HOSPITAL LICENSING RULE REVISION FACT SHEET

10/04 TO 08/31/05: stakeholders met to complete a four-year review and add amendments to implement the legislation passed during the legislative sessions.

03/02/06: Department of State Health Services Council (DSHS) approved the proposed rules.

The proposed changes as a result of the four-year review include:

- rules have been clarified for prohibition relating to hospital construction in a designated 100-year flood plain, spatial requirements for patient multiple-bed rooms, use of mobile, relocatable and transportable units and the requirements relating to the nurses calling system (Subchapter I.);
- duplicate language has been deleted;
- references to statutes and rules have been updated;
- the name of the department and its programs have been changed;
- definitions have been added, deleted if not used in the rules, and moved to a specific section when the use was confined to that section;
- the requirement for all licensed hospital locations, including multiple-location sites, to have an emergency treatment area with staff on duty and available to initiate immediate appropriate lifesaving measures has been added [§133.41(e)];
- the requirement for all licensed hospital locations to have a registered nurse on duty at all times has been added [§133.41(o)(2)(D)];
- the requirement for the hospital to adopt, implement and enforce policies and procedures related to workplace safety for nurses has been added [§133.41(o)(6)];
- compliance with the National Fire Protection Association's Life Safety Code has been updated from the 2000 edition to the 2003 edition;
- conditions for the use of alcohol-based products when used for surgical skin preparation have been established [§133.143(a)];
- signage specifications for the emergency entrance to a hospital have been established [§133.163(f)(1)(A)(ii)(I)];
- standards for a decontamination room, intermediate care suite and a universal care suite when provided have been added (§133.163).

The proposed changes to implement the legislation passed during the last legislative session include:

- SB 316 relating to information provided to parents of newborn children. [§133.45(f)];
- SB 419 relating obtaining consent for a physician to perform an abortion on an unemancipated minor [§133.45(g)(2)];
- SB 872 relating to a study regarding the impact of niche hospitals on other general hospitals, to certain reports and disclosure requirements regarding niche hospitals, and to the establishment of an advisory panel to conduct a study on the reporting of health care associated infection rates and process measure [§133.22(a)(8)(D) and §133.23(b)(1)(E)(iv)];
- SB 1330 relating to immunization of elderly persons by certain health care facilities [§133.45(h)];
- SB 1525 relating to safe patient handling and movement practices of nurses in hospitals [§133.41(o)(7)];
- HB 677 relating to emergency services for sexual assault survivors [§133.41(e)(6)];

- HB 1718 relating to the regulation of certain nursing practices, including circulating duties in an operating room [§133.41(w)(1)(C)];
- HB 2471 relating to authorizing the DSHS to issue a single license for multiple hospitals [§133.21(c)(4)]; and
- HB 3357 relating to certain information required to be contained in an application for or renewal of a hospital license [§133.22(a)(8)(A)-(C) and §133.23(b)(1)(E)(i)-(iii)].

03/06: proposed rules not published as new issues have arisen.

04/18/06: stakeholder meeting.

07/07/06: stakeholder meeting.

Changes to the proposed rules include:

- Chapter 133 will be repealed and proposed as a new rule;
- added the requirement for policies to be adopted, implemented and enforced;
- modified definition of available [§133.2(6)] and changed available to accessible at §133.41(q)(5)(H)(i) and §133.44(c)(4)(A)(ii);
- added definition of niche hospital [§133.2(29)];
- modified definition of outpatient [§133.2(30)] and outpatient services [§133.2(31)];
- added a hospital license and an ambulatory surgical center shall not be issued for the same premises [§133.21(c)(5)]
- changed the Joint Commission on Accreditation of Healthcare Organizations or the American Osteopathic Association to a Centers for Medicare and Medicaid Services-approved organization [§133.21(c)(4)C)(iv), §133.23(b)(1)(D), §133.81(b)(2), §133.101(a)(1)(B) and §133.168(b)];
- added the requirement to notify the department of a change in the emergency contact name and phone number [§133.21(g)(2)(D)];
- used exact language from HB 3357 in application and issuance of initial and renewal licenses [§133.22(a)(8)(A)-(C) and §133.23(b)(1)(E)(i)-(iii)];
- added §133.26 Fees.;
- revised anesthesia services [§133.41(a)];
- changed quality assurance to quality assessment and performance improvement [§133.41(d)(2)(D)(i), (g)(2)(A), (o)(2)(H)(ii), (o)(3)(C) and (q)(5)(F)];
- added §133.161(a)(1)(A) to §133.41(e) and deleted §133.161(a)(1)(D);
- changed service or department [§133.41(e)(1)(C)] and room [§133.41(e)(1)(D)] to suite;
- added Except for a comprehensive medical rehabilitation hospital or a pediatric and adolescent hospital that generally provides care that is not administered for or in expectation of compensation [§133.41(e)(2)(B) and (C) and §133.163(f)(1)(A)(ii)];
- added a requirement for general hospitals to participate in the local emergency medical service system [§133.41(e)(5)];
- limited the responsibility of the governing body to ensure implementation and enforcement of adopted policies and procedures to the requirements of this chapter [§133.41(f)(4)(F)];
- changed nosocomial infections to health care associated infections [§133.41(g)(1)(A) and (B)];
- changed prescribing practitioner to prescriber as practitioner definition states other than a physician, podiatrist, or dentist [§133.41(j)(6) and (7) and §133.41(o)(3)(B)(ii)];

- changed within 48 hours to promptly as specified by hospital policy [§133.41(j)(7) and §133.41(o)(3)(B)(ii)];
- deleted the requirement that the representative be a registered nurse [§133.41(o)(2)(H)(ii)];
- changed validated to substantiated [§133.41(o)(2)(I)(i)(II)(-c-) and §133.101(b)(5)];
- deleted or the quality assurance committee [§133.41(o)(7)(B)(vii)];
- added the requirement for discharge planning to be completed prior to discharge [§133.41(r)(3)(A)];
- added renal dialysis services [§133.41(t)];
- added physician assistant or other qualified medical personnel to registered nurse as staff permitted to provide assessment, reporting and transfer [§133.44(c)(4)(A)(ii) and §133.44(c)(4)(B)(ii)];
- added Except as is specifically provided in subsections (b)(8) and (9) of this section [§133.44(c)(6)(C)];
- retained and transferring physician [§133.44(c)(6)(D)];
- retained the time and date the transferring physician secured a receiving physician [§133.44(c)(10)(B)(vii);
- added All-hazard disaster preparedness [§133.45(c) and deleted §133.142(c)];
- changed 60 to 90 [§133.101(a)(2)];
- used the language from Chapter 134 rules for enforcement action (§133.121) and deleted §133.122.

Corrections to the proposed rules include:

- commissioner of health and commissioner of health and human services changed to commissioner of state health services;
- percent to %;
- added Texas to State Board of Dental Examiners [§133.2(12)];
- deleted and other practitioners from the definition of medical staff [§133.2(26)];
- changed Texas State Board of Podiatry Examiners to Texas State Board of Podiatric Medical Examiners [§133.2(38)];
- changed Centers for Disease Control (CDC) of the United States Public Health Service to Centers for Disease Control and Prevention (CDC) of the Department of Health and Human Services [§133.2(48)];
- deleted Medicare in §133.22(g)(1);
- changed Accreditation Council on Graduate Education to Accreditation Council for Graduate Education [§133.41(f)(4)(C)(i)(VI)];
- changed §330.1004 to §330.1207 [§133.41(y)(1)(A)];
- changed Information for Parents of Newborn Children to Parenting and Postpartum Counseling Information [133.45(f)];
- changed Reports and Investigations of Children or Elderly or Disabled Persons to Reports and Investigations [§133.47(d)(1)];
- changed Texas State Board of Registration for Professional Engineers to Texas Board of Professional Engineers [§133.167(g)(4)(B).

10/05/06: presented the draft proposed rules at the DSHS Council meeting.

Changes to the proposed rules include:

- modified the definition of advanced practice nurse (APN) [§133.2(3)];
- added the definition of community-wide plan [§133.2(8)];
- deleted that is dated no earlier than one year prior to the application date and added The hospital fire safety survey shall be conducted annually and both surveys shall be submitted [§133.23(b)(1)(B)];
- added at each renewal application, in addition to the license fee, there shall be a $20 TexasOnline subscription fee [§133.26(f)];
- deleted qualified [§133.41(a)(1);
- changed patient color to patient's oxygen saturation level [§133.41(a)(2)(C)];
- clarified that the director is a medical director or clinical director who is a physician [§133.41(c)(5)(C), (e)(1)(A), (n)(2), (u)(3)]
- exempted critical access hospitals (CAHs) from the requirement to have a physician on duty and required CAHs to have a physician on-call [§133.41(e)(2)(C)(i) and (ii)];
- hyphenated (HBV)-containing [§133.41(i)(1)(C)];
- added or contract with [§133.41(j)(1)];
- added a definition of as soon as possible [§133.41(j)(6)];
- deleted promptly as specified by hospital policy and added within 48 hours [§133.41(j)(7) and (o)(3)(B)(ii);
- added The medical history and physical examination shall be placed in the patient's medical record with 24 hours after admission [§133.41(j)(8)(C);
- added an updated medical record entry documenting an examination for any changes in the patient's condition when the medical history and physical examination are completed within 30 days before admission. This updated examination shall be completed and documented in the patient's medical record within 24 hours after admission [§133.41(j)(8)(D)];
- added The medical history and physical examination shall be placed in the patient's medical record within 24 hours after admission [§133.41(k)(3)(F)];
- added in accordance with §289.256 of this title (relating to Medical and Veterinary Use of Radioactive Material for clarity [§133.41(n)(5)(B)];
- clarified that an RN shall be on duty in each building of a licensed hospital that contains at least one nursing unit where patients are present [§133.41(o)(2)(D)];
- increased one-third to one-half [§133.41(o)(2)(H)(i)];
- moved the reference to prescribing and deleted under medical direction [§133.41(o)(4)(D)];
- corrected the spelling of policies [§133.41(o)(7)(B)];
- deleted Drugs and biologicals shall be kept in a locked storage area and added All drugs and biologicals shall be kept in a secure area, and locked when appropriate [§133.41(q)(5)(B)];
- deleted Dangerous drugs as well as controlled substances shall be secure from unauthorized use and added Drugs listed in Schedules II, III, IV, and V of the Comprehensive Drug Abuse Prevention and Control Act of 1970 shall be kept locked within a secure area [§133.41(q)(5)(B)(ii);
- added applicable to patients who receive such services [§133.42(b), (c) and (d)]
- added and the hospital water supplier [§133.45(c)(4)(C)];
- clarified that there are two reporting categories rather than three [§133.45(c)(4)(G)(ii)};
- added appropriate to describe the provision of personal protection equipment [§133.45(c)(4)(H)(i)(II)];
- corrected the title of National Standard Plumbing Code Illustrated [§133.162(d)(4);
- changed to allow the use of bottled water [§133.162(d)(4)(A)(i)(VIII)];

- corrected the title of the standard and the contact information [§133.162(d)(4)(A)(iii)(IV)];
- clarified that the housekeeping room shall be located on the decontamination/soiled side of the central sterile supply suite [§133.163(c)(1)(B)(iv)];
- clarified that a multiple-bed emergency treatment room is not required [§133.163(f)(1)(A)(i)(II)];
- added room after patient toilet [§133.163(f)(1)(B)(i)(IV)];
- clarified when performing surgery in a trauma room, the ventilation requirement is no different than in an operating room [§133.163(f)(3);
- changed 19 to 20 [§133.163(k)(1)];
- added requirement for Class A hyperbaric chambers, clarified and reduced distance requirement and clarified configuration of the chamber entry point [§133.163(k)(1)(A)];
- corrected twenty-four to 24-hour [§133.163(n)(3)(C)(iv)];
- corrected may to shall [§133.163(o)];
- added for a general hospital [§133.163(r)(1)(A)];
- added and in surgical suite post-anesthesia care units [§133.163(t)(1)(C)(iv)];
- clarified observation windows [§133.163(u)(1)(N)(i)];
- corrected convenient to conveniently [§133.163(u)(1)(O)(xx)];
- added small style D or E [§133.163(u)(1)(Q)(vi)];
- corrected appropriate to appropriately [(u)(1)(Q)(xii), (dd)(1)(B)(iv) and (C)(vi)];
- corrected an to a [§133.163(u)(2)(A)(v) and (vi)];
- added isolation and anteroom [§133.163(u)(2)(B)(iii)];
- corrected provide to provided in [§133.163(u)(4)(B)(iii);
- clarified the outpatient suite rule [§133.163(v)(1)(A)];
- corrected three feet six inches to three feet [§133.163(v)(1)(F)(iii)];
- modified to be in compliance with 22 Texas Administrative Code, §291.26, (relating to Pharmacies Compounding Sterile Pharmaceuticals) and the United States Pharmacopoeia, Chapter 797, Pharmaceutical Compounding-Sterile Preparations [§133.163(x)];
- deleted the repetitive in design or shielding [§133.163(y)(2)(A)(ii)];
- corrected the rule by adding shall have as hardware that minimizes jamming possibilities is required [§133.163(ff)(2)(A)(ii)];
- increased from every 30 days or less to every 90 days or less [§133.166(c)(1)(F)];
- corrected the spelling of hospital in the title, maintained current rule requirement for x-ray (surgical/critical care, catheterization), deleted the exhaust requirement from the fluoroscopy room, revised the pharmacy room requirements and corrected the description of the temperature in relation to the humidity [§133.169(c)];
- changed 110 to 105-120 [§133.169(e)];
- added numerical note 4 [§133.169(f)];
- added note 10 [§133.169(g)].

03/29/07: stakeholder meeting.