>2</sup> ) per patient.			
1224.31	I.1.7 Storage.			
	Storage closets or cabinets for recreational and occupation therapy equipment.			
1224.31	1224.31.1.8 Exam or treatment room.			

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	A room for physical examinations and medical treatment.		
1224.31.1.9 Activity spaces.			
	Indoor and outdoor space for therapeutic activities.		
1224.3 <sup>,</sup>	I.1.10 Occupational therapy.		
	Facilities for occupational therapy shall comply with Section 1224.35.3, items 1, 2, and 3.		
1224.3 <sup>,</sup>	1224.31.1.11 Recreation.		
	A recreation room with a minimum of 100 square feet (9.3 m <sup>2</sup> ) in each building, and on each floor of a building accommodating six or more psychiatric patients.		
1224.3 <sup>4</sup>	I.1.12 Nurse call.		
	Refer to Section 1224.4.6.5. [Refer also to CEC Section 517.18]		
1224.3 <sup>4</sup>	I.1.13 Privacy.		
	Visual privacy in multibed rooms (e.g., cubicle curtains) is not required.		
1224.3 <sup>4</sup>	1224.31.1.14 Tamper resistant.		
	The ceiling and the air distribution devices, lighting fixtures, sprinkler heads, and other appurtenances shall be of a tamper-resistant type.		
1224.3 <sup>,</sup>	I.1.15 Toilet rooms.		
	Each patient room shall be provided with a private toilet room that meets the following requirements:		
	<ol> <li>The door shall not be lockable from within.</li> <li>The door shall be capable of swinging outward.</li> <li>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.</li> </ol>		
1224.3 <sup>4</sup>	I.1.16 Handwashing stations.		
	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).

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.

	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.		
	The standards noted in Section 1224.14.2 shall apply to service areas for	

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 CHECKLIST Compliance Guide for CBSC Requirements

Facility	Name:		
OSHPD	Project Number:		
Facility Number:			
Date:			
1225.6.6 SPECIAL TREATMENT PROGRAM SERVICE.			
	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.		
1225.6.6.1 Location.			
	A special treatment program service shall be located in a distinct separate unit.		
1225.6.6.2 Nursing service.			
	Nursing service space shall comply with Section 1225.4.1.		
1225.6.6.3 Activity program.			
	Provide a minimum of 25 square feet of dining and recreation space per bed.		
1225.6.6.4 Indoor and outdoor space.			
	Indoor and outdoor space shall be designated for the special treatment program.		

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# **REVISION HISTORY**

- Version 1.3 August 2024 Structural requirements, Basic and Supplemental Services, and MEP Requirements are updated in Section 4.
- Version 1.2 January 2023 Second Revision
- Version 1.1 September 2022 First Revision
- Version 1.0 June 2021 First Issued