

Inspection Information

Name of Facility : Crossroads Academy dba CRA Residential Support

Date of Inspection : 12/13/2022

Show background screening rules? : ☐

501-22 Residential Support Programs Inspection

501-22-3 Residential Support Programs. Administration.

(1) Each residential support program may offer treatment through referrals or within the agency by voluntary client participation.

501-22-3-1-Assessment : Compliant

501-22-3-1-Comment :

(2) Each residential support program that offers treatment shall obtain the appropriate categorical department license for that treatment.

501-22-3-2-Assessment : Compliant

501-22-3-2-Comment :

(3) Each residential support program serving an individual experiencing homelessness in a setting with a contracted service provider shall identify each key decision maker and service provider associated with the license application. While operating in the licensed setting, the identified decision maker and service provider shall be subject to each licensing rule and requirement.

501-22-3-3-Assessment : Compliant

501-22-3-3-Comment :

(4) Residential support may not require treatment as a condition of admission.

501-22-3-4-Assessment : Compliant

501-22-3-4-Comment :

501-22-4 Residential Support Programs. Staffing.

(1) Each residential support program serving adults is not required to provide 24-hour supervision unless that program is an emergency homeless shelter or a domestic violence shelter.

501-22-4-1-Assessment : Compliant

501-22-4-1-Comment :

(2) Each program shall establish a policy and procedure that identifies each situation requiring medical attention and how the program will meet the client's medical needs.

501-22-4-2-Assessment : Compliant

501-22-4-2-Comment :

(3) Each program that accepts the services of a student or volunteer shall provide screening, training, and evaluation for each student or volunteer.

501-22-4-3-Assessment : Compliant

501-22-4-3-Comment :

(4) Each volunteer that provides care without a paid staff present in any emergency homeless shelter or domestic violence shelter shall have direct communication access to designated staff and shall have a cleared background screening prior to unsupervised client access.

501-22-4-4-Assessment : Compliant

501-22-4-4-Comment :

(5) Each volunteer shall be informed verbally and in writing of program objectives and the scope of service.

501-22-4-5-Assessment : Compliant

501-22-4-5-Comment :

(6) Each emergency homeless shelter shall be able to provide the following information regarding each client or have documented reasons why each piece of information is not obtainable:

(a) name;

(b) date of birth;

(c) race;

(d) ethnicity;

(e) gender;

(f) veteran status;

(g) disabling condition;

(h) start date;

(i) exit date;

(j) destination;

(k) relationship to head of household;

(l) service location;

(m) prior living situation;

(n) case management log and service plan, where applicable;

(o) information that could affect health, safety, or well-being, include medication needs;

(p) documentation, which shall be updated to include each service and contact and shall be summarily updated at 90-day intervals; and

(q) service plans, which shall emphasize self-sufficiency and identify and refer to applicable sources.

Select Compliance Level

501-22-4-6-Assessment : Compliant

501-22-4-6-Comment :

(7) Documentation for each client shall remain in effect for re-opening for 30 days past the last shelter stay with the exception of single night stays.

501-22-4-7-Assessment : Compliant

501-22-4-7-Comment :

501-22-5 Residential Support Programs. Physical Facility.

(1) Except as otherwise provided in this section, each residential support program shall have at least one bathroom for every ten clients.

501-22-5-1-Assessment : Compliant

501-22-5-1-Comment :

(2) Each domestic violence shelter and emergency homeless shelter may allow family members to share a bathroom. Where a bathroom is shared by more than one family or by children over the age of eight, either the child's parent or program staff shall ensure that client privacy is maintained.

501-22-5-2-Assessment : Compliant

501-22-5-2-Comment :

(3) Each emergency homeless shelter may exceed the bathroom ratio set forth in Subsection R501-22-5(1) if:

(a) each bathroom ratio is approved by either the local authority that determines capacity or the Department of Health;

(b) each bathroom ratio specifically designated for males and females in adult-only nightly shelter settings;

(c) each bathroom is inspected, cleaned, and re-stocked daily and as needed;

(d) the emergency homeless shelter ensures individual privacy in bathing and toileting;

(e) each individual with disabilities has access to at least one locking bathroom or stall; and

(f) each emergency homeless shelter accommodates each parent's needs for changing, toileting, and bathing their children.

Select Compliance Level

501-22-5-3-Assessment : Compliant

501-22-5-3-Comment :

(4) Each emergency homeless setting shall have a policy to identify how to manage emergency overflow when capacity has been reached during extreme weather conditions.

501-22-5-4-Assessment : Compliant

501-22-5-4-Comment :

(5) Each residential support program shall have a policy and procedure that allows and encourages each client to have clean linen at least weekly.

501-22-5-5-Assessment : Compliant

501-22-5-5-Comment :

(6) Each emergency homeless program may have portable beds, cots, or mats to accommodate fluctuating client volume.

501-22-5-6-Assessment : Compliant

501-22-5-6-Comment :

(7) Each residential support program shall provide clean bedding to each client as needed. Bedding shall be laundered at least weekly.

501-22-5-7-Assessment : Compliant

501-22-5-7-Comment :

(8) Each family may be permitted to share bedroom space with rules outlined by the program as described in this rule and in dormitory settings allowed by this rule.

501-22-5-8-Assessment : Compliant

501-22-5-8-Comment :

(9) The following bedroom standards apply to domestic violence shelters, family support centers, temporary homeless youth shelters, emergency homeless family shelters, and children's shelters:

(a) Each program shall provide at least 40 square feet per client in a multiple occupant bedroom. Storage space and the use of one crib for children under two years of age shall not be counted in the square foot requirement as long as the crib does not inhibit access to and from the room.

(b) Each program may use roll away and hide-a-beds as long as the client square foot requirement is maintained.

(c) Each family member is allowed to share a bedroom with another family member. Where a bedroom is shared by more than one family, program staff shall make appropriate arrangements to ensure client privacy.

Select Compliance Level

501-22-5-9-Assessment : Compliant

501-22-5-9-Comment :

(10) Each temporary youth shelter shall ensure that children in a temporary youth shelter with their own children shall have at least 40 square feet per person in a separately enclosed bedroom that houses only children that have their own children. Storage space may not be counted in the square foot requirement.

501-22-5-10-Assessment : Compliant

501-22-5-10-Comment :

(11) Each emergency homeless shelter, temporary homeless youth shelter, and receiving center shall ensure that the standards of this subsection are met.

(a) Dormitory style bedrooms may be permitted with square footage and capacity determinations made by the local fire authority. Capacity determinations shall include any staff present in the facility.

(b) If the local fire authority does not identify capacity, licensing square footage requirements apply.

(c) there is e a policy to identify how to manage overflow when capacity has been reached.

Select Compliance Level

501-22-5-11-Assessment : Compliant

501-22-5-11-Comment :

(12) Each program shall outline policies and procedures regarding:

(a) rules and guidelines for each family or mixed gender sharing the same dormitory space or bedroom, including each individualized bedroom assignment;

(b) securing personal belongings;

(c) responsibility for each client supervising the client's own children;

(d) conflict resolution;

(e) nuisance and disruptive behavior;

(f) housekeeping responsibilities;

(g) daily schedules;

(h) prohibited items; and

(i) search policy.

Select Compliance Level

501-22-5-12-Assessment : Compliant

501-22-5-12-Comment :

(13) Each program that requires a client to provide the client's own laundry supplies and locate a laundromat for laundering shall have a policy to assist each client on a limited basis when the client is unable to provide the client's laundry supplies and locate a laundromat.

501-22-5-13-Assessment : Compliant

501-22-5-13-Comment :

501-22-6 Residential Support Programs. Specialized Services for Clients With Substance Use Disorders.

(1) Each program may not admit anyone who is currently experiencing convulsions, shock, delirium tremens, unconsciousness, or is in a coma.

501-22-6-1-Assessment : Compliant

501-22-6-1-Comment :

(2) Each residential support program potentially serving clients with substance use disorder shall provide evidence of ongoing coordination with the local health authorities regarding managing communicable diseases within the licensed setting.

501-22-6-2-Assessment : Compliant

501-22-6-2-Comment :

(3) Staff shall be informed regarding:

(a) various types of communicable diseases;

(b) recognizing signs and symptoms of communicable diseases;

(c) steps to take when a potential disease is identified or an outbreak occurs; and

(d) screening staff and clients for risk of tuberculosis.

Select Compliance Level

501-22-6-3-Assessment : Compliant

501-22-6-3-Comment :

(4) A licensed substance abuse treatment program shall complete the National Survey of Substance Abuse Treatment annually.

501-22-6-4-Assessment : Compliant

501-22-6-4-Comment :

501-22-7 Residential Support Programs. Specialized Services for Programs Serving Children.

(1) Each residential support program serving only child populations is considered "congregate care" as defined in Section 62A-2-101 and must adhere to each requirement of Sections 62A-2-120, 62A-2-123 and 62A-2-124 for background clearances, policy development and behavior management practices. This subsection applies to youth programs who retain clients past the age of 18 to complete treatment or education.

501-22-7-1-Assessment :

501-22-7-1-Comment :

(2) Each residential support program shall provide clean and safe age appropriate toys for children.

501-22-7-2-Assessment :

501-22-7-2-Comment :

(3) Each residential support program shall provide an outdoor play area enclosed with a five-foot safety fence or enclosure as otherwise required by local ordinances.

501-22-7-3-Assessment :

501-22-7-3-Comment :

(4) Only a custodial parent, legal guardian, or person designated in writing is allowed to remove any child from the program.

501-22-7-4-Assessment :

501-22-7-4-Comment :

(5) Each residential support program shall provide adequate staff to supervise children or be available to monitor parents supervising their own children.

501-22-7-5-Assessment :

501-22-7-5-Comment :

(6) Each residential support program shall comply as required with the Interstate Compact on the Placement of Children (ICPC), including by ensuring the disruption plan is followed when a minor presents at a shelter as a result of a failed ICPC placement in a Utah residential setting.

501-22-7-6-Assessment :

501-22-7-6-Comment :

501-22-8 Residential Support Programs. Specialized Services for Domestic Violence Shelters.

(1) Each domestic violence shelter shall provide to the client, verbally and in writing, and document shelter rules, reasons for termination, and confidentiality issues.

501-22-8-1-Assessment :

501-22-8-1-Comment :

(2) Each parent is responsible for supervising the parent's child while at the shelter. If a parent is required to be away from the shelter or involved in shelter activities without the parent's child, the parent shall arrange for appropriate child-care services.

501-22-8-2-Assessment :

501-22-8-2-Comment :

(3) Each domestic violence shelter action plan shall:

(a) a review and discuss with each victim danger and lethality and discuss the level of the victim's risk of safety assessment;

(b) review the victim's safety plan with each victim;

(c) review the procedure for a protective order and a refer the victim to the appropriate agency or clerk of the court authorized to issue the protective order; and

(d) review supportive services for each client, including medical care, self-sufficiency, day care, legal assistance, financial assistance, and housing assistance.

Select Compliance Level

501-22-8-3-Assessment :

501-22-8-3-Comment :

(4) Each program shall facilitate connecting services to identified resources.

501-22-8-4-Assessment :

501-22-8-4-Comment :

(5) An appropriate referral shall be made and documented when indicated in the client record for victim treatment, psychiatric consultation, drug and alcohol treatment, or other allied service.

501-22-8-5-Assessment :

501-22-8-5-Comment :

(6) Each domestic violence shelter staff completing an action plan shall be supervised by an experienced and trained domestic violence provider.

501-22-8-6-Assessment :

501-22-8-6-Comment :

501-22-9 Residential Support Programs. Specialized Services for Temporary Homeless Youth Shelters.

(1) Each temporary homeless youth shelter shall provide a staff ratio of at least one direct care staff for every ten children.

501-22-9-1-Assessment :

501-22-9-1-Comment :

(2) Each individual admitted shall be under the age of 18.

501-22-9-2-Assessment :

501-22-9-2-Comment :

(3) Each child may be admitted with the child's own biological children.

501-22-9-3-Assessment :

501-22-9-3-Comment :

(4) Each temporary homeless youth shelter may provide shelter to an individual that is older than 18 but younger than 21 under the following conditions:

(a) each individual that is older than 18 but younger than 21 is placed in age and gender appropriate sleeping quarters away from the minor population;

(b) each individual that is older than 18 but younger than 21 remains in the program voluntarily and is made aware of program rules and the repercussions of criminal behavior as an adult;

(c) a ratio of at least one staff to every ten clients is maintained; and

(d) children and individuals who are older than 18 but younger than 21 shall be assessed by a facility staff that is a mental health therapist, as described in Section 58-60-102, to determine whether the individual is at imminent risk of harming themselves or others. Individuals that are assessed as at imminent risk shall be referred to programs qualified to serve them.

Select Compliance Level

501-22-9-4-Assessment :

501-22-9-4-Comment :

(5) Each temporary youth homeless shelter shall document and maintain individualized assessments of risk of harm and justification for each client admitted in the youth setting.

501-22-9-5-Assessment :

501-22-9-5-Comment :

(6) Each temporary homeless youth shelter shall comply with Section 80-5-601 regarding mandatory notifications.

501-22-9-6-Assessment :

501-22-9-6-Comment :

(7) Each temporary homeless youth shelter shall comply with Section 62A-2-108.1 to coordinate educational requirements for each individual.

501-22-9-7-Assessment :

501-22-9-7-Comment :

(8) Each temporary homeless youth shelter shall coordinate and transition each client to a more appropriate setting when the client is unable to remain in the youth setting.

501-22-9-8-Assessment :

501-22-9-8-Comment :

501-22-10 Residential Support Programs. Specialized Services for Emergency Homeless Shelters.

(1) Each emergency shelters shall prioritize the safety of those needing services and emphasize transitioning into a more permanent housing setting.

501-22-10-1-Assessment :

501-22-10-1-Comment :

(2) Each emergency homeless shelter shall ensure that no less than two direct care staff are always present and available. A ratio shall be maintained of no fewer than one staff present for every 40 clients during weekday daytime hours. Ratios may be increased as needed.

501-22-10-2-Assessment :

501-22-10-2-Comment :

(3) An emergency homeless shelter may deviate from the staffing and capacity ratio requirements of Subsection R501-22-10(2) in emergency homeless settings during extreme weather, on weekends, and during sleeping hours if:

(a) the program has a documented chain of command for on-call availability;

(b) the program has a surveillance camera system;

(c) the program has an emergency radio onsite and each staff on-duty are trained regarding how and when it is to be used; or

(d) the program identifies and can rely upon other means of back up support in case of emergency.

Select Compliance Level

501-22-10-3-Assessment :

501-22-10-3-Comment :

(4) Each emergency homeless shelter shall require each adult resident to sign an agreement form at admission which outlines that visitors are allowed on premises to assist with housing, food stamps, assessments, religious, social and other client-specific needs. Each agreement shall outline that participation in any meetings or groups with these visitors is strictly voluntary. Each client signature on the form and voluntary participation in the visitation shall constitute the client's invitation to these visitors in the department licensed setting. Each client that has not signed the agreement shall not participate in any voluntary services offered onsite. Staff in the homeless setting may not be considered a visitor as outlined in this section.

501-22-10-4-Assessment :

501-22-10-4-Comment :

501-22-11 Residential Support Programs. Specialized Services for Programs Serving Clients of the Division of Services for People with Disabilities.

(1) In accordance with the federal Home and Community-Based Services (HCBS) Settings final rule, programs serving HCBS Waiver clients shall complete and adhere to the characteristics of a compliant setting outlined in the residential attestation agreement form and self-assessment survey for each licensed site.

501-22-11-1-Assessment :

501-22-11-1-Comment :

(2) Copies of the residential attestation agreement form and self-assessment shall be located in program documentation and updated as needed.

501-22-11-2-Assessment :

501-22-11-2-Comment :

(3) In the event of a conflict between this rule and the Settings Final Rule the Settings rule shall prevail.

501-22-11-3-Assessment :

501-22-11-3-Comment :

(4) The office shall report any violation of the settings rule to the Office of Quality Design for contract consideration. After 2022, violations of settings rule will constitute a violation of federal law.

501-22-11-4-Assessment :

501-22-11-4-Comment :

501-22-12 Residential Support Programs. Receiving Centers.

(1) Each receiving center may be licensed under multiple license types to be able to assess and triage immediate client needs.

501-22-12-1-Assessment :

501-22-12-1-Comment :

(2) Each receiving center may offer short-term residential support that is intended to mitigate the initial identified problem, stabilize each client, and return each client to the community as quickly and safely as possible.

501-22-12-2-Assessment :

501-22-12-2-Comment :

(3) Each receiving center shall outline in policy and procedure and consumer agreements how each population will be separated and maintained and under which circumstances interactions between populations will be permitted.

501-22-12-3-Assessment :

501-22-12-3-Comment :

(4) Each receiving center shall include individualized clinical documentation for each instance in which a stay lasts longer than 30 days. The individualized clinical documentation shall outline the ongoing need and anticipated time frame during which the client will remain in the receiving center.

501-22-12-4-Assessment :

501-22-12-4-Comment :

(5) Each placement in a receiving center shall be a voluntary alternative to a more restrictive placement. A receiving center may not mandate treatment as a condition to residence.

501-22-12-5-Assessment :

501-22-12-5-Comment :

501-1 General Provisions for Licensing

501-1-4 Licensing Application Procedures.

(1) Initial and Renewal Application.

(a) An applicant may not accept any fee, enter into any agreement to provide a client service, or provide any client service until licensed by the office.

(b) The office shall issue a license for a program only after verifying compliance with any applicable administrative rule or statute.

(c) An applicant or a licensee shall permit the office to have immediate, unrestricted access to:

(i) each site subject to licensing;

(ii) any on and off-site program and client records; and

(iii) each staff and client.

(d) An applicant may withdraw an application for a license at any time during the application process. The applicant must notify the office in writing.

(e) An applicant seeking an initial or renewal license to operate a human services program shall submit:

(i) an application as provided by the office;

(ii) except as described in Subsection R501-1-7(2), the fee required for each category of human service program license applied for;

(iii) except as described in Subsection 62A-2-120(13), a background clearance for each person associated with the licensee as described in Section 62A-2-120 and Rule R501-14;

(iv) any required policy and procedure;

(v) for renewal purposes, rather than submitting each program policy and procedure, the applicant may choose to only submit each policy and procedure that has been modified;

(vi) name and contact information for each responsible decision-maker, including any owner or program director; and

(vii) documentation that verifies the applicant's compliance with, or exemption from, any local government zoning, health, fire, safety, and business license requirement.

(f) A program may not change an approved policy without a new office approval as described in Section R501-1-9.

(g) If a program fails to submit a renewal application at least 30-days before the expiration date of the current license, the license may expire.

(h) A residential treatment program applying for an initial license shall submit proof that the program served notice of intent to operate as described in Section 62A-2-108.2.

501-1-4-1-Assessment : Compliant

501-1-4-1-Comment :

(2) Application Expiration

(a) Except for a foster home application, an initial application that remains incomplete shall expire one year from the date of application.

(b) An initial application for a foster home that remains incomplete shall expire 90 days after the date of application unless extended by the office.

(c) An expired initial application is void. The program must submit a new initial application and applicable fees for each category of license requested.

Select Compliance Level

501-1-4-2-Assessment : Compliant

501-1-4-2-Comment :

(3) The office may deny the initial application or place a penalty on a renewal license if:

(a) the program failed to achieve or maintain compliance with each statute, rule, or ordinance related to the program;

(b) the office reasonably determines that the program is not likely to operate in compliance with any statute, rule, or ordinance;

(c) the office finds a program director, owner, or any individual involved in the program's billing process on the office of Inspector General's List of Excluded Individuals and Entities; or

(d) the office finds that a program maintains association with any individual with a license revoked by the office within the five-year period before to the date on the program's application.

Select Compliance Level

501-1-4-3-Assessment : Compliant

501-1-4-3-Comment :

(4) The office shall consider rule violation history when determining whether a program is likely to comply with any statute, rule, or ordinance.

501-1-4-4-Assessment : Compliant

501-1-4-4-Comment :

(5) The office shall consider misleading information that has been presented by the program to the office, program clients, prospective clients, or public when determining whether a program is likely to comply with statute, rule, or ordinance.

501-1-4-5-Assessment : Compliant

501-1-4-5-Comment :

(6) A denied applicant may not reapply for a minimum of a three-month period beginning on the date of denial.

501-1-4-6-Assessment : Compliant

501-1-4-6-Comment :

501-1-5 General Provisions for Licensing. Licensing Determinations.

(1) The office may place an individualized parameter on a program license to promote the health, safety, and welfare of any client. Such parameters may include:

(a) an age restriction;

(b) an admission or placement restriction; or

(c) any other parameter specific to an individual site or program.

Select Compliance Level

501-1-5-1-Assessment : Compliant

501-1-5-1-Comment :

(2) A license certificate shall state the name, the site address, the license category, the maximum client capacity, any specific parameter, and the effective date of the license.

501-1-5-2-Assessment : Compliant

501-1-5-2-Comment :

(3) The office may not issue an initial license to a site associated with a parent program if any other license associated with the parent program is under penalty or has a pending appeal.

501-1-5-3-Assessment : Compliant

501-1-5-3-Comment :

(4) A program may apply for a two-year license if:

(a) the program is not a residential or foster care program;

(b) the program is in good standing with the office for the two consecutive licenses issued by the office immediately before the date of application;

(c) the office reasonably determines that the program is likely to maintain good standing for a two-year period; and

(d) the program submits twice the annual fee required for each category of license sought.

Select Compliance Level

501-1-5-4-Assessment : Compliant

501-1-5-4-Comment :

(5) License Expiration

(a) An expired license is void and may not be renewed unless an application and fees are submitted for an initial license. The program must be granted an initial license before providing any services, except as allowed in Subsection R501-1-5-5(b).

(b) A license expires at midnight on the last day of the same month the license was issued, one year after the effective date on the license, except when:

(i) the office revokes the license before expiration;

(ii) the office extends the license beyond the date of expiration;

(iii) the licensee relinquished the license;

(iv) the licensee requested a shortened license expiration time frame; or

(v) the license is issued as a two-year license. A two-year license expires at midnight on the last day of the same month the license was issued, two years after the effective date on the license.

(c) Except for an action necessary to maintain the health and safety of a client while transitioning out of the program or obtaining a new license to operate, a program with an expired license may not accept any client, fee, enter any agreement to provide a client service, or provide any client service.

Select Compliance Level

501-1-5-5-Assessment : Compliant

501-1-5-5-Comment :

(6) Except as described in Subsection R501-1-5(6)(c), the office may extend a current license for a maximum 90-day period after the license expiration date.

(a) A program must submit a renewal application and applicable fee before the expiration date on the license.

(b) Except as noted in subsection (c) the office may extend a license only once.

(c) The office may extend a current or extended license that is not in good standing with a penalty.

(d) The office shall grant a renewal license if the program remedies any non-compliance to the satisfaction of the office.

(e) The office shall reduce the license period for any renewal license granted immediately after an extension equal to the time period of the extension.

Select Compliance Level

501-1-5-6-Assessment : Compliant

501-1-5-6-Comment :

(7) A licensee wishing to voluntarily relinquish a license shall submit a written notice to the office. Voluntary relinquishment of a license may not be accepted by the office if a notice of agency action revoking the license has been initiated.

501-1-5-7-Assessment : Compliant

501-1-5-7-Comment :

501-1-6 General Provisions for Licensing. Program Changes.

(1) Name Change

(a) A licensee may not change the name of a program or site without a renewal application submitted to the office.

(i) a name change with no impact on clients, programming or daily operations will not require a renewal fee.

(b) The licensee shall submit updated program documentation reflecting the new name to the office before making the name change public.

(c) The office may link the former name of the program to the new name on the licensing database, on each license certificate, and public website, for a two-year period after the name change.

Select Compliance Level

501-1-6-1-Assessment : Compliant

501-1-6-1-Comment :

(2) Relocation

(a) A licensee may change the location of a program.

(b) The licensee may not serve a client at any new program location without a license.

(c) Before moving any program to a new location, the licensee shall submit a renewal application as described in Subsection R501-1-4(1) at least 30 days before moving and an updated license for the new site must be issued. The application shall also include proof of:

(i) a business license at the new site; and

(ii) insurance coverage at the new site.

(d) A foster home may transfer a current license a new site only after:

(i) submitting a request to relocate to the office at least 30 days before moving to the new site; and

(ii) the office inspects and approves licensure at the new site; which approval shall occur within two weeks if a foster child is placed in a foster home or within 30 days if there are no current foster placements.

(e) a program moving only an administrative site that does not serve clients shall only be required to submit a renewal application with no fees unless the Office finds they meet requirements outlined in R501-1-6-7.

(f) If a foster child is placed in a foster home, it is the responsibility of the licensed foster parent to ensure the health and safety of the foster child during the transfer to the new site.

(g) Except as described in Subsection R501-1-6(2), moving from a licensed site voids that site's license.

Select Compliance Level

501-1-6-2-Assessment : Compliant

501-1-6-2-Comment :

(3) Capacity Change

(a) A licensee seeking to increase the maximum client capacity of a program shall submit a renewal application requesting the new capacity.

(b) The program may not serve additional clients until the program pays the renewal fee for a license renewal as required by the rules of the human service program category and the office issues an updated license.

Select Compliance Level

501-1-6-3-Assessment : Compliant

501-1-6-3-Comment :

(4) Add New License Category

(a) A program may request to add a new license category to an existing licensed site by submitting an initial application for the additional license and fees for an initial license.

(b) Each requirement for initial licensure must be verified.

Select Compliance Level

501-1-6-4-Assessment : Compliant

501-1-6-4-Comment :

(5) Add New Location

(a) A program may add an additional site of service by submitting an application and fees and receiving an initial license.

(b) Each requirement for initial licensure must be verified.

Select Compliance Level

501-1-6-5-Assessment : Compliant

501-1-6-5-Comment :

(6) Ownership Changes

(a) A program anticipating, or undergoing a change of ownership, shall submit in writing, before the change:

(i) any change to programming or service;

(ii) a declaration regarding responsibility for records and records retention to include an agreement, signed by both current and prospective owners and program directors, detailing how records will be retained and remain available to the office in accordance with licensing rules regardless of whether the program remains licensed;

(iii) names and contact information of any new directors or owners;

(iv) documentation of continuous insurance coverage; and

(v) an updated business license.

(b) The status of a license at the time of a change of ownership shall continue.

Select Compliance Level

501-1-6-6-Assessment : Compliant

501-1-6-6-Comment :

(7) The office may require a new initial application and fees for each license category for any substantial change under this section, which may include:

(a) a substantial change resulting in direct client impact;

(b) any change to programming;

(c) any change in the population served;

(d) any severed tie with a previous owner; or

(e) any disruption in the continuity of record retention.

(f) requirement of OL to perform an onsite inspection and complete a comprehensive compliance review

Select Compliance Level

501-1-6-7-Assessment : Compliant

501-1-6-7-Comment :

501-1-7 License Fees.

(1) The office shall collect licensing fees as described in Section 62A-2-106, and Title 63J, Chapter 5, Federal Funds Procedures Act.

501-1-7-1-Assessment : Compliant

501-1-7-1-Comment :

(2) No licensing fee shall be required from a foster home or a division or office of the department.

501-1-7-2-Assessment : Compliant

501-1-7-2-Comment :

(3) The office is not required to perform any on-site visit or document review until the person applying for a license pays the licensing fee.

501-1-7-3-Assessment : Compliant

501-1-7-3-Comment :

(4) If a license is not granted by the office, a license application fee expires 12 months after the date of application.

501-1-7-4-Assessment : Compliant

501-1-7-4-Comment :

(5) A fee paid by a licensee may not be transferred, prorated, reduced, waived, or refunded. Any cost incurred by the applicant in preparation for, or maintenance of licensure is the sole responsibility of the applicant.

501-1-7-5-Assessment : Compliant

501-1-7-5-Comment :

(6) An applicant must pay an initial license fee for each category of human services program offered at each program site.

501-1-7-6-Assessment : Compliant

501-1-7-6-Comment :

(7) An applicant must pay a renewal license fee and any capacity fee for each license that is renewed at each program site.

501-1-7-7-Assessment : Compliant

501-1-7-7-Comment :

(8) A capacity fee is calculated based on the maximum licensed client capacity of the human service program.

501-1-7-8-Assessment : Compliant

501-1-7-8-Comment :

(9) A license with more than one building, unit, or suite located at a single site may choose between the following methods of assessing a fee and issuing a license:

(a) each category of license includes each on-site building, unit, or suite; or

(b) each category of license is issued separately for each individual on-site building, unit, or suite.

Select Compliance Level

501-1-7-9-Assessment : Compliant

501-1-7-9-Comment :

501-1-8 Variances.

(1) A licensee may not deviate from any administrative rule before receiving written approval signed by the director, or the director's designee.

501-1-8-1-Assessment : Compliant

501-1-8-1-Comment :

(2) The director, or the director's designee, may grant a variance after determining that a variance is not likely:

(a) to compromise client health and safety; or

(b) provide an opportunity for abuse, neglect, exploitation, harm, mistreatment, or fraud.

Select Compliance Level

501-1-8-2-Assessment : Compliant

501-1-8-2-Comment :

(3) A licensee seeking a variance must submit a written request to their licensing specialist that includes:

(a) the rule for which the variance is requested;

(b) the reason for the request;

(c) how the variance provides for the best interest of the client;

(d) any procedures that will be implemented to ensure the health and safety of each client; and

(e) the proposed start date and end date of the variance.

Select Compliance Level

501-1-8-3-Assessment : Compliant

501-1-8-3-Comment :

(4) The written request described in Subsection R501-1-8(3) must be submitted at least 30 days before the proposed start date unless the licensee documents a need to expedite the request.

501-1-8-4-Assessment : Compliant

501-1-8-4-Comment :

(5) The office shall review the variance and notify the licensee of the approval, approval with conditions, or denial of the variance, in writing, within 30 days from receipt of the request.

501-1-8-5-Assessment : Compliant

501-1-8-5-Comment :

(6) The licensee shall comply with the terms of a written variance, including any conditions or modifications contained within the approved written variance.

501-1-8-6-Assessment : Compliant

501-1-8-6-Comment :

(7) A variance expires on the end date specified in the approval notice. Terms of the variance are no longer permitted by the office after the end date.

501-1-8-7-Assessment : Compliant

501-1-8-7-Comment :

(8) The office may renew a variance if the program justifies the request and ensures the ongoing health and safety of each client.

501-1-8-8-Assessment :

501-1-8-8-Comment :

R501-1-9. Required Approvals.

(1) As described in Subsection 62A-2-106(1), the office shall review and approve the following policies and procedures before program implementation by each licensee:

(a) any sex and gender discrimination policy as described in Section 62A-2-124; and

(b) any behavior management, suicide prevention, restraint, or seclusion policy or procedure used in a congregate care program as described in Section 62A-2-123 and Rule R501-1.

Select Compliance Level

501-1-9-1-Assessment :

501-1-9-1-Comment :

(2) Each sex and gender discrimination policy must include the required content and language as described in Subsection R501-1-23(3)(s) as it pertains to both staff and client protections.

501-1-9-2-Assessment :

501-1-9-2-Comment :

(3) The office shall:

(a) provide written approval or denial of any policy and curriculum within 30 days of the date of submission;

(b) provide written feedback on any denied policy;

(c) re-review any denied policy or curriculum within 14 days of re-submission; and

(d) issue a written approval for any policy requiring approval by this section.

Select Compliance Level

501-1-9-3-Assessment :

501-1-9-3-Comment :

(4) The licensee shall submit any change to a policy or curriculum that has been approved by the office to the office for approval before implementing the proposed change.

501-1-9-4-Assessment :

501-1-9-4-Comment :

(5) The office may withdraw approval and deny any previously approved policy or curriculum at any time or by providing written feedback to the program as described in Subsection R501-1-9(3).

501-1-9-5-Assessment :

501-1-9-5-Comment :

501-1-10 Monitoring.

(1) Except as described in Section 62A-2-123 for a congregate care program, the office shall conduct at least one annual on-site inspection in each program.

501-1-10-1-Assessment :

501-1-10-1-Comment :

(2) The office may conduct as many inspections, announced or unannounced, as necessary to monitor compliance, investigate alleged violations, monitor plans of correction or penalty compliance, or to gather information for license renewal.

501-1-10-2-Assessment :

501-1-10-2-Comment :

(3) An on-site inspection shall take place during regular business hours.

501-1-10-3-Assessment :

501-1-10-3-Comment :

(4) An applicant or licensee may not restrict the office's access to the site, client, staff, or any program records.

501-1-10-4-Assessment :

501-1-10-4-Comment :

(5) A licensee and licensee's staff may not compromise the integrity of the office's information gathering process by withholding or manipulating information or influencing any specific response of staff or clients.

501-1-10-5-Assessment :

501-1-10-5-Comment :

(6) The office shall consider each on-site inspection during the renewal or denial of the license application at the end of the license period.

(a) Pursuant to Subsection 62A-2-118(1), the office may accept another government entity's inspection results completed for a program during the effective license period or within the preceding quarter to the current license period to identify compliance or non-compliance with relevant rules.

(b) The office may review and consider any report from an accreditation agency or any other entity for each inspection conducted during or before the effective license period to determine compliance or violation of licensing rule.

(c) If a conflict arises between an oversight entity's requirement and rule, the program shall request a rule variance from the office.

Select Compliance Level

501-1-10-6-Assessment :

501-1-10-6-Comment :

(7) Except for a foster home, the licensee shall make a copy of any inspection report available to the public upon request as described in Subsection 62A-2-118(5).

501-1-10-7-Assessment :

501-1-10-7-Comment :

(8) The office may adopt a written inspection report from a local government, certifying entity, contracting entity, or accrediting entity if the report offers information about the licensee's compliance with a licensing requirement.

501-1-10-8-Assessment :

501-1-10-8-Comment :

(9) The licensee shall allow the office to access any program record or staff at an administrative location that is not located at the licensed site.

501-1-10-9-Assessment :

501-1-10-9-Comment :

501-1-11 Investigations of Alleged Violations.

(1) Unlicensed Programs

(a) The office shall investigate each report of an unlicensed human service program.

(b) Investigation of an unlicensed human service program may include interviewing any individual or neighbor at the site or gathering information from any source that will aid the office in determining whether the site should be licensed.

(c) If an unlicensed human services program that requires licensure fails to become licensed within 30 days or other Office approved time-frame and continues to operate, the office shall refer the program to the office of the Attorney General, and the County Attorney.

(d) The office may penalize each site operated by a licensed program if the program adds or operates an unlicensed site that requires licensure.

Select Compliance Level

501-1-11-1-Assessment :

501-1-11-1-Comment :

(2) Licensed Program Complaints and Critical Incidents

- (a) The office may investigate any critical incident or complaint that alleges a licensing violation regarding a licensed human services program.
- (b) The office accepts a complaint about a licensee from any source, including the office website or complaint email address.
- (c) The office may decline to investigate a complaint that is anonymous; unrelated to a current condition of the program; or not an alleged violation of a rule or statute.
- (d) A critical incident that involves a client or on duty staff that occurs in a licensed setting or under the direct responsibility and supervision of the program shall be reported by the licensee as follows:
 - (i) a report shall be made to the office within one business day;
 - (ii) a notification shall be made to legal guardian of the involved client within a 24-hour period that begins at the time of the incident; and
 - (iii) if the critical incident involves a client or service to a youth currently in the custody of the department, the licensee shall make an immediate live-person verbal notification to the involved division.
- (e) An initial critical incident report shall be made in writing and include the following:
 - (i) name of provider and names or unique initials of each involved staff, witnesses and clients with the ability to identify each set of unique initials upon request by the office;
 - (ii) date, time, and location of the incident, and date and time of incident discovery, if different from time of incident;
 - (iii) descriptive summary of incident;
 - (iv) any action taken;
 - (v) any action that the program plans to take at the time of the report; and
 - (vi) identification of department contract status.

(f) Upon request by the office, the licensee shall collect, maintain, and submit original witness statements and supporting documentation, including video footage if available, regarding each critical incident.

Select Compliance Level

501-1-11-2-Assessment :

501-1-11-2-Comment :

(3) Investigative Process

(a) An in-person or electronic investigation may include:

(i) a review of any on or off-site record;

(ii) interview of each licensee, witness, client, or staff;

(iii) gathering information from any collateral party; and

(iv) a site inspection.

(b) The office shall prioritize an unlicensed program, a complaint regarding a licensed program, and a critical incident following an assessment of risk to client health and safety as follows:

(i) an allegation identified by the office as a potential imminent risk to the health and safety of a client requires an initial on-site contact by the office within three business days of the report date; or

(ii) any other allegations that require the office initiate an investigation within ten business days of the report date.

(c) The office may use law enforcement, Child or Adult Protective services, or any other protection agency to meet a priority on-site response.

(d) A licensee and staff shall cooperate in any investigation.

(e) The office may report any allegation or evidence of abuse, neglect, exploitation, mistreatment, illegal activity or fraud to a client, clients' legal guardian, or any entity determined necessary by the office.

(f) If a program sells or arranges for client insurance coverage, the program must:

(i) inform the client in writing of the program's role and responsibility;

(ii) provide the insurer with any program provider record;

(iii) contact and cooperate with the insurance department during any dispute regarding a service or supply billed; and

(iv) not provide unlawful substance abuse patient brokering as described in Subsection 62A-2-116(5).

Select Compliance Level

501-1-11-3-Assessment :

501-1-11-3-Comment :

501-1-12 License Violations.

(1) When the office finds evidence of a violation of statute or rule, the office shall do one of the following:

(a) provide written notification of each violation requiring the licensee to correct each violation with a dated request for remediation, if applicable;

(b) provide written notification of each violation and request a licensee to submit a plan of correction in response to a written notification of a violation or pattern of similar violations over time; or

(c) issue a penalty if the office determines that a violation is serious enough to merit a penalty without first issuing a request for a plan of correction.

Select Compliance Level

501-1-12-1-Assessment :

501-1-12-1-Comment :

(2) The office may consider the chronicity, severity, and pervasiveness of a violation when determining one of the following agency actions:

(a) notification of a violation;

(b) request for a plan of correction; or

(c) issue a formal penalty.

Select Compliance Level

501-1-12-2-Assessment :

501-1-12-2-Comment :

(3) A repeated violation of rule or statute or failure to comply with a condition of a notice of agency action may elevate the penalty level assessed.

501-1-12-3-Assessment :

501-1-12-3-Comment :

(4) When the office issues a request for a plan of correction, a licensee shall submit a written plan of correction to the office within ten business days from the date of the request and the plan of correction shall include:

(a) a statement of each violation identified by the office;

(b) a detailed description of how the licensee will correct each violation and prevent an additional violation;

(c) the date by which the licensee will achieve compliance with administrative rule and statute; and

(d) describe the involvement of each program owner and director, including each foster parent, if involving a licensed or certified foster home.

Select Compliance Level

501-1-12-4-Assessment :

501-1-12-4-Comment :

(5) The office shall review plans of correction submitted to the office and either inform the licensee that the plan is approved or inform the licensee that the plan is not approved and provide explanation.

501-1-12-5-Assessment :

501-1-12-5-Comment :

(6) If a plan of correction is not approved, the office may permit a licensee to amend and resubmit its plan within five additional business days.

501-1-12-6-Assessment :

501-1-12-6-Comment :

(7) A notification of violation or a request for a plan of correction is not a penalty.

501-1-12-7-Assessment :

501-1-12-7-Comment :

(8) A program may choose to refuse the notification of violation or plan of correction process and preserve the program's appeal rights by instead requesting a penalty.

501-1-12-8-Assessment :

501-1-12-8-Comment :

(9) The office may issue a penalty for a violation if the licensee fails to submit and comply with an approved plan of correction.

501-1-12-9-Assessment :

501-1-12-9-Comment :

(10) The office may provide a written notice of agency action issuing the following penalties:

(a) a conditional license;

(b) a suspended license for up to a three-year period; or

(c) a revoked license.

Select Compliance Level

501-1-12-10-Assessment :

501-1-12-10-Comment :

(11) A conditional license allows a program that is in the process of correcting a violation to continue operation, subject to each condition established by the office. Failure to meet each term, condition, and time frame outlined in the notice may result in further penalty action or denial of the renewal license application.

501-1-12-11-Assessment :

501-1-12-11-Comment :

(12) When a license has been suspended, Subsection R501-1-12(14) applies, except as described in Subsection R501-1-12(13).

501-1-12-12-Assessment :

501-1-12-12-Comment :

(13) If the placing department entity approves and elects to allow the foster child to remain in the placement, a suspended foster care provider may continue caring for a foster child currently placed at the time of suspension.

501-1-12-13-Assessment :

501-1-12-13-Comment :

(14) A program that has had its license suspended or revoked shall:

(a) not accept new clients;

(b) only provide any service necessary to maintain client health and safety during the client's transition out of the program;

(c) subject to Subsection R501-1-12(13), develop and comply with a plan to transition each client out of the program and into an equivalent, safe, currently licensed programs or into the custody of the client's legal guardian; and

(d) maintain program staffing and health and safety needs of each client while an appeal of the suspension or revocation is pending.

Select Compliance Level

501-1-12-14-Assessment :

501-1-12-14-Comment :

(15) The office shall maintain a record of each licensee with a revoked license for a five-year period. An individual identified in the record shall not associate with any other department licensed program during that five-year period.

501-1-12-15-Assessment :

501-1-12-15-Comment :

(16) when a child placing agency's license is suspended or revoked, care and control of placed children shall be arranged in accordance with 62A-4a-602(2)(b)

501-1-12-16-Assessment :

501-1-12-16-Comment :

(17) A licensee shall not employ, contract with, or in any way associate with a person identified on the record created in Subsection R501-1-12(15). A program in violation of this provision shall be subject to immediate penalty.

501-1-12-17-Assessment :

501-1-12-17-Comment :

(18) The office may place a condition in the notice of agency action to protect the health and safety of clients. A condition included in the notice of agency action takes effect on the date of notice.

501-1-12-18-Assessment :

501-1-12-18-Comment :

(19) Except when instructed by the office, a licensee shall post the notice of agency action on-site, and on the homepage of each of each program website, where it can be easily reviewed by each client, guardian of a client, and visitor within five business days, and shall remain posted until the resolution of the penalty.

501-1-12-19-Assessment :

501-1-12-19-Comment :

(20) A licensee shall notify each client, guardian, and prospective client of a notice of agency action issued by the office within five business days of receiving notice. Any prospective client must be notified for as long as the notice of agency action is in effect.

501-1-12-20-Assessment :

501-1-12-20-Comment :

(21) If an appeal of a revocation, suspension or conditional license that restricts admission is pending, a licensee shall not accept any new client as outlined on the notice of agency action without prior written authorization from the office.

501-1-12-21-Assessment :

501-1-12-21-Comment :

R501-1-13. Program Administrative and Direct Service Requirements.

(1) A program shall transparently identify services to the office, public, potential client, parent, or guardian regarding:

(a) current and accurate contact information;

(b) the complaint reporting and resolution process;

(c) a description of each service provided;

(e) each program requirement and expectation;

(f) eligibility criteria outlining behavior, diagnosis, situation, population, and age that can be safely served;

(i) an outline of which behaviors and presenting issues would be reason for discharge or exclusion from the program; and

(ii) the program shall not take placement of a child whose needs exceed the scope or ability of the program to reasonably manage

(g) each cost, fee, and expense for a service and refund policy; and

(h) identification of each non-clinical, extracurricular, or supplemental service offered or referred.

Select Compliance Level

501-1-13-1-Assessment : Compliant

501-1-13-1-Comment :

(2) The following shall be posted in conspicuous places where each visitor, staff, and client may view:

(a) abuse reporting laws as described in Sections 62A-4a-403 and 62A-3-305;

(b) civil rights notice;

(c) Americans with Disabilities Act notice;

(d) the program license;

(e) any office notice of agency action; and

(f) a client rights poster.

Select Compliance Level

501-1-13-2-Assessment : Compliant

501-1-13-2-Comment :

(3) Program administration shall maintain compliance with or documentation of an exemption from any of the following requirements:

(a) a food handler permits for any person preparing meals for any other person;

(b) business licenses;

(c) capacity determinations, which capacity shall include each staff and client on premises and may not exceed the capacity limits placed by local authorities;

(d) fire clearance, if conducted separately from a business license;

(e) licensure and registration of any vehicles used to transport clients.

Select Compliance Level

501-1-13-3-Assessment : Compliant

501-1-13-3-Comment :

(4) The office may not issue a license in good standing to a program whose local clearances are under dispute.

501-1-13-4-Assessment : Compliant

501-1-13-4-Comment :

(5) Program administration shall maintain:

(a) proof of financial viability of the program as verified by a financial professional;

(b) general liability insurance;

(c) professional liability insurance;

(d) vehicle insurance;

(e) fire insurance; and

(f) additional insurance as required to cover each program activity.

Select Compliance Level

501-1-13-5-Assessment : Compliant

501-1-13-5-Comment :

(6) Program administration shall ensure:

(a) each entity associated with the licensee read, understand, sign, and follow the current department code of conduct;

(b) current staff and client lists are available at each licensed site;

(c) the organizational and governance structure of the program, this includes:

(i) line of authority and responsibility;

(ii) a job description, including each duty and qualification for each job title; and

(iii) notification to the office of any program changes as described in Section R501-1-6;

(d) the program implements and follows a quality improvement plan that incorporates, at a minimum, client and staff grievances, feedback, and trends in licensing violations and incident reports;

(e) the program provides an interpreter or refers each client to appropriate resources as necessary to communicate with the client;

(f) at least one CPR and First Aid trained or certified staff member is available when staff and clients are present together;

(g) the program maintains an opioid overdose reversal kit on-site with on duty staff trained in its use if the program is serving, or is likely to serve, a client with a substance use disorder; and

(h) the program provides trainings and monitors staff to ensure compliance regarding program policy and procedures including:

(i) the needs of each client;

(ii) licensing rule;

(iii) client rights as described in Section R501-1-27;

(iv) department code of conduct;

(v) incident reporting;

(vi) program emergency response plan; and

(vii) CPR and first aid.

Select Compliance Level

501-1-13-6-Assessment : Compliant

501-1-13-6-Comment :

(7) A program serving education entitled children, as that term is defined in Section 62A-2-108.1, shall comply with Section 62A-2-108.1 regarding coordination of educational services to include completion of youth education forms at initial and renewal licensure.

501-1-13-7-Assessment : Compliant

501-1-13-7-Comment :

(8) A program providing school on-site shall:

(a) maintain the established staff to client ratio with behavioral intervention trained staff in the school setting;

(b) be recognized as in good standing by an educational accreditation organization such as the State Board of Education or the National School Accreditation Board; and

(c) ensure each youth is taught at grade level.

Select Compliance Level

501-1-13-8-Assessment : Compliant

501-1-13-8-Comment :

(9) Clinical and medical staff are licensed or certified in good standing and any unlicensed staff are appropriately supervised as described in Title 58, Occupations and Professions.

501-1-13-9-Assessment : Compliant

501-1-13-9-Comment :

(10) A program that utilizes telehealth for treatment shall do so within the scope of their professional licensure in accordance with 26-60 for health and 58-60 and 58-60a for mental health and comply with each applicable rule, as determined by the Office, under title R501.

501-1-13-10-Assessment : Compliant

501-1-13-10-Comment :

R501-1-14. Residential Program Additional Administration and Direct Services Requirements.

(1) A program providing residential service shall:

(a) demonstrate compliance with Section 62A-2-125;

(b) ensure each staff shift list remains current and available to the office upon request;

(c) ensure access to a medical clinic or a medical professional familiar with the program and population served; and

(d) provide a separate space for clients who are sick.

Select Compliance Level

501-1-14-1-Assessment : Compliant

501-1-14-1-Comment :

(2) A program providing residential service to youth who have been placed in Utah from outside of Utah shall demonstrate compliance with Title 62A, Chapter 4a, Part 7, Interstate Compact on Placement of Children.

501-1-14-2-Assessment : Compliant

501-1-14-2-Comment :

(3) A congregate care program serving youth may allow an individual turning 18 to remain in the program as described in Subsection 62A-2-106(1) if:

(a) the individual remains in the custody of a State entity or the individual was admitted and continuously resided in the program for at least 30 days before the individual's 18th birthday;

(b) the program has a documented need for the individual to remain in the program;

(c) the program maintains responsibility for discharge to an appropriate setting when clinically appropriate and no later than the day an individual reaches 19 years of age;

(d) the program outlines a policy regarding the protection of younger clients by supervising or separating 18-year-old individuals from youth who are more than two years younger; and

(e) the individual signs a consent document outlining:

(i) the individual is consenting to remain in the program voluntarily and understands the individual is not required to remain against their will;

(ii) that any criminal offenses committed may result in being charged as an adult; and

(iii) that if the individual is involved in any critical incidents posing a risk to the health and safety of other program residents they may be discharged from the program.

Select Compliance Level

501-1-14-3-Assessment : Compliant

501-1-14-3-Comment :

(4) A congregate care program shall ensure facilitation of weekly confidential communication with family in accordance with Section 62A-2-123.

(a) a congregate care program may only modify the frequency or form of the confidential communication requirement if the program submits a modification request that demonstrates the following to the Office:

(i) the program operates in an area of limited or unreliable phone accessibility or coverage;

(ii) there is significant risk of harm or danger to client safety by providing youth with unsupervised telephone access;

(iii) the program offers an alternative that satisfies the requirement of weekly confidential two-way communication;

(iv) parent/guardian authorization is obtained to receive alternate means of communication when voice to voice is unavailable; and

(v) as soon as it can safely be arranged, voice to voice confidential communication will be offered; or

(vi) extenuating circumstances exist outside the individual treatment plans that are prohibitive to offering voice to voice communication.

(b) A modification to voice to voice communication is a blanket program-wide approval. Individual modifications may only be made in accordance with 62A-2-123 and require individualized documentation, or individualized client treatment plan

(i) individualized documentation is not permissible if it is a blanket statement or practice applied to all treatment plans.

(c) a modification plan for confidential communication is only permitted with written approval from the Director of the Office of Licensing.

(d) If any of the provisions of the approved modification change, this modification must be re-approved.

Select Compliance Level

501-1-14-4-Assessment : Compliant

501-1-14-4-Comment :

(5) Before allowing a direct care staff to work unsupervised they must have an approved background clearance and be trained in the following:

(a) behavior management policy and curriculum including crisis intervention, appropriate use of restraint and seclusion, and de-escalation techniques;

(b) which practices are prohibited for congregate care programs by Section 62A-2-123;

(c) the clinical needs of each of the clientele;

(d) client rights;

(e) department code of conduct; and

(f) incident reporting.

Select Compliance Level

501-1-14-5-Assessment : Compliant

501-1-14-5-Comment :

(6) Direct care staff must be trained in the following within six months of hire:

(a) CPR; and

(b) first aid.

Select Compliance Level

501-1-14-6-Assessment : Compliant

501-1-14-6-Comment :

R501-1-15. Program Physical Facilities and Safety.

(1) Each program shall ensure the appearance and cleanliness of the building and grounds are maintained and free from health and fire hazards.

501-1-15-1-Assessment : Compliant

501-1-15-1-Comment :

(2) Each program shall ensure that all appliances, plumbing, electrical, HVAC, and furnishings are maintained in operating order and in a clean and safe condition.

501-1-15-2-Assessment : Non Compliant

501-1-15-2-Comment : The provider was out of compliance with this rule by not maintaining electrical wires in a safe way. During the inspection, there were multiple uncapped wires and open electrical outlets throughout the home.

(3) Each program shall accommodate clients with disabilities as needed or appropriately refer to comparable services.

501-1-15-3-Assessment : Compliant

501-1-15-3-Comment :

(4) Each program shall ensure that fire drills in non-outpatient programs shall be conducted and documented at least quarterly and program administration shall provide and document feedback regarding response time and process.

501-1-15-4-Assessment : Compliant

501-1-15-4-Comment :

(5) Each program shall ensure that a 911 recognizable phone is always on-site with clients.

501-1-15-5-Assessment : Compliant

501-1-15-5-Comment :

(6) Each program shall ensure that bathroom facilities for staff and clients allow for individual privacy and afford reasonable accommodation based on gender identity.

501-1-15-6-Assessment : Compliant

501-1-15-6-Comment :

(7) Each program shall ensure that each bathroom shall be properly equipped with toilet paper, paper towels or a dryer, and soap.

501-1-15-7-Assessment : Compliant

501-1-15-7-Comment :

(8) Each program shall ensure that each bathroom is ventilated by mechanical means or equipped with a window that opens.

501-1-15-8-Assessment : Compliant

501-1-15-8-Comment :

(9) Each program shall maintain medications and potentially hazardous items on-site lawfully, responsibly, and with consideration of the safety and risk level of the population served. This shall include locked storage for each medication and hazardous chemical.

501-1-15-9-Assessment : Compliant

501-1-15-9-Comment :

(10) Each program shall ensure that non-prescription medications, if stored on-site, are stored in original manufacturer's packaging together with the manufacturer's directions and warnings.

501-1-15-10-Assessment : Compliant

501-1-15-10-Comment :

(11) Each program shall ensure that prescription medications, if stored on-site, are stored in original pharmacy packaging or individual pharmacy bubble pack together with the pharmacy label, directions, and warnings.

501-1-15-11-Assessment : Compliant

501-1-15-11-Comment :

(12) Each program shall maintain a fully supplied first aid kit as recommended by the American Red Cross.

501-1-15-12-Assessment : Compliant

501-1-15-12-Comment :

R501-1-16. Residential Program Additional Facilities and Safety Requirements.

(1) Each residential program shall ensure designated space is available for records, administrative work, and confidential phone calls for clients.

501-1-16-1-Assessment : Compliant

501-1-16-1-Comment :

(2) Each residential program shall ensure bedroom assignments shall be made in accordance with each agency policy and individualized assessment described in Section 62A-2-124.

501-1-16-2-Assessment : Compliant

501-1-16-2-Comment :

(3) Each residential program shall ensure that live-in staff have separate living spaces with a bathroom that is separate from client bathrooms.

501-1-16-3-Assessment : Compliant

501-1-16-3-Comment :

(4) Each residential program shall ensure that each bedroom designated for clients shall be comparable to other similarly utilized bedrooms with similar access, location, space, finishings, and furnishings.

501-1-16-4-Assessment : Compliant

501-1-16-4-Comment :

(5) Dormitory space is only allowed in an emergency homeless shelter or a program serving only adults.

501-1-16-5-Assessment : Compliant

501-1-16-5-Comment :

(6) Each residential program shall ensure that each client is not locked in a bedroom.

501-1-16-6-Assessment : Compliant

501-1-16-6-Comment :

(7) Each residential program shall ensure that each mirror or safety mirror is secured to the bathroom wall at a convenient height.

501-1-16-7-Assessment : Compliant

501-1-16-7-Comment :

(8) Each residential program shall ensure that each bathroom is placed to allow access to each client without disturbing any other client during sleeping hours.

501-1-16-8-Assessment : Compliant

501-1-16-8-Comment :

(9) Each residential program shall ensure that each bath or shower allows for individual privacy.

501-1-16-9-Assessment : Compliant

501-1-16-9-Comment :

(10) Each residential program shall ensure that each client is supplied with hygiene supplies.

501-1-16-10-Assessment : Compliant

501-1-16-10-Comment :

(11) Each residential program shall ensure that each sleeping area has a source of natural light and is ventilated by mechanical means or is equipped with a window that opens.

501-1-16-11-Assessment : Compliant

501-1-16-11-Comment :

(12) Each residential program shall ensure that each bed is solidly constructed and non-portable.

501-1-16-12-Assessment : Compliant

501-1-16-12-Comment :

(13) Each residential program shall ensure that each client is permitted to decorate and personalize the client's bedroom, while maintaining respect for each other resident and property.

501-1-16-13-Assessment : Compliant

501-1-16-13-Comment :

(14) Each residential program that provides common laundry for towels, bedding, or clothing shall provide separate containers for soiled and clean laundry.

501-1-16-14-Assessment : Compliant

501-1-16-14-Comment :

(15) Each residential program shall ensure that bedding and towels shall be laundered weekly and after each client is discharged.

501-1-16-15-Assessment : Compliant

501-1-16-15-Comment :

(16) Each residential program permitting clients to do the client's own laundry shall provide equipment and supplies for washing and drying.

501-1-16-16-Assessment : Compliant

501-1-16-16-Comment :

(17) Each residential program shall ensure that each individual is provided with at least 60 square feet in a multiple occupant bedroom and 80 square feet in a single occupant bedroom.

501-1-16-17-Assessment : Compliant

501-1-16-17-Comment :

(18) Each residential program serving individuals with disabilities shall house no more than two persons in each bedroom.

501-1-16-18-Assessment : Compliant

501-1-16-18-Comment :

(19) Each program utilizing seclusion rooms shall ensure the following:

(a) seclusion rooms measure a minimum of 75 square feet and have a minimum ceiling height of seven feet with no equipment, hardware or furnishings that obstruct staff's view of the client or present a hazard;

(b) seclusion rooms shall have either natural or mechanical ventilation with break resistant windows and either a break resistant two-way mirror or camera that allows for observation of the entire room;

(c) seclusion rooms may not have locking capability and may not be located in closets, bathrooms, unfurnished areas or other areas not designated as part of residential living space;

(d) bedrooms may not be utilized as a seclusion room and a seclusion room may not be utilized as a bedroom;

Select Compliance Level

501-1-16-19-Assessment : Compliant

501-1-16-19-Comment :

R501-1-17. Food Service Requirements.

(1) Each program that provides meals for four or more, but less than 16, clients shall comply with a local health inspection as described in Rule R392-110, Food Service and Sanitation in Residential Facilities.

501-1-17-1-Assessment : Compliant

501-1-17-1-Comment :

(2) Each program that provides meals shall ensure that meals are not used as incentive or punishment.

501-1-17-2-Assessment : Compliant

501-1-17-2-Comment :

(3) Each program that provides meals shall provide nutritional counseling to staff and clients and designate staff responsible for food service. As part of these responsibilities, each program shall ensure that designated staff:

(a) maintain a current list of each client with special nutritional needs;

(b) ensure that each client with special nutritional needs has food storage and a preparation area that is not exposed to any identified allergen or contaminant; and

(c) except in a day treatment program serving clients for less than ten hours a day, or outpatient programs serving clients for less than six consecutive hours a day, provide a variety of three nutritious meals a day that is:

(i) served from dietician or nutritionist approved menus; or

(ii) for programs serving individuals experiencing homelessness, serve meals as required by USDA standard homeless settings.

501-1-17-3-Assessment : Compliant

501-1-17-3-Comment :

(4) Each program that provides meals shall establish and post kitchen rules and privileges in a kitchen according to client needs and safe food handling practices.

501-1-17-4-Assessment : Compliant

501-1-17-4-Comment :

(5) Each program that provides meals shall provide adequate dining space for each client that is maintained in a clean and safe condition.

501-1-17-5-Assessment : Compliant

501-1-17-5-Comment :

(6) Each program that provides self-serve meals shall ensure that self-serve kitchen users are supervised, directed, and trained by a staff that has a Department of Health food handler's permit or is trained by Serv-Safe, USDA, or a comparable program.

501-1-17-6-Assessment : Compliant

501-1-17-6-Comment :

R501-1-18. Program Staffing.

(1) Each program shall ensure adequate staffing such that the current population can be safely supervised including, where necessary, more staff than required by the usual staffing ratio.

501-1-18-1-Assessment : Compliant

501-1-18-1-Comment :

(2) Each program shall identify a manager or qualified designee who shall be immediately available when the program is in operation or there shall be a qualified and trained substitute when the manager is absent or unavailable.

501-1-18-2-Assessment : Compliant

501-1-18-2-Comment :

(3) Each program that offers clinical services shall employ or consult with licensed professional staff that include an individual who is familiar with the program and the needs of each client.

501-1-18-3-Assessment : Compliant

501-1-18-3-Comment :

(4) Each program serving substance use disorder shall ensure each staff and client is screened for tuberculosis.

501-1-18-4-Assessment : Compliant

501-1-18-4-Comment :

(5) Each program managing, storing, or administering client medication shall identify a medical professional to be responsible for the medication management policy, medication oversight, and staff training regarding medication management.

501-1-18-5-Assessment : Compliant

501-1-18-5-Comment :

(6) Each program or person involved with the prescription, administration, or dispensing of controlled substances shall maintain appropriate medical or pharmacy licenses and DEA registration numbers as described in 21 CFR 1301.21.

501-1-18-6-Assessment : Compliant

501-1-18-6-Comment :

R501-1-19. Program Personnel Record Requirements.

(1) Each program shall create and maintain personnel information for each staff member, contracted employee, and volunteer.

501-1-19-1-Assessment : Compliant

501-1-19-1-Comment :

(2) Personnel information shall include:

(a) any applicable qualification, experience, certification, or license;

(b) any approved and current office background clearance, except as excluded in Section R501-14-17;

(c) a department code of conduct that is signed by the staff member, contracted employee, or volunteer;

(d) any training records with the date completed, topic, and the individual's signed acknowledgment of training completion to include:

(i) current CPR and First Aid certification;

(ii) current policy and procedure training; and

(iii) proof of annual department code of conduct and behavior management training;

(e) any grievances or complaints made by or against the individual and actions taken by the program; and

(f) each crisis intervention or critical incident report involving the individual.

Select Compliance Level

501-1-19-2-Assessment : Compliant

501-1-19-2-Comment :

R501-1-20. Program Client Record Requirements.

(1) A program shall maintain client information to include the following:

(a) client name, address, email address, phone numbers, date of birth and identified gender;

(b) emergency contact names, including legal guardian where applicable, and at minimum, the emergency contact's physical address, current email address or current phone numbers;

(c) a program serving substance use disorder clients shall maintain compliance with an initial and annual client tuberculosis screening results in each client record;

(d) any information that could affect health safety or well-being of the client including each medication, allergy, chronic condition or communicable disease;

(e) intake screening and assessment;

(f) discharge documentation;

(g) treatment or service plan;

(h) progress notes and services provided with date and signature of staff completing each entry;

(i) individualized assessment for restriction of access to on-site items that could be used as weapons for self-directed violence or as an intoxicant;

(j) any referral arrangements made by the program;

(k) client or guardian signed consent or court order of commitment to services in lieu of signed consent for each treatment and non-clinical service;

(l) summary of attendance and absences;

(m) any grievances or complaints made by or against the client and actions taken by the program;

(n) each crisis intervention or critical incident report involving the client; and

(o) any signed agreements and consent forms.

Select Compliance Level

501-1-20-1-Assessment : Compliant

501-1-20-1-Comment :

(2) A program shall document a plan detailing how each program staff and client file shall be maintained and remain available to the office and other agencies legally authorized to access the files for seven years regardless of whether the program remains licensed.

501-1-20-2-Assessment : Compliant

501-1-20-2-Comment :

R501-1-21. Program Intake and Discharge Requirements.

(1) A program shall complete an intake screening before accepting a client into the program. Intake screening shall assess at minimum:

(a) verification that the client meets the eligibility requirements of the program;

(b) verification that the client does not meet any of the exclusionary criteria that the program identified in policy as unable to serve;

(c) description of presenting needs;

(d) suicide risk screening;

(e) a program serving substance use disorder clients may not admit anyone who is unresponsive or unable to consent to care because the individual is experiencing convulsions, in shock, delirium tremens, in a coma, or unconscious; and

Select Compliance Level

501-1-21-1-Assessment : Compliant

501-1-21-1-Comment :

(2) A program serving incarcerated or court mandated justice involved clients shall:

(a) conduct a criminogenic risk assessment;

(b) comply with Justice Reinvestment Initiative certification requirements in accordance with Title R523 and R524; and

(c) separate high and low criminogenic risk populations.

Select Compliance Level

501-1-21-2-Assessment : Compliant

501-1-21-2-Comment :

(3) Following determination of eligibility, the client or parent or guardian shall sign and receive copies of the following agreements to be maintained as client records:

(a) fee agreement outlining costs of services including program, client, parent, or guardian responsibility for payment; and

(b) signed consent for treatment that outlines:

(i) rules of the program;

(ii) expectations of clients, parents, and guardians;

(iii) services to be provided;

(iv) Medicaid number, insurance information, and identification of any other entities that are billed for the client's services;

(v) client rights; and

(vi) licensing contact information.

Select Compliance Level

501-1-21-3-Assessment : Compliant

501-1-21-3-Comment :

(4) A discharge plan shall identify resources available to a client and include:

(a) reason for discharge or transfer;

(b) aftercare plan;

(c) summary of services provided; and

(d) progress evaluation.

Select Compliance Level

501-1-21-4-Assessment : Compliant

501-1-21-4-Comment :

R501-1-22. Residential Additional Program Intake and Discharge Requirements.

(1) An intake assessment shall be completed following an approved intake screening and no later than seven days from the admission date. The assessment shall consider and contain:

(a) gender identity and individualized assessment for bedroom and bathroom assignments;

(b) cultural background;

(c) dominant language and mode of communication;

(d) family history and dynamics;

(e) current and past health and medical history;

(f) social, psychological, developmental, vocational, and, as appropriate, educational factors;

(g) suicide risk screening; and

(h) authorization to serve and obtain emergency care.

Select Compliance Level

501-1-22-1-Assessment : Compliant

501-1-22-1-Comment :

(2) a residential program serving children shall inform parent/guardians and obtain signed verification of understanding that their children may be interviewed by a Licensing representative in accordance with 62A-2-106-1(k)

501-1-22-2-Assessment : Compliant

501-1-22-2-Comment :

(3) A program may not serve youth from out of state without a disruption plan as described in Section 62A-2-125 and, as applicable, Title 62A, Chapter 4a, Part 7, Interstate Compact Placement of Children.

501-1-22-3-Assessment : Compliant

501-1-22-3-Comment :

(4) Each congregate care disruption plan must contain the following:

(a) program must retain jurisdiction and responsibility for the youth while the youth remains in Utah;

(b) a program must complete an individualized disruption plan at the time of intake for each out of state client to include:

(i) who is responsible for the child's return if placement at the facility disrupts;

(ii) current emergency contact information to include the name, address, phone and email address of the parent or responsible party;

(iii) a signed statement from parent or responsible party outlining the plan for the youth in the event of an unplanned disruption in care; and

(iv) a plan for safe transportation either to the state of origin, the responsible party identified in Subsection R501-1-22(3)(a) or to another licensed congregate care program.

Select Compliance Level

501-1-22-4-Assessment : Compliant

501-1-22-4-Comment :

(5) Each congregate care program may demonstrate compliance with Subsections R501-1-22(2) and R501-1-22(3) by producing the 100A and 100B forms and disruption plan as required by the Interstate Compact for the Placement of Children (ICPC).

501-1-22-5-Assessment : Compliant

501-1-22-5-Comment :

(6) Each congregate Care program shall report private placements to the office as described in Section 62A-2-125 by completing the congregate care out of state placement survey on the Office of Licensing website no later than the fifth business day of each month.

501-1-22-6-Assessment : Compliant

501-1-22-6-Comment :

(7) Each congregate care program shall report each critical and non-critical restraint or seclusion to the office within one business day.

501-1-22-7-Assessment : Compliant

501-1-22-7-Comment :

(8) Each congregate care program that fails to comply with Section 62A-2-125 shall be fined the actual cost of care incurred by entities maintaining the youth for purposes of locating, housing, and transporting the youth.

501-1-22-8-Assessment : Compliant

501-1-22-8-Comment :

R501-1-23. Program Clinical Services.

(1) Each program providing clinical treatment shall assign a clinical director to ensure that assessment, treatment, and service planning practices are:

(a) regularly reviewed and updated;

(b) individualized; and

(c) designed to involve the participation of each client or each client's parent or guardian.

Select Compliance Level

501-1-23-1-Assessment : Compliant

501-1-23-1-Comment :

(2) Each program providing clinical treatment shall ensure that each person working directly with a client shall be informed of the client's individual treatment needs and advised of the best approach to working with that client.

501-1-23-2-Assessment : Compliant

501-1-23-2-Comment :

(3) Each program providing clinical treatment shall ensure that client treatment plans are developed and signed by a licensed clinical professional within 30 days of admission.

501-1-23-3-Assessment : Compliant

501-1-23-3-Comment :

(4) Each program providing clinical treatment shall ensure that discharge goals are identified in the initial treatment plan and treatment goals are structured around the identified discharge goals and objectives.

501-1-23-4-Assessment : Compliant

501-1-23-4-Comment :

(5) Each program providing clinical treatment shall ensure that each client identified for treatment receives individual treatment at least weekly.

(a) a non-residential program providing clinical treatment may alter the weekly therapy requirement as designated in the client treatment plan.

Select Compliance Level

501-1-23-5-Assessment : Compliant

501-1-23-5-a : ☐

501-1-23-5-Comment :

(6) Each program providing group counseling, family counseling, skills development, or other treatment shall ensure the treatment is offered and documented as prescribed in the treatment plan.

501-1-23-6-Assessment : Compliant

501-1-23-6-Comment :

R501-1-24. Program Policy and Procedure Requirements.

(1) A program shall develop, implement, and comply with policies and procedures sufficient to ensure client health and safety and meet the needs of the client population served.

501-1-24-1-Assessment :

501-1-24-1-Comment :

(2) Before initial licensure and as updates are made, policies and procedures shall be:

(a) submitted electronically to the office;

(b) approved by the office as required; and

(c) trained to each staff.

Select Compliance Level

501-1-24-2-Assessment :

501-1-24-2-Comment :

(3) Policy and procedures shall address:

(a) client eligibility as outlined in R501-1-13-1 (f);

(b) intake and discharge processes;

(c) client rights as outlined in R495-876 and including client responsibilities;

(d) staff and client grievance procedures;

(e) behavior management, addressing:

(i) appropriate and inappropriate behaviors of clients;

(ii) appropriate and inappropriate staff responses to client behaviors; and

(iii) staff response to a client leaving a program without permission;

(f) if applicable, seclusion policy;

(g) if applicable, restraint policy outlining that restraint is:

(i) only used as a temporary means to prevent harm to the client or in protection of others;

(ii) only to be completed by an individual with documented training in nonviolent crisis intervention and de-escalation techniques; and

(iii) is a last resort emergency safety measure only;

(h) instructions to staff regarding how to report and respond to significant criminal activity and significant medical emergencies;

(i) program plan for the prevention or control of infectious and communicable disease to include coordination with and following any guidance of the state or local health authorities, Center for Disease Control, and the department;

(j) critical incident reporting in accordance with Subsection R501-1-11(2);

(k) emergency procedures to instruct staff how to address incident reporting, continuity of care, transport, relocation, and client health and safety during natural disasters, extreme weather events, fire, utility or structural failures, or other unexpected disruptions to the program service;

(l) if transportation of clients is provided, the program shall meet the following requirements:

(i) insurance;

(ii) valid driver license;

(iii) adherence to Title 41, Motor Vehicles;

(iv) the driver to have a cell phone for immediate contact;

(v) vehicle maintenance;

(vi) emergency contact postings in the vehicle to include program name, address, and phone number to be called by first responders if needed;

(vii) vehicles to be equipped with a first aid kit as recommended by the American Red Cross; and

(viii) a policy to ensure that all clients exit the vehicle upon arriving at the destination unless directly supervised by a staff member;

(m) firearm policy that does not restrict constitutional or statutory rights regarding concealed weapons permits as described in Title 53, Chapter 5, Part 7, Concealed Firearms Act;

(n) smoking policy in accordance with Title 26, Chapter 38, Utah Indoor Clean Air Act;

(o) policies and procedures if clients are present in the program for six or more consecutive hours to address:

(i) provision of client meals and whether meals will be program-prepared, catered, or self-provided; and

(ii) administration of required medication if a program manages, stores or administers medication;

(p) description of any supplemental or contracted services that may be provided unrelated to the treatment or service plan or outside the scope of the license to include:

(i) summer camp;

(ii) wilderness excursion;

(iii) transportation;

(iv) extended outing;

(v) travel out of the state or country;

(vi) any supplemental machines or equipment, including training on their utilization and maintenance;

(vii) gaining informed consent from each client or client's parent or guardian for voluntary participation in these supplemental services; and

(viii) securing each necessary license, certification, or state and local permission before offering these services or operating with clients in a temporary or satellite location;

(q) unplanned discharge policy;

(r) suicide prevention policy addressing how to manage clients who screen with elevated risk levels;

(s) non-discrimination policy that includes:

(i) a prohibition of abuse, discrimination, and harassment based on sex, gender identity, or sexual orientation;

(ii) policy and procedure content described in Section 62a-2-124;

(iii) a program requiring uniforms shall only permit gender neutral selection;

(iv) assurance that treatment practices and staff training are trauma informed to identify and eliminate triggers for re-traumatization;

(v) outline the consequences for staff or client abuse or harassment of staff or clients on the basis of gender identification or sexual orientation;

(t) consequences for staff acting outside their training or policy and procedure; and

(u) record retention.

Select Compliance Level

501-1-24-3-Assessment :

501-1-24-3-Comment :

(4) Program-specific policies shall address any unique circumstances regarding physical facility, supervision, community safety and mixing populations.

501-1-24-4-Assessment :

501-1-24-4-Comment :

(5) Record retention policy shall describe the program's plan and responsibility for retaining each client record for seven years or until a client turns 21 years of age, whichever comes later.

501-1-24-5-Assessment :

501-1-24-5-Comment :

(7) Record retention policy shall describe the program's plan and responsibility for retaining each staff records for seven years.

501-1-24-7-Assessment :

501-1-24-7-Comment :

(8) In accordance with Section 63G-2-309, a program may submit a written claim of business confidentiality and a concise statement of reasons supporting the claim of business confidentiality for records the program submits to the office that the program believes should be protected under Subsection 63G-2-305(1) or 63G-2-305(2), including program policies and procedures.

501-1-24-8-Assessment :

R501-1-25. Additional Policy and Procedure Requirements for Residential Programs.

(1) A program that provides meals for clients shall have and follow a food service policy. The food service policy must include:

(a) staff and client training on the policy;

(b) procedures for identifying and accommodating clients with special dietary needs;

(c) allowances for nutritious snacks to be available during restricted hours if the program restricts access to food and kitchen equipment;

(d) if serving parents and their children, requirements for consenting adult clients to maintain full responsibility for their, and their children's', special dietary needs;

(e) a written policy for when meals are prepared by clients to include the following:

(i) rules and privileges of kitchen use;

(ii) menu planning and procedures;

(iii) sharing self-prepared food;

(iv) nutrition and sanitation requirements;

(v) schedule of responsibilities; and

(vi) shopping and storage responsibilities;

(f) a residential program, excluding residential treatment program, may allow for client independence and responsibility for their own supplies, food, laundry or transportation with policies that outline resources and responsibility for the provision of these items; a program shall assist clients on a limited basis if they are temporarily unable to provide these items or services for themselves.

501-1-25-1-Assessment :

501-1-25-1-Comment :

(2) A program managing, storing, or administering client medications shall have and follow a medication management policy to require:

(a) program and client responsibility for medication including storage and administration of medications on-site and, as applicable, when staff and clients are off-site in program related activities;

(b) if applicable, medication self-administration policy;

(c) if storing and administering medications, training required to administer medication and the process to be followed;

(d) recording medication dosages according to prescriptions;

(e) monitoring and recording effects and side effects of medications; and

(f) Logging doses and recording and reporting medication errors.

Select Compliance Level

501-1-25-2-Assessment :

501-1-25-2-Comment :

(3) Policy to train staff to identify and address:

(a) clients who pose a risk of violence;

(b) clients in possession of contraband;

(c) clients who are at risk for suicide;

(d) managing clients with mental health concerns;

(e) identifying the signs and symptoms of clients presenting under the influence of substances or alcohol; and

(f) prescribed staff responses to any of the circumstances listed in Subsection R501-1-25(3), including ongoing monitoring and assessment for remaining in the program.

Select Compliance Level

501-1-25-3-Assessment :

501-1-25-3-Comment :

(4) Policy regarding the care, vaccination, licensure, and maintenance of any animals on-site to include:

(a) assessment of pet allergies for any clients interacting with animals in the program;

(b) maintenance of required examinations, registrations, and vaccinations; and

(c) supervision of clients in the presence of animals.

501-1-25-4-Assessment :

501-1-25-4-Comment :

(5) Client belongings policy that addresses:

(a) initial and updated inventory signed by the client;

(b) storage and return of each client belonging to the client or client's guardian at the time of discharge; and

(c) program shall replace any lost or stolen items for which the program is responsible.

Select Compliance Level

501-1-25-5-Assessment :

501-1-25-5-Comment :

(6) A program managing funds for client allowances must document each expense.

501-1-25-6-Assessment :

501-1-25-6-Comment :

(7) A residential program shall develop and follow a policy for providing separate space for sick clients

501-1-25-7-Assessment :

501-1-25-7-Comment :

(8) A ratio of one staff to one client during transports is only permissible when the program has conducted a safety assessment that indicates that client and staff safety is reasonably assured.

501-1-25-8-Assessment :

501-1-25-8-Comment :

R501-1-26. Congregate Care Program Additional Requirements.

(1) A Congregate Care Program may not utilize any behavior management technique, restraint, seclusion or curriculum unless it has been approved by the office.

501-1-26-1-Assessment :

501-1-26-1-Comment :

(2) The program's licensed clinical professional shall conduct regular reviews of client restraints, seclusions, behavioral interventions, and time outs to inform processing discussions with clients and training for direct care staff.

501-1-26-2-Assessment :

501-1-26-2-Comment :

(3) A congregate care program shall have a contraband policy including what constitutes contraband and how the program ensures restriction of client access to contraband and dangerous weapons or materials.

(a) Strip searches and body cavity searches are prohibited by Section 62A-2-123 without documented, individualized justification for protection of an individual's health and safety.

(b) Strip search and body cavity search policies may not allow for strip searches to be performed as a universal practice and may only allow these searches to be conducted with individualized justification, documentation, and in accordance with a detailed policy approved by the office.

(c) Strip searches and body cavity searches may only be performed in congregate care by a medical professional outside of the line of sight of direct care staff.

Select Compliance Level

501-1-26-3-Assessment :

501-1-26-3-Comment :

(4) A congregate care suicide prevention policy may only be approved by the office if it complies with Subsection 62A-2-123(5)

(a) a suicide prevention policy may not allow a blanket practice of placing beds in hallways or common areas for staff convenience, client dignity must be preserved and therapist or client authorization is required for displacing a child from normal sleeping arrangements.

Select Compliance Level

501-1-26-4-Assessment :

501-1-26-4-Comment :

(5) A congregate care behavior management policy may only be approved by the office if, in addition to complying with Section 62A-2-123, the policy reflects the following:

(a) each program staff shall employ behavior management techniques that are trauma informed and appropriate for the client's age, behavior, needs, developmental level, and past experiences and shall defer to the least restrictive method of behavior management available to control a situation;

(b) each program staff shall only use behavior management techniques that emphasize de-escalation and promote self-control, self-esteem, and independence; and

(c) each program shall identify a behavior management curriculum that emphasizes de-escalation and is compliant with Section 62A-2-123;

(d) only direct care staff familiar with the child and the child's needs shall conduct physical restraint;

(e) restraint will only be used if it will not cause undue physical discomfort, harm, or pain to the client;

(f) interventions that use painful stimuli are prohibited as a general practice;

(g) physical restraint shall be used only as an emergency, temporary means of physical containment to protect the consumer, other persons, or property from immediate harm;

(h) restraint may only continue as long as the client presents an immediate danger to self or others;

(i) physical restraint may not be used as a convenience to staff, a substitute for programming or associated with punishment in any way;

(j) clients, non-direct care staff, or other unauthorized individuals may not use any form of restraint;

- (k) staff may not use physical work assignments or activities that inflict pain as behavior management techniques;
- (l) appropriate de-escalation techniques and alternatives to restraint or seclusion;
- (m) thresholds for restraints;
- (n) the physiological and psychological impact of restraint;
- (o) appropriate monitoring;
- (p) staff training to recognize the physical signs of distress, positional asphyxia, and obtaining medical assistance;
- (q) staff training on how to intervene if another staff member fails to follow correct procedures when using a restraint;
- (r) staff training on time limits for restraints;
- (s) the process for obtaining clinical approval for continued restraints;
- (t) the procedure for documenting and reporting restraints;
- (u) the procedure for processing restraints with clients;
- (v) the procedure for following up with staff after a restraint;
- (w) how staff shall address injuries and complaints;
- (x) department code of conduct; and
- (y) client rights listed in the provider code of conduct.

Select Compliance Level

501-1-26-5-Assessment :

(6) A congregate care seclusion policy may only be approved by the office if it reflects the following:

(a) seclusion is only used to ensure the immediate safety of the child or others and must be terminated as soon as the risks have been mitigated, not to exceed four hours without clinical justification;

(b) staff who are familiar to the child must directly supervise the child during the seclusion;

(c) staff supervising seclusion shall ensure that any potentially harmful items or objects are removed from the seclusion environment;

(d) seclusion rooms shall measure a minimum of 75 square feet and have a minimum ceiling height of seven feet with no equipment, hardware or furnishings that obstruct staff's view of the client or present a hazard;

(e) seclusion rooms shall have either natural or mechanical ventilation with break resistant windows and either a break resistant two-way mirror or camera that allows for observation of the entire room;

(f) seclusion rooms may not have locking capability and may not be located in closets, bathrooms, unfurnished areas or other areas not designated as part of residential living space;

(g) bedrooms may not be utilized as a seclusion room and seclusion rooms may not be utilized as bedrooms;

(h) seclusion shall be documented in detail by the staff involved in initiating and supervising the seclusion episode;

(i) seclusion episodes of more than two in a 24-hour period require clinical review and documentation regarding client suitability for remaining in the program; and

(j) client time-out may be used when addressing behavioral issues if:

(i) a client in time-out is never physically prevented from leaving the time-out area;

(ii) it takes place away from the area of activity or from other clients, such as in the client's bedroom;

(iii) staff monitors the client while in time-out; and

(iv) the reason for and duration of time-out is documented by staff on duty when it occurs.

Select Compliance Level

501-1-26-6-Assessment :

501-1-26-6-Comment :

(7) before a congregate care program may accept a client or send a discharging client who is transported by a youth transportation company as defined in 62A-2- 101(50), the program must:

(a) Ensure that the transport company is registered with the Office of Licensing

(b) Ensure that the transporter has an Office approved background clearance, and

(c) Identify all out of state means of transport in the congregate care out of state monthly placement survey outlined in R501-1-22-5.

Select Compliance Level

501-1-26-7-Assessment :

501-1-26-7-Comment :

Violations

Violations:

Signatures

Licensee:

Amanda Lente

12/15/2022

Inspector:

Amanda Lente

12/15/2022