KANSAS
Guidelines for the Operation of a Freestanding Emergency Department

• The offsite emergency department must be inspected when surveying the main hospital unit.

• If the hospital is accredited, the offsite location must also be accredited.

• The same services provided at the main emergency department must be provided at the freestanding emergency department, 24 hours per day, seven days per week.

• Since a freestanding emergency department is a department of the hospital, it must be able to provide emergency services and care for any emergency medical condition that is within the service capability of the hospital. Patients may be transported from one area of the hospital (offsite) to another (main) as long as emergency services and care are provided within the service capability of the hospital. Transportation from one area of the hospital (offsite) to another (main) must be provided by the hospital or through a contract with the local community EMS system. All services provided by on-call physicians must be available to patients at the offsite facility as well as the main hospital.

• A hospital’s freestanding emergency department is subject to the same signage requirements as the main emergency department. Signs posted in the freestanding emergency department must be identical to signs posted in the onsite emergency department, as they must identify the service capability of the hospital.

• A list of services provided at the main campus and at the freestanding location must be provided.

• Medical screening and stabilization are required for all patients seeking emergency services at both the main emergency department and the freestanding location.

• An emergency medicine physician member of the organized medical staff must be in charge of each emergency department location.

• Supervision of care by a registered nurse qualified by relevant training and experience in emergency care for all emergency department nursing staff must be provided at each location.

• A control register identifying all persons seeking emergency care must be
maintained at each location.

• Both onsite and freestanding emergency departments must have procedures in place and a listing of on-call physicians.

• Onsite and freestanding emergency departments are subject to the federal Emergency Medical Treatment and Labor Act (EMTALA) regulations.

• The Bureau of Child Care & Health Facilities must receive confirmation from a licensed architect that the freestanding emergency department(s) meet the requirements of KAR 28-34-32.

• Freestanding emergency departments must meet all of the physical plant requirements, including electrical and mechanical, of an onsite emergency department as described in the 96-97 AIA Guidelines and as adopted by reference in KAR 28-34-32.

• Freestanding emergency departments must meet the occupancy and construction requirements of the Life Safety.