Kansas Administrative Regulations

Kansas Department for Aging and Disability Services

Article 52.—Crisis Intervention Centers

26-52-8. Environmental requirements.

(a) General building requirements.

(1) Each applicant and each licensee shall comply with the requirement that a crisis intervention center is connected to public water and sewage systems, where available. If public water and sewage systems are not available, each applicant and each licensee shall obtain approval for any private water and sewage systems by the health authorities having jurisdiction over private water and sewage systems where the center is located. Each applicant and each licensee shall submit to the department a certificate of approval and copies of any compliance documentation issued by the public or private health authorities having jurisdiction over the water and sewage systems where the center is located stating that the crisis intervention center is approved for connection to the public or private water and sewage systems.

(2) Each applicant and each licensee shall use a licensed architect for the plans for any newly constructed building that contains a crisis intervention center or for any addition or substantial alteration to the interior or exterior of an existing building that contains a center.

(A) Each applicant and each licensee shall provide to the department copies of plans and outline specifications, including plot plans, for a new building that contains a crisis intervention center prior to commencement of construction. Each applicant and each licensee shall provide to the department proof of compliance received from the Kansas state fire marshal for any new building which certifies that the building that contains a center complies with the building code requirements in K.A.R. 22-1-2, the adopted codes and national fire protection association (NFPA) standards in K.A.R. 22-1-3, and the code footprint requirements in K.A.R. 22-1-7. Each applicant and each licensee shall provide to the department copies of the certificate of compliance or approval from the appropriate state, county, and local authorities that the new building meets building

code requirements, zoning, and ordinance requirements for the intended use as a crisis intervention center.

(B) Each applicant and each licensee shall provide to the department copies of plans and outline specifications for any proposed addition or substantial renovation to an existing building that contains a crisis intervention center prior to initiation of construction. Each applicant and each licensee shall provide to the department proof of compliance received from the Kansas state fire marshal for any proposed addition or substantial alteration to an existing building that contains a center, which certifies that the addition or alteration to the existing building complies with the building code requirements in K.A.R. 22-1-2, the adopted codes and national fire protection association (NFPA) standards in K.A.R. 22-1-3, and the code footprint requirements in K.A.R. 22-1-7. Each applicant and each licensee shall provide to the department copies of the certificate of compliance or approval from the appropriate state, county, and local authorities that certifies the addition or substantial alteration of an existing building meets applicable building code requirements, zoning, and ordinance requirements for the intended use as a crisis intervention center.

(C) If construction on a crisis intervention center is not begun within one year from the date of submission to the department of the documentation required in paragraph (a)(2)(A) or paragraph (a)(2)(B) of this regulation, or there is a substantial change in the plans for the center previously submitted to the department, each applicant and each licensee shall resubmit to the department the following:

(i) The current version of the plans for a new building or an addition or alteration of an existing building prior to initiation of construction of a center;

(ii) a current certificate of compliance from the Kansas state fire marshal required by either paragraph (a)(2)(A) or paragraph (a)(2)(B) of this regulation; and

(iii) a current certificate of compliance or approval from the appropriate state, county, and local authority required by either paragraph (a)(2)(A) or paragraph (a)(2)(B) of this regulation.

(D) Each applicant and each licensee shall provide the department with copies of the current certificate of compliance from the Kansas state fire marshal that the completed construction of the building that contains a crisis intervention center, or an addition or

substantial alteration of an existing building that contains a center complies with the building code requirements in K.A.R. 22-1-2, the adopted codes and national fire protection association (NFPA) standards in K.A.R. 22-1-3, and the code footprint requirements in K.A.R. 22-1-7 prior to occupancy of the new building or an addition or substantial alteration of an existing building that contains a center. Each applicant and each licensee shall provide the department with a certificate of compliance or approval from any other appropriate state, county, or local authority that the completed construction of the building or an addition or substantial alteration of an existing building is approved for occupancy for the intended use as a crisis intervention center.

(b) Location and grounds. Each applicant and each licensee shall comply with the following requirements:

(1) Community resources are available for operation of the crisis intervention center, including access to a hospital, as defined by K.S.A. 65-425, and amendments thereto, police protection, and fire protection required by K.A.R. 22-11-5.

(2) The center shall have a separate entrance and exit point for use of patients if a center is in the same building as a community mental health center, a hospital, a facility, or other provider as defined by K.S.A. 39-2002, and amendments thereto, or in the same building as a hospital defined by K.S.A. 65-425, and amendments thereto, or the center is located in the same building in which a person licensed by the Kansas board of healing arts or the Kansas behavioral sciences regulatory board provides care to persons who are not patients of the center.

(3) The area surrounding the entrance and exit points to a center shall be free of physical hazards.

(c) Structural requirements and use of space. Each applicant and each licensee shall ensure that the crisis intervention center's design, structure, interior and exterior environment, and furnishings promote a safe, comfortable, and therapeutic environment for patients. Each applicant and each licensee shall comply with the following requirements:

(1) Each center shall be accessible to and useable by individuals with disabilities.

(2) Each center shall have a separate area for admission and confidential evaluation of patients to determine whether a patient meets criteria established by K.S.A. 59-29c08, and amendments thereto.

(3) Each center shall have a separate waiting area for patient visitation, and a separate storage space from the visitation area for secure storage of visitors' coats, handbags, backpacks, and any other personal items not allowed in the visitation area.

(4) Each center shall have separate toilet facilities designated for patients, staff, and visitors.

(5) Each center's structural design shall facilitate staff member contact and interaction between staff members and patients.

(6) Patient areas of the center shall be designed to minimize ligature risk points and other hazards that a patient may use for purposes of self-harm or to harm others.

(A) Any item that is attached to the ceiling or wall of the center that patients can access shall have breakaway features to minimize the ability of a patient to attach a cord, rope, or other material for purposes of causing self-harm.

(B) The center shall not have exposed plumbing/pipes in any areas that patients may access.

(C) Light fixtures in patient areas of the center shall be protected to minimize the risk of self-harm or harm to others.

(7) Each patient room in a center shall meet the following requirements:

(A) Each room shall be assigned to and be occupied by a maximum of two patients. No patient rooms shall be located in the basement of a center.

(B) Each room shall have a minimum square footage of floor space of 80 square feet for each patient. If two patients are assigned to each room, the minimum square footage of floor space in each room shall be 160 square feet.

(C) The minimum ceiling height in each room shall be at least seven feet eight inches and shall be designed to be ligature-resistant.

(D) Window coverings for privacy shall be provided in each patient room with a window. All curtains, blinds, or draperies in areas accessible to patients shall be made of materials that are noncombustible and flame-resistant, and all window coverings shall be ligature-resistant and breakaway.

(E) Each patient shall be provided a separate bed with a level, flat mattress in good condition. All beds shall be above the floor level. Each mattress shall be water-repellent. Each mattress shall be cleaned and disinfected when soiled and before each reissuance to a different patient due to a new admission or transfer. The mattress materials and disinfectant shall comply with applicable requirements of the state fire marshal's regulations.

(F) Each patient of a center shall be provided clean bedding. The bedding shall be flame-resistant and adequate for the season. Bed linen shall be changed when soiled and upon discharge of each patient.

(8) The heating, ventilation, and air conditioning system throughout areas of the center accessible by patients, staff, and visitors shall meet the following requirements:

(A) An even temperature of between 68 degrees Fahrenheit and 78 degrees Fahrenheit shall be maintained. Ventilation shall provide for an air exchange of at least four times each hour throughout all patient and staff areas in the center.

(B) Heating, ventilation, and air conditioning supply or return grille shall not be installed within three feet of a smoke detector.

(C) Heating, ventilation, and air conditioning grilles shall not be installed in floors.

(D) Heating, ventilation, and air conditioning intake air ducts shall be filtered to prevent the entrance of dust, dirt, and other contaminating materials. The center shall maintain a schedule for checking and replacing filters. The center shall maintain records of scheduled maintenance for the heating, ventilation, and air conditioning system, including documentation of filter changes and repairs or replacement of any portion of the system.

(E) Ventilation in the kitchen and dining area shall be adequate to prevent buildup of excessive heat, steam, condensation, vapors, smoke, and fumes.

(F) Exposed fixtures of the heating, ventilation and air conditioning system, including vents and grilles, shall be ligature-resistant and breakaway.

(9) Each patient in a center shall have access 24 hours a day to a drinking water source and toilet facilities designated for patient use.

(10) Each center shall have adequate central storage that is behind a locked door for storage of cleaning supplies, bedding, and linen.

(11) Each center may have one or more rooms for patient group activities or patient treatment. Each room for group activities or patient treatment shall provide at least 35 square feet for each patient for the maximum number of patients expected to use the room at any one time. Toilets, sinks, showers, and bathtubs are excluded from the determination of the minimum square footage that shall be available to each patient.

(12) A working telephone shall be accessible to staff members in all areas of the center. Emergency numbers, including those for the fire department, the police, a hospital, a physician, the poison control center, and an ambulance, shall be posted at each telephone.

(13) A service sink and a locked storage area for cleaning supplies shall be provided in a well-ventilated room or closet and shall be separate from the kitchen and patient areas. Wet mops shall be hung above the floor to dry and shall be laundered frequently. "Well-ventilated" as used in this regulation shall satisfy all the following:

(A) The Kansas state fire marshal code for storage of cleaning supplies and equipment;

(B) sufficient size to properly allow for storage of cleaning supplies and equipment used by the center; and

(C) include ventilation grilles in the locked door to the storage room or closet.

(14) Sufficient space in the center shall be provided for visitation between patients and visitors.

(15) If a center has a policy and procedure for conducting searches of patients and visitors prior to entry to the areas of the center accessible by patients, sufficient space shall be available in the admissions area for conducting searches. Private space for searches of patients and visitors shall be available as needed.

(16) Sufficient space shall be provided in the center for admission and evaluation of patients as required by K.S.A. 59-29c08, and amendments thereto. The space shall be adequate to maintain the privacy of patients and confidentiality of patient information.

(17) Smoking shall be prohibited in a crisis intervention center. Each applicant or licensee shall post "no smoking" signage, pursuant to K.S.A. 21-6111, and amendments thereto, in conspicuous locations in areas of a center that are accessible by patients, staff, and visitors.

(18) Oxygen equipment and tanks shall be stored in a locked storage area while not in use. Oxygen equipment and tanks shall not be used near an open flame, or any other source of combustion.

(19) Bathrooms shall be handicapped accessible.

(20) At least one bathroom for each sex for each eight or fewer patients shall be provided. Each patient bathroom shall contain a toilet, one sink, and either a bathtub or a shower. Patient bathrooms that contain a toilet, a sink, and either a bathtub or a shower shall be located adjacent to the patient rooms. All toilets shall be above the floor level. There shall be no exposed pipes or plumbing, and all plumbing fixtures shall be ligature-resistant and breakaway.

(21) Each bathroom shall be ventilated to the outdoors by means of either a window or a mechanical ventilating system. If a bathroom has a window located in an area of the center that is accessible by patients, the window shall be shatter-resistant, and window coverings shall be provided for patient privacy. All curtains, blinds, or draperies in an area of the center accessible by patients shall be ligature-resistant and breakaway.

(22) Drinking water and at least one bathroom for each sex containing a toilet and sink that is handicapped accessible shall be located adjacent to the admissions and visitor areas of the center.

(23) Cold water and hot water, which is thermostatically controlled to a temperature of at least 100 degrees Fahrenheit and not exceeding 120 degrees Fahrenheit, shall be supplied to all bathroom sinks, bathtubs, and showers.

(24) Liquid soap, toilet paper, and paper towels shall be available in all bathrooms.

(25) Emergency exits and hallways leading to emergency exits shall not contain items that would unreasonably impede the ability of patients, staff, or visitors to exit the center in a fire or other emergency.

(26) Use of portable electric heaters or unvented fuel heaters in the center is prohibited.

(27) If a center has a fireplace, fossil-fuel stove or heater, or a wood-burning stove, each gas-burning or wood-burning fireplace, stove, or heater shall be vented to the outside, and shall include reasonably adequate safety measures to minimize the risk of

injury from burns to patients, staff, or visitors. Each gas-burning or wood-burning fireplace or stove shall have a remote gas shutoff located in the same room as the fireplace or stove.

(d) Building maintenance. Each licensee shall reasonably maintain the building which contains a center, including compliance with the following:

(1) Each licensee shall maintain records of maintenance and annual inspections conducted on heating, ventilation, and air conditioning systems. Maintenance and inspection of the heating, ventilation, and air conditioning system shall only be conducted by a certified technician.

(2) Each licensee shall keep the building in good repair and operating condition for use as a center. Each licensee shall maintain records of repair or replacement of systems, equipment and building components which are affixed to the building.

(3) Each center shall be clean and free from vermin infestation.

(4) The interior walls of a center shall be smooth and easily cleanable. Lead-free paint shall be used on all painted surfaces.

(5) The floors and walking surfaces in a center shall be kept free of hazardous substances.

(6) The floors in a center shall not be slippery or cracked.

(7) Each rug or carpet used as a floor covering in a center shall be slip-resistant and reasonably free from tripping hazards. Concrete floors in a center shall be covered by a floor covering, paint, or sealant.

(8) All bare floors in a center shall be swept and mopped at least daily, with spot cleaning to occur more frequently as reasonably necessary for purposes of infection control and safety.

(9) A schedule for cleaning each center shall be established and maintained.

(10) Washing aids, including brushes, dish mops, and other hand aids used for dishwashing activities, shall be clean and used for no other purpose.

(11) Mops and other cleaning tools shall be cleansed and dried after each use and shall be hung on racks in a well-ventilated place.

(12) Pesticides and any other poisons shall be used in accordance with the product instructions. Pesticides and other poisonous substances shall be stored in a locked area.

(13) Toilets, sinks, showers, and bathtubs located in the center shall be cleaned at a minimum of once each day, with additional cleaning occurring more frequently, as needed, for purposes of infection control and safety.

(e) Seclusion rooms. Use of patient seclusion and restraints shall comply with the center's policies and procedures and the requirements of K.S.A. 59-29c11, and amendments thereto. Seclusion rooms in the center shall meet the following requirements:

(1) The locking system shall be approved by the state fire marshal.

(2) No room used for seclusion shall be in a basement.

(3) Each door shall be equipped with a window mounted in a manner that allows for inspection of the entire room.

(4) Each window in a seclusion room shall be impact-resistant and shatterproof.

(5) The walls in a seclusion room shall be free of objects.

(f) Each center's programs and services shall be separate from any programs and services offered by a community mental health center, hospital, facility or other provider defined in K.S.A. 39-2002, and amendments thereto.

(g) Each staff member and volunteer shall receive adequate training to perform their job duties and shall follow the center's written policies and procedures.

(h) A copy of this article, either in printed or electronic format, shall be accessible to the center's staff members and volunteers.

(i) Each of the center's contracts, agreements, and policies and procedures shall be reviewed no later than every two years. The date each center reviewed its policies and procedures shall be documented and signed by the administrative director.

(Authorized by and implementing K.S.A. 39-2004; effective, T-26-2-16-24, Feb. 16, 2024; effective, T-26-6-10-24, June 10, 2024; effective June 28, 2024.)