Chapter 93. Hospitals

Subchapter A. General Provisions

§9301. Purpose

- A. The purpose of the hospital laws and standards is to provide for the development, establishment and enforcement of standards for the care of individuals in hospitals and for the construction, maintenance and operation of hospitals which shall promote safe and adequate treatment of individuals in hospitals.
- 1. Except as otherwise provided herein, hospitals shall provide directly or under arrangements the following professional departments, services, facilities and functions:
 - a. organization and general services:
 - b. nursing services;
 - c. pharmaceutical services;
 - d. radiological services;
 - e. laboratory services;
 - f. food and dietetic services;
 - g. medical record services;
 - h. quality assessment and improvement;
 - i. physical environment;
 - j. infection control;
 - k. respiratory care services.
- 2. Except as otherwise provided herein, hospitals may provide the following optional services directly or under arrangements:
 - a. surgical services;
 - b. anesthesia services;
 - c. nuclear medicine services;
 - d. outpatient services;
 - e. rehabilitation services;
 - f. psychiatric services;
 - g. obstetrical and newborn services;
 - h. pediatric services;
 - i. emergency services.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2100-2115.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Office of the Secretary, LR 13:246 (April 1987), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 21:177 (February 1995), LR 29:2399 (November 2003).

§9303. Definitions

A. The following definitions of selected terminology are used in connection with Chapter 93.

Accredited—the approval by the Joint Commission on Accreditation of Healthcare Organizations, American Osteopathic Association, or Det Norske Veritas.

Administrator—(see Chief Executive Officer).

Anesthesiologist—a physician, dentist, or osteopath physician, who has successfully completed an approved residency program in anesthesiology, or who is a diplomat of either the American Board of Anesthesiology or the American Osteopathic Board of Anesthesiology, or who was made a Fellow of the American College of Anesthesiology before 1972.

Approved—acceptable to the authority having jurisdiction.

Authority Having Jurisdiction—an organization, office, or individual responsible for approving equipment, an installation, or a procedure.

Certified Nurse Midwife—an advanced practice registered nurse as defined by R.S. 37:913.

Certified Registered Nurse Anesthetist—an advanced practice registered nurse as defined by R.S. 37:913.

Cessation of Business—when a hospital stops providing services to the community.

Chief Executive Officer (CEO)/Administrator—the person responsible for the operation of the hospital commensurate with the authority conferred by the governing body.

Clinical Nurse Specialist—an advanced practice registered nurse as defined by R.S. 37:913.

Crisis Receiving Center—a specialty unit of a hospital that shall receive, examine, triage, refer or treat an individual who is experiencing a behavioral health crisis.

Department—Louisiana Department of Health and Hospitals.

Governing Body—the board of trustees, owner or person(s) designated by the owner with ultimate authority and responsibility (both moral and legal) for the management, control, conduct and functioning of the hospital.

Hospital—any institution, place, building, or agency, public or private, whether for profit or not, maintaining and operating facilities, 24 hours a day, seven days a week, having 10 licensed beds or more, properly staffed and equipped for the diagnosis, treatment and care of persons admitted for overnight stay or longer who are suffering from illness, injury, infirmity or deformity or other physical or mental condition for which medical, surgical and/or obstetrical services would be available and appropriate. This term hospital does not include the following:

- a. physicians' offices, clinics or programs where patients are not kept as bed patients for 24 hours or more;
- b. nursing homes providing intermediate and/or skilled care as defined by and regulated under the provisions of R.S. 40:2009-2009.23;

- c. persons, schools, institutions or organizations engaged in the care and treatment of the mentally retarded and which are required to be licensed by the provisions of R.S. 28:421-427;
- d. hospitalization or care facilities maintained by the state at any of its penal or correctional institutions;
- e. hospitalization or care facilities maintained by the federal government or agencies thereof;
- f. infirmaries or clinics maintained solely by any college or university exclusively for treatment of faculty, students and employees.

Note: Facilities under 10 beds shall not be licensed as a hospital and shall not care for patients overnight unless authorized to do so under another state law.

Hospital Record—a compilation of the reports of the various clinical departments within a hospital, as well as reports from health care providers, as are customarily catalogued and maintained by the hospital medical records department. Hospital records include reports of procedures such as X-rays and electrocardiograms, but they do not include the image or graphic matter produced by such procedures, according to state law.

Immediate and Serious Threat—a crisis situation in which the health and safety of patients is at risk. It is a deficient practice which indicates the operator's inability to furnish safe care and services, although it may not have resulted in actual harm. The threat of probable harm is real and important and could be perceived as something which will result in potentially severe temporary or permanent injury, disability or death.

License Under Suspensive Appeal—a full or provisional license against which the department has taken a licensing action and the hospital has filed an administrative appeal.

Licensed Bed—an adult and/or pediatric bed set up or capable of being set up within 24 hours in a hospital for the use of patients, based upon bedroom criteria expressed in these standards. Labor, delivery, newborn bassinets, emergency and recovery room beds are excluded.

Licensed Independent Practitioner—a person who is approved by his board for independent practice and who is approved by the medical staff and credentialed and approved by the Governing Board.

Licensed Nuclear Medicine Technologist—any person licensed to practice nuclear medicine technology by the Louisiana State Radiologic Technology Board of Examiners.

Licensed Practical Nurse—any person licensed to practice practical nursing and who is licensed to practice by the Louisiana State Board of Practical Nurse Examiners.

Licensed Radiation Therapy Technologist—any person licensed to practice radiation therapy technology by the Louisiana State Radiologic Technology Board of Examiners.

Licensed Radiographer—any person licensed to practice general radiography by the Louisiana State Radiologic Technology Board of Examiners.

Minor Alteration—repair or replacement of building materials and equipment with materials and equipment of a similar type that does not diminish the level of construction beyond that which existed prior to the alteration. This does not include any alteration to the "functionality" or original design of the construction. (For example, normal maintenance, re-roofing, painting, wallpapering, asbestos removal, and changes to the electrical and mechanical systems.)

Monolithic Ceiling Construction—a continuous membrane ceiling composed of plaster or gypsum wallboard, but not moveable or "lay-in" ceiling tiles.

Neonatal—newborn immediately succeeding birth and continuing through the first 28 days of life.

New Construction—any of the following started after March 1, 1995:

- a. new buildings to be used as a hospital;
- b. additions to existing buildings to be used as a hospital;
- c. conversions of existing buildings or portions thereof for use as a hospital;
- d. alterations other than *minor alterations* to an existing hospital;

Nurse Practitioner—an advanced practice registered nurse as defined by R.S. 37:913.

Nurses Call System—a system that audibly transmits calls electronically from its place of origin (the patient's bed) to the place of receipt (the nurses' station).

Observation Bed/Unit—outpatient service in which patients are admitted for a period of no longer than 24 hours for observation. After 24 hours, the patient must be admitted, transferred or discharged. This outpatient unit must not provide acute care nursing. A registered nurse must be on site while there are patients in this unit.

Office of the Secretary—office of the person serving as the Secretary of the Department of Health and Hospitals.

Off-Site Campus—all premises on which hospital services (inpatient and/or outpatient) are provided and that are not adjoining to the main hospital buildings or grounds. Each off-site campus of a hospital shall be licensed as a part of the main hospital. An off-site campus shall be located within 50 miles of the main hospital campus.

a. Exception. If a state-owned or operated hospital ceases to do business and surrenders its license, the offsite campus(es) of that hospital which provided outpatient services may be licensed as an off-site campus(es) of another state-owned and/or operated hospital, provided that the off-site campus(es) is located within 100 miles of the main hospital campus of the state-owned and/or operated hospital.

Organ—a human kidney, liver, heart, lung or pancreas.

Radiologist—a doctor of medicine or osteopathy who is qualified by education and experience in radiology.

Registered Dietitian—a dietitian who is qualified based on registration by the Commission on Dietetic Registration of the American Dietetic Association and licensing by the Louisiana Board of Examiners in Dietetics and Nutrition.

Registered Nurse—any person licensed to practice nursing by the Louisiana State Board of Nursing.

Unit Definition—a licensed patient room.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2100-2115.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 21:177 (February 1995), LR 29:2400 (November 2003), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 36:513 (March 2010), LR 37:3028 (October 2011), LR 38:1413 (June 2012).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing LR 21:177 (February 1995), amended LR 29:2413 (November 2003), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 38:1413 (June 2012).

§9379. Organization and Staffing

- A. Food and dietetic services shall be under the supervision of a registered dietitian, licensed to practice in Louisiana, who is employed either full time, part time or on a consulting basis. If the registered dietitian is not full time, there shall be a full time dietary manager.
 - B. The dietary manager shall:
 - 1. be a qualified dietitian; or
- 2. be a graduate of a dietetic technician program, correspondence program or otherwise approved by the American Dietetics Association; or
- 3. have successfully completed a course of study, by correspondence or classroom, which meets the eligibility requirements for certification by the Dietary Manager's Association; or
- 4. have successfully completed a training course at a state approved school, vocational or university, which includes course work in foods and food service, supervision and diet therapy. Documentation of an eight-hour course of formalized instruction in diet therapy conducted by the employing facility's qualified dietitian is permissible if the course meets only the foods, food service and supervision requirements.
- a. Exception. Hospitals with 25 or fewer beds that do not have on site food preparation for patient meals and contract for food services, another full-time employee, i.e., RN or LPN, will be allowed to carry out the responsibilities of the dietary manager. The RN or LPN must be qualified by training and experience and employed full time. The director of nursing shall not hold this position.
- C. The registered dietitian shall be responsible for assuring that quality nutritional care is provided to patients. This shall be accomplished by providing and supervising the nutritional aspects of patient care including nutritional screening, nutritional assessments of patients at nutritional risk, patient education related to nutritional intake and diet therapy, and recording information in the medical record regarding the nutritional status and care of the patient and the patient's response to the therapeutic diet.
- D. The hospital shall employ sufficient support personnel, competent in their respective duties, to carry out the function of the dietary service.
- E. For hospitals that provide dietary services in accordance with §9377 above, a registered dietician shall be employed or under contract to assure proper dietary services are being provided in accordance with §9379.B.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2100-2115.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health

Subchapter G. Food and Dietetic Services

§9377. General Provisions

- A. There shall be an organized dietary service that provides nutritional care to patients. All hospital contracts or arrangements for off-site food preparation shall be with a provider who is licensed by the department's healthcare division or operating under the authority of the federal government.
- B. A hospital may meet the requirements of §9377.A through a contractual agreement with a provider who is licensed by the department's Health Standards Section or through a contract with an outside food management company. If the hospital has a contract with an outside food management company, the following requirements shall be met.
- 1. The hospital must provide written notices to the department's Health Standards Section and to the department's Office of Public Health within 10 calendar days of the effective date of the contract.
- 2. The outside food management company must possess a valid Department of Health and Hospitals, Office of Public Health retail food permit and meet all of the requirements for operating a retail food establishment that serves a highly susceptible population, in accordance with the most current version of the provisions found in Title 51, Part XXIII, Chapter 19, §1911.
- 3. Either the hospital or the food management company must employ or contract with a dietician who serves the hospital on a full-time, part-time, or consultant basis to ensure that the nutritional needs of the patients are met in accordance with the practitioners' orders and acceptable standards of practice.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2100-2115.

Services Financing LR 21:177 (February 1995), amended LR 29:2413 (November 2003).

§9383. Sanitary Conditions

- A. Food shall be in good condition, free from spoilage, filth, or other contamination and shall be safe for human consumption. All food shall be procured from sources that comply with all laws and regulations related to food and food labeling. The use of food in hermetically sealed containers that was not prepared in a food processing establishment is prohibited.
- B. All food shall be stored, prepared, distributed and served under sanitary conditions to prevent food borne illness. This includes keeping all readily perishable food and drink at or below 41EF, except when being prepared and served. Refrigerator temperatures shall be maintained at 41EF, or below, freezers at 0EF or below.
- C. Hot foods shall leave the kitchen or steam table at or above 140EF, and cold foods at or below 41EF In-room delivery temperatures shall be maintained at 120EF or above for hot foods and 50EF or below for cold items, except for milk which shall be stored at 41EF. Food shall be transported to the patients' rooms in a manner that protects it

from contamination, while maintaining required temperatures.

- D. All equipment and utensils used in the preparation and serving of food shall be properly cleansed, sanitized and stored. This includes maintaining a water temperature in dish washing machines at 140EF during the wash cycle (or according to the manufacturer's specifications or instructions) and 180EF for the final rinse. Low temperature machines shall maintain a water temperature of 120EF with 50 parts per million (ppm) of hypochlorite (household bleach) on dish surfaces. For manual washing in a 3 compartment sink, a wash water temperature of 75EF with 50 ppm of hypochlorite or equivalent, or 12.5 ppm of iodine; or a hot water immersion at 170EF for at least 30 seconds shall be maintained. An approved lavatory shall be convenient and equipped with hot and cold water tempered by means of a mixing valve or combination faucet for dietary services staff use. Any self-closing, slow-closing, or metering faucet shall be designed to provide a flow of water for at least 15 seconds without the need to reactivate the faucet. Effective with the promulgation of these requirements, an additional lavatory shall be provided in the dishwasher area in newly constructed hospitals or in existing hospitals undergoing major dietary alterations.
- E. Dietary staff shall not store personal items within the food preparation and storage areas.
- F. Dietary staff shall use good hygienic practices. Staff with communicable diseases or infected skin lesions shall not have contact with food, if that contact will transmit the disease.
- G. Toxic items such as insecticides, detergents, polishes and the like shall be properly stored, labeled and used.
- H. Garbage and refuse shall be kept in durable, easily cleanable, insect and rodent-proof containers that do not leak and do not absorb liquids. Containers used in food preparation and utensil washing areas shall be kept covered after they are filled.
- I. The physical environment in which all food preparation takes place shall be kept clean and in good repair.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2100-2115.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing LR 21:177 (February 1995), amended LR 29:2414 (November 2003).