

care assistance process, the activities necessary to attain the objectives, and the methods of evaluating progress toward attaining the objectives. The case record shall contain this program and any amendments to the program.

B. Client participation - The client shall understand and participate fully in the development of the care plan and in all changes and amendments to it. The client must receive a copy of the original care plan and all subsequent amendments.

C. Minimum content of the care plan - The care plan places primary emphasis on the determination and achievement of a goal and includes, but is not necessarily limited to:

1. identification of the specific services to be delivered;
2. the frequency of service;
3. the cost of the service;
4. the beginning date of the service; and
5. the date each service is due for review.

D. Amendment of the care plan - When the client identifies a need for an amended program, the individual shall redevelop its terms jointly with the qualified provider.

E. Six month review of the care plan - A six-month review of the care plan is mandatory and shall be reflected on the amended care plan; however, if the need requires, this review can be done any time within the six-month time frame. In all cases the client shall be given the opportunity to jointly review the program and, if necessary, jointly renegotiate and agree to its terms.

#### IX. Financial

A. Vendor authorization - The department shall establish and maintain a registry of persons qualified to provide P.C.A. services from names submitted by the Title VII funded independent living centers. Any vendor/person providing P.C.A. services authorized by the P.C.A. Pilot Program must agree not to make any charge to or accept any payment from the client or his family for the services unless the amount of the charge or payment is previously known and, where applicable, approved by the department and documented in the case record.

B. Prior written authorization and encumbrance - The proper authorizing document must be written either before or at the same time of the initiation or delivery of goods or services. Where oral authorization of approved services is made in an emergency situation, there must be prompt documentation and the authorization must be confirmed in writing and forwarded to the provider of the services.

#### X. Responsibilities Outlined in Act 781

##### A. Qualified provider responsibilities

1. Qualified provider must be a Title VII funded independent living center program licensed by the Division of Licensing and Certification as meeting Louisiana licensure standards for personal care attendant services under the client care provider licensing requirements.

2. Must provide the client with documentation of the qualified provider's specific personnel policies as they pertain to the consumer directiveness of the program.

##### B. Client responsibilities

1. Hiring, firing, and supervising the persons who are selected from a registry of names submitted by the Title VII funded independent living centers to provide P.C.A. services.

2. Assisting in the development of an evaluation of his/her eligibility for P.C.A. services from a qualified agency or organization.

3. Assisting in the re-evaluation of his/her eligibility for

P.C.A. services at least every six months from the evaluation team.

##### C. Evaluation team responsibilities

1. Determine the eligibility of the severely disabled person for P.C.A. services.

2. Re-evaluate the severely disabled person at least every six months to determine the person's continuing need for services.

D. Responsibilities of the department in the eligibility decision

1. The department shall follow the recommendations of the evaluation team, or

2. Shall give notice to the person within 20 days of receipt of the recommendations of the evaluation team of its reasons for not following the team's recommendations.

Sandra L. Robinson, M.D., M.P.H.  
Secretary and State Health Officer

## RULE

### Department of Health and Human Resources Office of the Secretary Division of Licensing and Certification

Effective upon publication, the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification will implement the rules for the licensing of Ambulatory Surgical Centers. These rules are to update the rules which implement R.S. 40:2131-2144.

An ambulatory surgical center is an establishment with an organized medical staff of physicians; with permanent facilities that are equipped with and operated primarily for the purpose of performing surgical procedures; with continuous physician services and registered professional nursing services whenever a patient is in the facility; and which does not provide services or other accommodations for patients to stay overnight; and which offers the following services whenever a patient is in the center:

1. drug services as needed for medical operations and procedures performed;
2. provisions for physical and emotional well-being of patients;
3. provisions of emergency services;
4. organized administrative structure; and
5. administrative, statistical, and medical records.

The rules governing the licensing of ambulatory surgical centers are located in the *Louisiana Administrative Code, Title 48, Chapter 45*.

The major parts of the rules to be updated are as follows:

1. the 1973 Life Safety Code (NFPA 101) is changed to 1985 Life Safety Code;
2. the definition of physician is changed to correspond to the Medicare, Medicaid definition which includes podiatry, osteopathy and dental surgery;
3. the license will be changed to identify those centers that are licensed without limitations and those that are licensed with limitation. The difference will be between those centers that perform invasive surgical procedures (licensed

without limitation) and those centers that perform only non-invasive surgical procedures (licensed with limitation).

#### **Title 48**

#### **PUBLIC HEALTH – GENERAL**

#### **Part I. General Administration**

#### **Subpart 3. Licensing and Certification**

#### **Chapter 45. Ambulatory Surgical Center**

#### **§4501. Definitions**

F. *Appeals agency* means the agency authorized to hear appeals as provided in the Administrative Procedure Act.

G. *Physician* means a doctor of medicine, osteopathy, podiatry or dental surgery duly licensed by the state of Louisiana.

#### **§4505. Licensing Procedures**

2. The center shall complete the application form and return it to the division at least 90 days prior to the expiration date of the current license, accompanied by a per annum license fee of \$500.

3. If a center is in compliance with the minimum standards, a license shall be issued by the department. The center shall be licensed to provide services without limitation or licensed to provide limited services.

#### **§4507. Approval of Plans**

A. All new construction, other than minor alterations, shall be done in accordance with the specific minimum requirements of the Office of State Fire Protection and the Office of Preventive and Public Health Services.

B. The applicant must furnish one complete set of plans and specifications to the following:

1. Division of Licensing and Certification;
2. Office of State Fire Protection;
3. Office of Preventive and Public Health Services.

All three must approve the plans before construction is allowed to begin. When the plans and specifications have been fully reviewed and all inspections and investigations have been made, including those of the Office of State Fire Protection and the Office of Preventive and Public Health Services, the applicant will be duly notified whether or not the plans for the proposed ambulatory surgical center have been approved.

C.-D. Delete

#### **§4509. General**

H. Combustible materials and volatile supplies shall be stored and handled in methods consistent with applicable sections of the Life Safety Code of 1985 (NFPA 101). The Life Safety Code of 1985 (NFPA 101) shall be used as the base for all fire and safety regulations. Also NFPA 99 shall be followed.

#### **§4511. Functions of the Office of State Fire Protection**

B. Centers shall comply with NFPA 101 (1985 edition) and NFPA 99.

1.-12. Delete

C.4. A sufficient amount of fuel shall be maintained on hand to insure the operation of the power plant for at least four hours.

#### **§4517. Buildings**

I. Accessibility. All centers constructed after the promulgation of this rule (March 20, 1988) shall comply with ANSI 117.1 for accessibility for the handicapped.

#### **§4539. Nursing Personnel**

G.1. Exception: centers which provide only non-invasive surgical procedures and have a limited license.

#### **§4545. Surgery**

C. Each surgical suite shall be designed and equipped so that the type of surgical procedures conducted can be performed in an appropriate and acceptable manner in accordance with accepted clinical practices.

#### **§4547. Anesthesia**

B. Inhalation and area block anesthesia should be administered by a board-certified or board-eligible anesthesiologist. When this is not possible, the area block anesthesia must be administered by a doctor of medicine or a certified registered nurse anesthetist. Certified registered nurse anesthetist shall be under the supervision of a doctor of medicine.

F. delete

#### **§4557. Sanitizing, Disinfecting and Sterilizing Procedures and Equipment**

A. The center shall make adequate provisions for furnishing properly sanitized, disinfected or sterilized supplies, equipment, utensils and solutions.

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Secretary and State Health Officer

### **RULE**

#### **Department of Health and Human Resources Office of the Secretary**

Effective upon publication, the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification will establish rules for the licensing of trauma centers. These rules are to implement R.S. 40:2116-2118.

*Trauma center* means a health care facility which is capable of treating one or more types of potentially seriously injured persons. The rules are the current edition of the guidelines established by the Committee on Trauma of the American College of Surgeons entitled the *Hospital and Prehospital Resources for Optimal Care of the Injured Patient*. In addition to complying with these guidelines, the trauma center must have a consultation site visit through the Committee on Trauma of the American College of Surgeons. These rules contain standards which:

- specify the number and types of trauma patients for whom such centers must provide care in order to ensure that such centers will have sufficient experience and expertise to be able to provide quality care for victims of injury;

- specify the resources and equipment needed by such centers; includes procedures for the receipt, recording of, and disposition of complaints;

- specifically, a new section is added to the Louisiana Administrative Code Title 48, Part I, Subpart 3, Chapter 67.

#### **6757. TRAUMA CENTER**

6757.1 The trauma center must meet the current guidelines of the Committee on Trauma of the American College of Surgeons which is incorporated by reference.

6757.2 The trauma center must obtain a consultation site visit through the Committee on Trauma of the American College of Surgeons.

6757.3 The trauma center must participate in the central data reporting and analysis system by providing the required information.

For a fee, a copy of these rules may be obtained by writ-