

TIME OUT ROOMS

During site visits, the surveyor will review for the requirements listed in this protocol during the physical plant walk through, if the facility has a time out room.

- **Time OUT ROOMS CONSTRUCTED OR SIGNIFICANTLY MODIFIED AFTER APRIL 1, 2013 MUST MEET THE REQUIREMENTS LISTED IN THIS PROTOCOL.**
 - For time out rooms constructed or significantly modified after April 1, 2013, OPWDD may waive specific physical plant requirements upon the application of an agency. The agency should have documentation of the waiver provided by OPWDD's Commissioner's Review Committee.
- **Please Note:** Time-out rooms which were in existence on April 1, 2013 are not required to comply with the specific physical plant requirements if the time-out room was approved by OPWDD prior to April 1, 2013. A new OPWDD waiver is not required in this situation. However, OPWDD approval is required for any significant modification of such time-out room which occurs on or after April 1, 2013. OPWDD approval could have been obtained from the OPWDD DDRO, Central Office Clinical Solutions, the Bureau of Program Certification, the OPWDD Office of Safety and Security Services, or Capital Support Services.
- **TIME OUT ROOMS ARE NOT PERMITTED IN FAMILY CARE HOMES**
- Regardless of when the time-out room has been constructed or approved, if the surveyor observes a feature in the time-out room that poses a serious risk to an individual, he/she should inform the agency of his/her concerns and contact the area director for discussion and instructions.
- The standards will be helpful to review all Time Out Rooms regardless of construction date; however the specific regulatory citations cannot be used. However, if the condition of the room does not ensure the safety of individuals, the condition should be cited using appropriate 635-7 requirements (e.g. hazardous conditions, maintenance, etc.)
- Many of the standards below do not include guidelines as it is assumed the standard is self-explanatory. If guidance for determining compliance is needed, surveyor should contact their Area Director.

CODE	CITE	STANDARD	Y	N	N A	COMMENTS (Deficiency/Deficient Practice or Best Practice) (Enter Name of Individual associated with deficiency)
TO 101	633.16(j)(3) (iv)(e)(1)	1. The room must be designated for time-out use by the chief executive officer and approved by the agency's governing body.				

Guideline:

The agency should maintain documentation that demonstrates that the agency's CEO and agency's board reviewed and approved the use of the site's space as a time-out room. Review the documentation that demonstrates the approval.

Proposed guidance per FAQ draft:

- It is the expectation that the Board of Directors/ Board of Visitors (or a body with equivalent governing authority) decision regarding approval or denial of the request to construct, modify, or otherwise designate a time out room on site, will be documented in meeting minutes. The DDSOO Director/CEO, or equivalent, must specifically approve and designate any room on site that is proposed for Time-Out use. Meeting minutes should reflect an understanding by the Board and CEO that the Time Out Room may only be used for Time Out as defined in 633.16 (j)(3)(i-iv), and may not be used for other purposes. Meeting minutes should also document that room requirements have been reviewed and that, if the room is constructed after April 1, 2013, the room's construction will be in compliance with all standards and requirements in regulation 633.16(j)(3). These meeting minutes should be retained by the President/Chair of the Board, and a copy retained by the DDSOO Director/CEO, to provide documented evidence of the official approval for construction/modification of the time out room.
- It is expected that the CEO and Board of Visitors will receive and review an explanation of why the Time Out room is needed at the site. The written rationale is to be produced by the treatment/ planning team, or equivalent, and should include specific reasons for the clinical necessity of the Time Out Room, based on the needs of one or more individual(s) served at the site. This written justification must be retained with the any meeting minutes that document the discussion of the request for construction (or modification) of a time out room. The minutes should include a specific statement of the agreement among the members of the Board and the CEO that availability of a time out room is clinically necessary, given the needs of the individual(s) who reside or attend program at the site.

TO102	633.16(j)(3) (iv)(e)(1)	2. Both the design and statement of intended use shall be approved by OPWDD				
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Guidelines:

The agency should maintain documentation that demonstrates that OPWDD reviewed and approved the design and intended use of the Time Out room.

Proposed Guidance per draft FAQ:

1. The treatment/ program planning team, or equivalent, will request the CEO/DDS00 Director to review the proposal for constructing a time out room. The treatment/ program planning team should provide written clinical justification for having a time out room on site.
2. The CEO/DDS00 Director, or designee, will review the team's justification for having a time out room and decide if a time out room is clinically necessary and adequately justified.
3. The CEO/DDS00 Director will communicate this request and justification to the governing body (e.g. Board of Visitors, Board of Directors, Executive Board, or equivalent), and advise the Board of procedures for considering a time out room. If the CEO/DDS00 Director supports having a time out room, and believes there is adequate justification for this room, the Board will then decide if they will approve or deny the request.
4. If the Board supports and approves the CEO/DDS00 Director's approval for a time out room, the CEO and/or Board will forward the request to Central Office, Statewide Services Division. Documentation of the CEO/DDS00 Director's approval as well as Board approval must be maintained and a copy of such documentation must be forwarded to Central Office with the request to designate/construct a Time Out Room.
5. The Statewide Services Division will review the request and consider approval or denial of the request based on the clinical justification and rationale for constructing a time out room at the specified location. The agency must demonstrate that the individual(s) who are served at the location have a clinical need for accessing a time-out room. The Statewide Services Division will approve or deny the room designation and construction based on the provided justification. If the request is provisionally approved by the Statewide Services Division, the request will be forwarded by the Division of Statewide Services to the Division of Quality Improvement (DQI).
6. DQI will provide a final review of the request. This review will consist of evaluating proposed room plans and specifications and approval will only be granted if the room meets the physical and safety specifications outlined in regulation 633.16. DQI will forward their decision in writing (e-mail is sufficient) to the Statewide Services Division. Should DQI deny a request, the written response will include room specifications that do not comply with the Time-Out Room specifications listed in regulation 633.16 (j)(3)(e).
7. A representative from the Statewide Services Division will provide the CEO/DDS00 Director a written letter that documents the initial and provisional approval or denial of the request. Approval is provisional and contingent upon the designated or constructed room meeting the specifications and requirements listed in 633.16 (j)(3)(e).
8. Upon completion of room modification or construction, DQI will provide an on-site review of the room to ensure room requirements comply with the regulation, particularly physical and safety specifications. Information from the on-site visit and review of the room will be forwarded to the Division of Statewide Services.
9. If the DQI on-site review indicates that the room is compliant with the regulatory specifications (documented through the Safety and Physical Plant Protocol), the Statewide Services Division will provide the CEO/DDS00 Director with final written notification of approval at which point the room can begin being used. The time out room cannot be used until the agency has received final written approval from the Division of Statewide Services. If the DQI on-site review reveals that the time out room does not meet the mandatory specifications outlined in regulation 633.16, then changes that need to be addressed will be outlined in a written letter that will be send to the CEO/DDS00 Director from a representative from the Statewide Services Division. This written notification will provide an opportunity for the agency to resolve any issues. Once any changes or modifications are made, the CEO/DDS00 must notify the Statewide Services Division who will again review the request for a time out room.
10. The CEO/DDS00 Director or their designee is responsible for maintaining documentation regarding the approval or denial of the time out room. The Division of Statewide Services will also maintain a database of facilities/programs that have an approved time out room on site.
11. The Time Out Room can only be used in accordance with regulation 633.16 and agencies must have a policy specific to the use of time out rooms including how and when time out rooms are to be utilized, training staff must have to incorporate the use of time out, how use of time out and monitoring is documented, and other necessary procedures which ensure compliance with regulation 633.16.

TO103	633.16(j)(3)(iv)(e)(3)(i)	3. Size: The minimum measurements of the room shall be 6' length x 8' wide x 8' height.				
Guidelines: Surveyors are not required to carry equipment to measure but if the room size appears to be inadequate, may ask the facility to demonstrate that the room meets size specifications.						
TO104	633.16(j)(3)(iv)(e)(3)(ii)	4. Decoration: Colors are selected to create a calm, relaxed atmosphere.				
Guidelines: Upon viewing the room, assess whether the room generally is colored in subdued and soft colors. While responses to color may be personal, research suggests green, blue and soft neutrals are most effective.						
TO105	633.16(j)(3)(iv)(e)(iii)(a-c) and 633.16(j)(3)(vi)	5. The Time Out Room is free of electrical devices and other protrusions that may cause or be used to cause harm/injury to a person.				
Guidelines: <ul style="list-style-type: none"> • Ensure this equipment is not such that a person could bump against it, place fingers into, etc. and that wiring is not exposed. • There shall be no electrical fixtures, outlets, switches, or wiring which may cause harm or injury to a person. Ensure this equipment is not such that a person could bump against it, place fingers into, etc. and that wiring is not exposed. • There shall be no protruding light fixtures on any ceiling lower than 10' in height. • There shall be no protruding light fixtures on any wall. • Sprinkler heads, if provided, shall be the concealed type • There shall be no protrusions on which a person might be injured. There shall be no protruding doorknob in the room. Wall and doors use in the room's interior should be as flat/smooth as possible. If the door is sufficiently padded to recess the knob, but still cause it to be accessible, this is permissible 						
TO106	633.16(j)(3)(iv)(e)(3)(iii)(d)	6. Recessed light fixtures shall be designed to withstand tampering or destruction by the person in the room.				
Guidelines: Visual inspection may be effective to verify this by observing for materials used, and ensuring no exposed screws, etc.; you may also need to ask facility staff to describe materials used and the properties of same.						
TO107	633.16(j)(3)(iv)(e)(3)(iv)	7. There shall be no exposed pipes. Coverings shall be designed to prevent the possibility of any pipes being grasped by the person.				
Guidelines: none						
TO108	633.16(j)(3)(iv)(e)(3)(v)	8. There shall be no exposed holes in the room.				
Guidelines: none						

TO109	633.16(j)(3)(iv)(e)(3)(vii)	9. The use of glass shall be minimized and unbreakable glass should be used whenever possible. Coverings for glass that is breakable are to be designed in such a way as to prevent being grasped by the occupant. Mirrors must be non-breakable.				
Guidelines: none						
TO110	633.16(j)(3)(iv)(e)(3)(viii)	10. Padding or resilient wall covering shall be affixed to walls and the floor in such a fashion that it cannot be easily removed by the occupant.				
Guidelines: none						
TO111	633.16(j)(3)(iv)(e)(3)(viii)	11. Provisions shall be made for the removal of the padding or wall covering for cleaning, repairing or altering of any such material (e.g., padding fastened securely to plywood panels which are then screwed to the walls), unless the wall surface cover is such that it can be cleaned, maintained, and repaired in place.				
Guidelines: none						
TO112	633.16(j)(3)(iv)(e)(3)(viii)	12. In facilities where the interior finish rating is required (i.e. Life Safety Code compliant facilities) the finish rating of the wall or floor surfaces shall be equal to or greater than that required by the Life Safety Code.				
Guidelines: OFPC's approval or rejection of the interior finish during their review of a LSC site should be used as the basis for assessing this standard.						
TO113	633.16(j)(3)(iv)(e)(3)(ix)(a)	13. There shall be adequate measurement equipment to ensure control of temperature, humidity and circulation of air within the room.				
Guidelines: While in the room, assess the comfort of the room regarding these above conditions.						
TO114	633.16(j)(3)(iv)(e)(3)(ix)(b)	14. The floor surface covering shall be consistent with the needs of the person using the room.				
Guidelines: floors should provide protection necessary to individuals that may be using the room and easily cleaned and disinfected according to their needs.						

TO115	633.16(j)(3)(iv)(e)(3)(x)	15. If soundproofing of the time-out room is necessary for the comfort of other people receiving services, it shall be determined if there will be sufficient transmittal of sound (e.g., adequate to hear words spoken by the person within the room) through the observation window or whether other means of maintaining auditory contact are necessary.				
Guidelines: Test the ability of the person outside the room to hear sound from the interior.						
TO116	633.16(j)(3)(iv)(e)(3)(xi)	16. There shall be no furniture or other objects in the room.				
Guidelines: none						
TO117	633.16(j)(3)(iv)(e)(3)(xii)(a-b)	17. Observation window construction shall meet regulatory requirements.				
Guidelines:						
<ul style="list-style-type: none"> • Observation windows shall not be covered by mesh, bars, or wire material. • An opening containing only mesh, bars, or wire material shall be unacceptable as an "observation window." 						
TO118	633.16(j)(3)(iv)(e)(3)(xii)(c)	18. The observation window /viewing area to observe the interior of the room, must meet regulatory requirements.				
Guidelines:						
<ul style="list-style-type: none"> • The viewing area shall be sufficiently large to maximize visual observation. The person shall be in at least partial view at all times. There must be no blind areas large enough for the person to be completely out of sight). This shall not be construed to mean that the design of the room must provide for the capability of observing every action, facial expression, etc., should the person be standing/sitting in such a position or location that limits the view. • The viewing area shall be designed to be functional, taking into account the comfort and suitability for use by staff. 						
TO119	633.16(j)(3)(iv)(e)(3)(xiii)	19. Windows (other than observation windows) shall be completely covered with a false wall to ensure the person's safety and to eliminate distraction and/or visual stimulation in what is intended to be a non-stimulating environment.				
Guidelines: none						
TO120	633.16(j)(3)(iv)(e)(3)(xiv)	20. Doors shall swing outward from the inside.				
Guidelines: none						

TO121	633.16(j)(3)(iv)(e)(3)(xiv)	21. Doors may be locked only by the continuous physical action of staff.				
Guidelines: The door release mechanism must be designed in such a way that if staff are not applying pressure, or physically holding the release mechanism, the door lock automatically releases.						
TO122	633.16(j)(3)(iv)(e)(3)(xv)	22. Door thresholds shall not protrude creating a trip hazard. These shall be flush with the floor or ramped.				
Guidelines: none						
TO123	633.16(j)(3)(iv)(e)(3)(xvi)	23. There shall be a clock visible to staff to monitor the duration of the time-out.				
Guidelines: none						
TO124	633.16(j)(3)(iv)(e)(3)(xvii)	24. The room must be cleaned and disinfected regularly and after each use.				
Guidelines: Verify that the facility has procedures for cleaning and disinfecting the Time Out room. Ensure the room, when not in use appears clean.						
TO125	633.16(j)(iv)(e)(5)	25. If a time-out room must be secured when not in use, the mechanism used for this purpose shall be such that the door can be opened, at will, from the inside.				
Guidelines: none						