**Section 1110.2530 Subacute Care Hospital Model – Review Criteria**

a) Distinct Unit – Review Criterion

 The applicant must document that the proposed unit or health care facility will be primarily self-contained, physically distinct and have nursing staff dedicated to service within only that unit. Auxiliary personnel and contracted professional personnel must be available for care of unit patients but need not be dedicated to providing service to only the subacute care hospital model. Documentation shall include a physical layout of the unit detailing travel patterns to ancillary and support services and to patient and visitor access, a detailed summary of all shared services and how costs for such services will be allocated between the model and the hospital or long-term care facility. Also, the applicant must provide a detailed staffing plan which includes staff qualifications, staffing patterns for the proposed subacute care hospital and the manner in which non-dedicated staff services will be provided.

b) Contractual Relationship – Review Criterion

 The applicant must document the capability to handle cases of complications, emergencies, or exigent circumstances.

1) An applicant must document, for a model to be located in a currently licensed long-term care facility, the capability through the existence of a contractual relationship (which includes a transfer agreement) with a general acute care hospital.

2) An applicant must document, for a model to be located on a designated site previously licensed as a hospital (Section 1100.740(c)), capability through the existence of a contractual arrangement (transfer agreement) with a general acute care hospital.

3) An applicant must document, for a model to be located in a licensed hospital, that the emergency capability continues to exist in accordance with the requirements of hospital licensure.

c) Unit Size – Review Criterion

 The applicant must document that the number of subacute care beds proposed will equal or exceed the minimum number established for the planning area. The minimum subacute care hospital unit size is 10 beds in rural planning areas (as defined in 77 Ill. Adm. Code 1100.720(a)) and 30 beds in all other planning areas.

(Source: Added at 18 Ill. Reg. 8455, effective July 1, 1994)