Required Paperwork for Sub-Acute Stabilization Facility Certification

Please review “Interested in opening a Sub-Acute Stabilization Facility?” for information about the process and links to the required forms. It is the provider’s responsibility to review Article 7.5 to ensure their residential setting is in compliance with State rule.

Submit the following to apply for Sub-Acute Stabilization Facility certification

A. Department of Homeland Security Construction Design Release or exemption paperwork
B. Paperwork from the local zoning authority to occupy and operate a sub-acute facility (If the facility is in Marion county, a specific affidavit of application must be completed and submitted to the Indianapolis Department of Business & Neighborhood Services.)
C. Indiana State Department of Health Retail Food Plan Approval Letter
D. If the facility utilizes a septic system, submit the Septic System Approval documentation
E. Contact Information for State Fire Marshal Occupancy Inspection Request (name, phone number and email address of the person meeting with a Fire Marshal)
F. Facility Facts Record (State Form 48160) - If the program will have 16 or more beds, a bed waiver request must be submitted
G. A copy of the accrediting agency’s report that the new site is covered by the accreditation OR a statement signed by the CEO indicating that accreditation from a Division approved accrediting body will be achieved within twelve months of certification
H. A statement signed by the CEO indicating what if any restraints and/or seclusion are used and whether the facility is locked to impede egress.
I. Program description, which must include but not be limited to the following:
   a. The facility philosophy and treatment orientation
   b. Resident population to be served
   c. Services offered by the program
   d. Program goals and services, including staffing assignments to accomplish these goals
   e. Community resources that will be utilized to meet the resident’s needs (Include a description of the facility and its location, along with the ability of the community to provide necessary supportive services such as: fire protection, medical service, and access to recreational facilities, shopping and transportation)
J. Provision of the following:
   a. 24 hour supervision
   b. Services provided under the supervision of a physician licensed to practice medicine in Indiana
   c. Sufficient staffing to carry out treatment plans and provide consumer and staff safety
   d. Admission Criteria
   e. Transfer Criteria
   f. Discharge Criteria
K. Detailed floor plan with marked square footage of each consumer bedroom and labeled beds, bathrooms, toilets, and tubs/showers.